

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>

5500000160813746

Process Date: 05/21/2020

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To: CROSSWRIGHT, EARL J
1021 CHANDELLE LAKE DR
PENSACOLA, FL 32507-8125

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.

The response received from a self-query belongs to the subject of the self-query. Subjects may share the information contained in their own self-query responses with whomever 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.

CONFIDENTIAL DOCUMENT - FOR AUTHORIZED USE ONLY

CROSSWRIGHT, EARL J - SELF-QUERY RESPONSE**A. SUBJECT IDENTIFICATION INFORMATION** (Recipients should verify that subject identified is, in fact, the subject of interest.)

Practitioner Name:	CROSSWRIGHT, EARL J	Gender:	MALE
Date of Birth:	12/29/1960		
Delivery Address:	1021 CHANDELLE LAKE DR, PENSACOLA, FL 32507-8125		
Social Security Number:	***-**-6199	DEA:	BC3468394
NPI:	1376532739	FEIN:	562368949
UPIN:	F46081		
License:	PHYSICIAN (MD), ME63345, FL, GENERAL PRACTICE/FAMILY PRACTICE		
Professional School(s):	HOWARD UNIVERSITY (1988)		

B. PAYMENT INFORMATION

Credit Card Information:	XXXXXXXXXXXX8638 (11/2022)	NPDB Bill Reference Number:	N69255194
NPDB Charge:	\$8.00	Additional Paper Copies Requested:	1
Transaction Date:	05/21/2020		

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 05/21/2020**The following report types have been searched:**

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

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

DIVISION OF MEDICAL QUALITY ASSURANCE**STATE LICENSURE****Basis for Action:** - NEGLIGENCE - ERROR IN PRESCRIBING, DISPENSING OR ADMINISTERING MEDICATION

Initial Action:	- REPRIMAND OR CENSURE	Date of Action:	08/30/2004
DCN:	5500000034836733		

AMERICAN CONTINENTAL INSURANCE COMPANY**MEDICAL MALPRACTICE PAYMENT****Basis for Action:** - MEDICATION: NOT OTHERWISE CLASSIFIED

Initial Action:	- SETTLEMENT	Date of Action:	08/14/1998
DCN:	5500000010752861		

DIVISION OF MEDICAL QUALITY ASSURANCE**LICENSE****Basis for Action:** - INFORMATION NOT PROVIDED

Initial Action:	- LICENSE PROBATION: ALLOWING UNLICENSED PERSON TO PRACTICE	Date of Action:	10/30/1996
DCN:	5500000025471277		
Subsequent Action:	- LICENSE-MISC.: LICENSE RESTORED OR REINSTATED	Date of Action:	11/06/1997
DCN:	5500000007897948		

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

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CROSSWRIGHT, EARL JAY**CROSSWRIGHT, EARL JAY*****DIVISION OF MEDICAL QUALITY ASSURANCE*****STATE LICENSURE ACTION****Date of Action: 08/30/2004****Initial Action****Basis for Initial Action**

- REPRIMAND OR CENSURE

- NEGLIGENCE
- ERROR IN PRESCRIBING, DISPENSING OR
ADMINISTERING MEDICATION**A. REPORTING
ENTITY**

Entity Name: DIVISION OF MEDICAL QUALITY ASSURANCE *

Address: CLIENT SERVICES UNIT
4052 BALD CYPRESS WAY, BIN C01

City, State, Zip: TALLAHASSEE, FL 32399-3251

Country:

Name or Office: AMY CARRAWAY, OPERATIONAL SUPPORT SVC

Title or Department: FLORIDA DEPARTMENT OF HEALTH

Telephone: (850) 245-4120

Entity Internal Report Reference: 2002-21818

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 08/15/2018:

Entity Name: DIVISION OF MEDICAL QUALITY ASSURANCE

Address: BUREAU OF OPERATIONS
4052 BALD CYPRESS WAY BIN C-01

City, State, Zip: TALLAHASSEE, FL 32399-0001

Country:

**B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)**

Subject Name: CROSSWRIGHT, EARL JAY

Other Name(s) Used:

Gender: MALE

Date of Birth: 12/29/1960

Organization Name:

Work Address:

City, State, ZIP:

Organization Type:

Home Address: 841 WEST MALLORY STREET

City, State, ZIP: PENSACOLA, FL 32509-6321

Deceased: UNKNOWN

Federal Employer Identification Numbers (FEIN):

Social Security Numbers (SSN): ***-**-6199

Individual Taxpayer Identification Numbers (ITIN):

National Provider Identifiers (NPI):

Professional School(s) & Year(s) of Graduation: HOWARD UNIVERSITY (1988)

Occupation/Field of Licensure: PHYSICIAN (MD)

State License Number, State of Licensure: ME 63345, FL

Specialty: GENERAL PRACTICE/FAMILY PRACTICE

Drug Enforcement Administration (DEA) Numbers:

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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**

Type of Adverse Action: STATE LICENSURE

Basis for Action: NEGLIGENCE (13)
ERROR IN PRESCRIBING, DISPENSING OR ADMINISTERING
MEDICATION (H5)Name of Agency or Program
That Took the Adverse Action
Specified in This Report:

BOARD OF MEDICINE

Adverse Action

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

Date Action Was Taken: 08/30/2004

Date Action Became Effective: 08/30/2004

Length of Action: PERMANENT

Total Amount of Monetary Penalty,
Assessment and/or Restitution:

\$ 10,838.97

Is Subject Automatically Reinstated After
Adverse Action Period Is Completed?:

YES

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:ALLEGATIONS OF FAILING TO PRACTICE MEDICINE WITH THAT
LEVEL OF CARE, SKILL AND TREATMENT WHICH IS RECOGNIZED
AS BE ACCEPTABLE; AND PRESCRIBING, DISPENSING,
ADMINISTERING, MIXING OR PREPARING A LEGEND DRUG, OTHER
THAN IN THE COURSE OF THE PHYSICIAN'S PROFESSIONAL
PRACTICE.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 has appealed the reported adverse action.

**D. SUBJECT
STATEMENT**

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

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.

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☐ 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: 09/09/2004

Date of Most Recent Change: 09/09/2004

**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): 1376532739

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

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DISCLOSURE HISTORY

Report Number: 5500000034836733

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
03/02/2005	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

Date Released	Entity Name
06/09/2005	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

Date Released	Entity Name
08/05/2005	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996

Date Released	Entity Name
02/08/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

Date Released	Entity Name
03/24/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815

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Date Released	Entity Name
03/29/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
07/17/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
07/25/2006	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
11/08/2006	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
11/10/2006	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
12/12/2006	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/28/2006	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803

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Date Released	Entity Name
03/01/2007	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/13/2007	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
11/09/2007	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
01/15/2008	MD MEDICARECHOICE, INC. 5501 W WATERS AVE SUITE 401 TAMPA, FL 33634 (813) 901-9208
02/27/2008	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
04/25/2008	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
06/12/2008	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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Date Released	Entity Name
01/16/2009	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
03/12/2009	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
03/19/2009	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
05/28/2009	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/01/2009	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
09/29/2009	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
10/20/2009	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440

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Date Released	Entity Name
11/09/2009	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/01/2009	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
06/09/2010	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
06/17/2010	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/19/2010	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
11/02/2010	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
02/09/2011	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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Date Released	Entity Name
04/06/2011	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
04/14/2011	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
08/08/2011	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
12/09/2011	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
04/19/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
05/03/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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Date Released	Entity Name
05/29/2012	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
06/04/2012	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
09/25/2012	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/16/2012	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
02/14/2013	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/03/2013	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/25/2013	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597

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Date Released	Entity Name
06/25/2013	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
02/21/2014	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
04/30/2014	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
05/15/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/31/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
11/12/2014	WELL CARE OF FLORIDA, INC. 8735 HENDERSON RD REN2 TAMPA, FL 33634 (813) 206-3839
01/13/2015	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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Date Released	Entity Name
06/18/2015	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
07/07/2015	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/12/2015	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
12/31/2015	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
03/02/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
03/22/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
06/07/2016	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008

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Date Released	Entity Name
11/01/2016	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403

Date Released	Entity Name
02/22/2017	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

Date Released	Entity Name
03/05/2017	SELF-QUERIER

Date Released	Entity Name
03/17/2017	SELF-QUERIER

Date Released	Entity Name
03/28/2017	SELF-QUERIER

Date Released	Entity Name
04/19/2017	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690

Date Released	Entity Name
05/02/2017	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169

Date Released	Entity Name
05/23/2017	SUNSHINE STATE HEALTH PLAN 1301 INTERNATIONAL PKWY STE 400 SUNRISE, FL 33323 (954) 514-1721

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Date Released	Entity Name
06/26/2017	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
08/21/2017	SOUTH FLORIDA COMMUNITY CARE NETWORK, LLC 1643 NW 136TH AVE STE 200 BLVD H SUNRISE, FL 33323 (954) 622-3394
03/05/2018	MAGELLAN HEALTH 8621 ROBERT FULTON DR COLUMBIA, MD 21046 (410) 953-3582
04/10/2018	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
08/03/2018	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
11/15/2018	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
01/15/2019	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690

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Date Released	Entity Name
03/05/2019	ESCAMBIA COMMUNITY CLINICS, INC. (ECC) DBA COMMUNITY HEALTH 2315 W JACKSON ST PENSACOLA, FL 32505 (850) 436-4630
04/24/2019	BRIGHT HEALTH INSURANCE COMPANY 219 N 2ND ST STE 400 MINNEAPOLIS, MN 55401 (402) 440-4568
06/06/2019	UNITEDHEALTHCARE NATIONAL CREDENTIALING 5900 PARKWOOD PL DUBLIN, OH 43016 (614) 698-5927
12/24/2019	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169
02/05/2020	PRIME HEALTH SERVICES, INC. 331 MALLORY STATION RD FRANKLIN, TN 37067 (615) 565-9011
05/11/2020	CENTENE CORPORATION 7700 FORSYTH BLVD # 4 FLOOR / BUILDING A SAINT LOUIS, MO 63105 (314) 445-0371
05/21/2020	SELF-QUERIER

NATIONAL PRACTITIONER DATA BANK

NPDB

P.O. Box 10832
Chantilly, VA 20153-0832

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DCN: 5500000034836733

Process Date: 09/09/2004

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CROSSWRIGHT, EARL JAY

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Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>DCN: 5500000010752861
Process Date: 08/26/1998
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CROSSWRIGHT, EARL**CROSSWRIGHT, EARL****AMERICAN CONTINENTAL INSURANCE COMPANY****MEDICAL MALPRACTICE PAYMENT REPORT****Date of Action: 08/14/1998****Initial Action****Basis for Initial Action**

- SETTLEMENT

- MEDICATION: NOT OTHERWISE CLASSIFIED

**A. REPORTING
ENTITY**

Entity Name: AMERICAN CONTINENTAL INSURANCE COMPANY *

Address: 540 LAKE COOK ROAD

City, State, Zip: DEERFIELD, IL 60015

Country:

Name or Office: JUNE BOUCAUD - BI CLAIM OPERATIONS

Title or Department: OPERATIONS ANALYST

Telephone: (860) 277-9838

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 04/08/2019:

Entity Name: AMERICAN CONTINENTAL INSURANCE COMPANY

Address: ONE TOWER SQUARE - 07MS

City, State, Zip: HARTFORD, CT 06183-0001

Country:

**B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)**

Subject Name: CROSSWRIGHT, EARL

Other Name(s) Used:

Gender: MALE

Date of Birth: 12/29/1960

Organization Name:

Work Address: 5505 NORTH 'W' STREET

City, State, ZIP: PENSACOLA, FL 32505

Home Address:

City, State, ZIP:

Deceased: NO

Social Security Numbers (SSN):

Professional School(s) & Year(s) of Graduation: HOWARD UNIVERSITY (1983)

Occupation/Field of Licensure: PHYSICIAN (MD)

State License Number, State of Licensure: ME0063345, FL

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

**C. INFORMATION
REPORTED**

Date of Report: 08/26/1998

Act/Omission Code: MEDICATION: NOT OTHERWISE CLASSIFIED (390)

Date of Act/Omission: 10/05/1994

Payment Date: 08/14/1998

Multiple or Single Payment: SINGLE

Amount of This Payment: \$ 675,000.00

Total Amount of Judgment or Settlement: \$ 675,000.00

NPDBP.O. Box 10832
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Process Date: 08/26/1998
Page: 2 of 2
CROSSWRIGHT, EARL

Payment Result of: SETTLEMENT
Number of Practitioners for Whom Payment is Made: 1
Relationship of Entity to the Practitioner: INSURANCE COMPANY
Date of Judgment/Settlement: 07/27/1998
Adjudicative Case Number:
Adjudicative Body Name:
Court File Number:
Reporter's Description of Act or Omission: ALLEGED NEGLIGENT ADMINISTRATION OF FASTINE AND PLEGINE
STIMULANT DRUGS RESULTING IN CARDIAC ARREST - DEATH
Reporter's Description of the Judgment or Settlement: LUMP SUM PAYMENT OF \$675,000.

**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: 08/26/1998

Date of Most Recent Change: 08/26/1998

**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): 1376532739

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**CONFIDENTIAL DOCUMENT - FOR AUTHORIZED USE ONLY**

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CROSSWRIGHT, EARL

DISCLOSURE HISTORY

Report Number: 5500000010752861

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
02/12/1999	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

Date Released	Entity Name
04/08/1999	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

Date Released	Entity Name
06/21/1999	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

Date Released	Entity Name
07/01/1999	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981

Date Released	Entity Name
09/09/1999	PANHANDLE PHYSICIANS HEALTH NET - PPFL01 8800 UNIVERSITY PKWY, BUILDING C, SUITE PENSACOLA, FL 32514 40784 337-75

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Process Date: 08/26/1998
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CROSSWRIGHT, EARL

Date Released	Entity Name
11/29/1999	COVENTRY HEALTH CARE OF GEORGIA, INC. 1100 CIRCLE 75 PARKWAY SUITE 1400 ATLANTA, GA 30339 (800) 470-2004
01/25/2000	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
02/14/2000	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/22/2001	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
03/29/2001	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
07/10/2001	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
08/03/2001	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847

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Process Date: 08/26/1998
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CROSSWRIGHT, EARL

Date Released	Entity Name
09/07/2001	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
09/27/2001	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
11/08/2001	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
01/24/2002	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
02/05/2002	UNITED HEALTHCARE- FLORIDA GULF COAST 4350 WEST CYPRESS STREET TAMPA, FL 33607 81335 751-14
01/24/2003	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
03/11/2003	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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CROSSWRIGHT, EARL

Date Released	Entity Name
04/01/2003	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
05/30/2003	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
02/02/2004	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
04/13/2004	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/02/2005	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/09/2005	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
08/05/2005	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996

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CROSSWRIGHT, EARL

Date Released	Entity Name
02/08/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
03/24/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/29/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
07/17/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
07/25/2006	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
11/08/2006	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
11/10/2006	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403

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Process Date: 08/26/1998
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CROSSWRIGHT, EARL

Date Released	Entity Name
12/12/2006	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/28/2006	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
03/01/2007	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/13/2007	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
11/09/2007	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
01/15/2008	MD MEDICARECHOICE, INC. 5501 W WATERS AVE SUITE 401 TAMPA, FL 33634 (813) 901-9208
02/27/2008	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597

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Process Date: 08/26/1998
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CROSSWRIGHT, EARL

Date Released	Entity Name
04/25/2008	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
06/12/2008	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
01/16/2009	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
03/12/2009	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
03/19/2009	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
05/28/2009	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/01/2009	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512

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CROSSWRIGHT, EARL

Date Released	Entity Name
09/29/2009	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
10/20/2009	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
11/09/2009	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/01/2009	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
06/09/2010	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
06/17/2010	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/19/2010	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008

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CROSSWRIGHT, EARL

Date Released	Entity Name
11/02/2010	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
02/09/2011	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
04/06/2011	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
04/14/2011	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
08/08/2011	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
12/09/2011	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
04/19/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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CROSSWRIGHT, EARL

<u>Date Released</u>	<u>Entity Name</u>
05/03/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
05/29/2012	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
06/04/2012	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
09/25/2012	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/16/2012	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
02/14/2013	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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CROSSWRIGHT, EARL

Date Released	Entity Name
06/03/2013	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/25/2013	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
06/25/2013	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
02/21/2014	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
04/30/2014	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
05/15/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/31/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403

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CROSSWRIGHT, EARL

<u>Date Released</u>	<u>Entity Name</u>
11/12/2014	WELL CARE OF FLORIDA, INC. 8735 HENDERSON RD REN2 TAMPA, FL 33634 (813) 206-3839
01/13/2015	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/18/2015	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
07/07/2015	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/12/2015	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
12/31/2015	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
03/02/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320

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CROSSWRIGHT, EARL

Date Released	Entity Name
03/22/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
06/07/2016	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
11/01/2016	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
02/22/2017	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
03/05/2017	SELF-QUERIER
03/17/2017	SELF-QUERIER
03/28/2017	SELF-QUERIER
04/19/2017	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690

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CROSSWRIGHT, EARL

Date Released	Entity Name
05/02/2017	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169
05/23/2017	SUNSHINE STATE HEALTH PLAN 1301 INTERNATIONAL PKWY STE 400 SUNRISE, FL 33323 (954) 514-1721
06/26/2017	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
03/05/2018	MAGELLAN HEALTH 8621 ROBERT FULTON DR COLUMBIA, MD 21046 (410) 953-3582
04/10/2018	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
08/03/2018	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
11/15/2018	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996

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CROSSWRIGHT, EARL

Date Released	Entity Name
01/15/2019	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690
03/05/2019	ESCAMBIA COMMUNITY CLINICS, INC. (ECC) DBA COMMUNITY HEALTH 2315 W JACKSON ST PENSACOLA, FL 32505 (850) 436-4630
06/06/2019	UNITEDHEALTHCARE NATIONAL CREDENTIALING 5900 PARKWOOD PL DUBLIN, OH 43016 (614) 698-5927
12/24/2019	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169
02/05/2020	PRIME HEALTH SERVICES, INC. 331 MALLORY STATION RD FRANKLIN, TN 37067 (615) 565-9011
05/11/2020	CENTENE CORPORATION 7700 FORSYTH BLVD # 4 FLOOR / BUILDING A SAINT LOUIS, MO 63105 (314) 445-0371
05/21/2020	SELF-QUERIER

NATIONAL PRACTITIONER DATA BANK

NPDB

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CROSSWRIGHT, EARL

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>DCN: 5500000025471277
Process Date: 05/01/2002
Page: 1 of 3
CROSSWRIGHT, EARL JAY**CROSSWRIGHT, EARL JAY*****DIVISION OF MEDICAL QUALITY ASSURANCE*****LICENSE ACTION****Date of Action: 10/30/1996****Initial Action****Basis for Initial Action**- LICENSE PROBATION: ALLOWING UNLICENSED
PERSON TO PRACTICE

- INFORMATION NOT PROVIDED

This action has related reports:

Initial Action: [This Action]**Subsequent Action:** - LICENSE-MISC.: LICENSE RESTORED OR
REINSTATED**Date of Action:** 11/06/1997 **DCN:** 5500000007897948**A. REPORTING
ENTITY**

Entity Name: DIVISION OF MEDICAL QUALITY ASSURANCE *

Address: CLIENT SERVICES UNIT

4052 BALD CYPRESS WAY, BIN C01

City, State, Zip: TALLAHASSEE, FL 32399-3251

Country:

Name or Office: AMY CARRAWAY, OPERATIONAL SUPPORT SVC

Title or Department: FLORIDA DEPARTMENT OF HEALTH

Telephone: (850) 245-4120

Entity Internal Report Reference:

Type of Report: CORRECTION

Previous Report Number: 5500000004520593 (Please destroy all copies of the
previous report)*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 08/15/2018:

Entity Name: DIVISION OF MEDICAL QUALITY ASSURANCE

Address: BUREAU OF OPERATIONS

4052 BALD CYPRESS WAY BIN C-01

City, State, Zip: TALLAHASSEE, FL 32399-0001

Country:

**B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)****NOTE: Information marked with an asterisk (*) was added, corrected, or removed.**

Subject Name: CROSSWRIGHT, EARL JAY

Other Name(s) Used:

Gender: UNKNOWN

* Date of Birth: 12/29/1960

Organization Name: EARL JAY CROSSWRIGHT, M.D.

Work Address: 3505 NORTH W. STREET

City, State, ZIP: PENSACOLA, FL 32505

Home Address:

City, State, ZIP:

Deceased: NO

Social Security Numbers (SSN): ***-**-6199

Professional School(s) & Year(s) of Graduation: HOWARD UNIVERSITY (1988)

Occupation/Field of Licensure: PHYSICIAN (MD)

CONFIDENTIAL DOCUMENT - FOR AUTHORIZED USE ONLY

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>**DCN:** 5500000025471277
Process Date: 05/01/2002
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CROSSWRIGHT, EARL JAYState License Number, State of Licensure: ME 0063345, FL
Drug Enforcement Administration (DEA) Numbers:**C. INFORMATION
REPORTED****Date of the Report:** 05/01/2002
Type of Action Taken: LICENSE (L)
Action Classification: LICENSE PROBATION: ALLOWING UNLICENSED PERSON TO
PRACTICE (23000)**Date of the Action:** 10/30/1996
Length of Action: 12 MONTHS, 0 DAYS
Effective Date: 11/06/1996**Description of Act(s) or Omission(s)
or Other Reasons for Action Taken:** DR. CHGD W/DELEGATING PROF. RESPONSIBILITIES TO AN
UNQUALIFIED PERSON; PRESIGNING BLANK RX FORMS; AIDING AN
UNLICENSED PERSON TO PRACTICE MEDICINE; FAILING TO KEEP
ADEQUATE MEDICAL RECORDS JUSTIFYING COURSE OF TX OF THE
PT. CONSENTED TO \$3K FINE TO BE PAID W/IN 60 DAYS OF
11/6/96; PROBATION FOR PERIOD OF 1 YR W/INDIRECT
SUPERVISION; COMPLETE CME COURSE SPECIFIED BY BOARD W/IN
ONE YR OF 11/6/96; SUCCESSFULLY COMPLETE BOARD OF
MEDICINE LAWS & RULES EXAM W/IN 2 MTHS OF 11/6/96;
CONTINUED COMPLIANCE W/PHYSICIAN RECOVERY NETWORK
CONTRACT; QUALITY ASSURANCE REVIEW OF DR.S PRACTICE.**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: 12/18/1996
Date of Most Recent Change: 05/01/2002**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): 1376532739

NPDB

P.O. Box 10832
Chantilly, VA 20153-0832

<https://www.npdb.hrsa.gov>

DCN: 5500000025471277
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CROSSWRIGHT, EARL JAY

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

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>DCN: 5500000025471277
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Page: 1 of 17
CROSSWRIGHT, EARL JAY

DISCLOSURE HISTORY

Report Number: 5500000025471277

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
01/24/2003	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
03/11/2003	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
04/01/2003	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
05/30/2003	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
02/02/2004	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
04/13/2004	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/02/2005	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/09/2005	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
08/05/2005	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
02/08/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
03/24/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/29/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815

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Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>**DCN:** 5500000025471277**Process Date:** 05/01/2002**Page:** 3 of 17

CROSSWRIGHT, EARL JAY

Date Released	Entity Name
07/17/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
07/25/2006	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
11/08/2006	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
11/10/2006	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
12/12/2006	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/28/2006	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
03/01/2007	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/13/2007	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
11/09/2007	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
01/15/2008	MD MEDICARECHOICE, INC. 5501 W WATERS AVE SUITE 401 TAMPA, FL 33634 (813) 901-9208
02/27/2008	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
04/25/2008	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
06/12/2008	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
01/16/2009	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
03/12/2009	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
03/19/2009	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
05/28/2009	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/01/2009	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
09/29/2009	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
10/20/2009	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
11/09/2009	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/01/2009	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
06/09/2010	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
06/17/2010	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/19/2010	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
11/02/2010	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
02/09/2011	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
04/06/2011	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
04/14/2011	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
08/08/2011	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
12/09/2011	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
04/19/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
05/03/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
05/29/2012	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
06/04/2012	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120
09/25/2012	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/16/2012	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
02/14/2013	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/03/2013	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/25/2013	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
06/25/2013	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
02/21/2014	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
04/30/2014	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
05/15/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/31/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
11/12/2014	WELL CARE OF FLORIDA, INC. 8735 HENDERSON RD REN2 TAMPA, FL 33634 (813) 206-3839
01/13/2015	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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Date Released	Entity Name
06/18/2015	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
07/07/2015	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/12/2015	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
12/31/2015	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
03/02/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
03/22/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
06/07/2016	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
11/01/2016	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403

Date Released	Entity Name
02/22/2017	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

Date Released	Entity Name
03/05/2017	SELF-QUERIER

Date Released	Entity Name
03/17/2017	SELF-QUERIER

Date Released	Entity Name
03/28/2017	SELF-QUERIER

Date Released	Entity Name
04/19/2017	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690

Date Released	Entity Name
05/02/2017	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169

Date Released	Entity Name
05/23/2017	SUNSHINE STATE HEALTH PLAN 1301 INTERNATIONAL PKWY STE 400 SUNRISE, FL 33323 (954) 514-1721

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
06/26/2017	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
08/21/2017	SOUTH FLORIDA COMMUNITY CARE NETWORK, LLC 1643 NW 136TH AVE STE 200 BLVD H SUNRISE, FL 33323 (954) 622-3394
03/05/2018	MAGELLAN HEALTH 8621 ROBERT FULTON DR COLUMBIA, MD 21046 (410) 953-3582
04/10/2018	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
08/03/2018	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
11/15/2018	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
01/15/2019	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690

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Date Released	Entity Name
03/05/2019	ESCAMBIA COMMUNITY CLINICS, INC. (ECC) DBA COMMUNITY HEALTH 2315 W JACKSON ST PENSACOLA, FL 32505 (850) 436-4630

Date Released	Entity Name
04/24/2019	BRIGHT HEALTH INSURANCE COMPANY 219 N 2ND ST STE 400 MINNEAPOLIS, MN 55401 (402) 440-4568

Date Released	Entity Name
06/06/2019	UNITEDHEALTHCARE NATIONAL CREDENTIALING 5900 PARKWOOD PL DUBLIN, OH 43016 (614) 698-5927

Date Released	Entity Name
12/24/2019	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169

Date Released	Entity Name
02/05/2020	PRIME HEALTH SERVICES, INC. 331 MALLORY STATION RD FRANKLIN, TN 37067 (615) 565-9011

Date Released	Entity Name
05/11/2020	CENTENE CORPORATION 7700 FORSYTH BLVD # 4 FLOOR / BUILDING A SAINT LOUIS, MO 63105 (314) 445-0371

Date Released	Entity Name
05/21/2020	SELF-QUERIER

Recipient(s) of the Earlier Version of this Report

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

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Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>**DCN:** 5500000025471277

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CROSSWRIGHT, EARL JAY

Date Released	Entity Name
01/29/1997	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
05/27/1997	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
05/30/1997	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
12/09/1997	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
06/11/1998	HERITAGE MEDICAL SYSTEMS 2445 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 95492 707-55
02/12/1999	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
04/08/1999	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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Date Released	Entity Name
06/21/1999	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
07/01/1999	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
09/09/1999	PANHANDLE PHYSICIANS HEALTH NET - PPFL01 8800 UNIVERSITY PKWY, BUILDING C, SUITE PENSACOLA, FL 32514 40784 337-75
11/29/1999	COVENTRY HEALTH CARE OF GEORGIA, INC. 1100 CIRCLE 75 PARKWAY SUITE 1400 ATLANTA, GA 30339 (800) 470-2004
01/25/2000	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
02/14/2000	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/22/2001	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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<u>Date Released</u>	<u>Entity Name</u>
03/29/2001	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
07/10/2001	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
08/03/2001	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
09/07/2001	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
09/27/2001	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
11/08/2001	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
01/24/2002	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818

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CROSSWRIGHT, EARL JAY

Date Released

02/05/2002

Entity Name

UNITED HEALTHCARE- FLORIDA GULF COAST
4350 WEST CYPRESS STREET
TAMPA, FL 33607
81335 751-14

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>DCN: 5500000007897948
Process Date: 11/12/1997
Page: 1 of 3
CROSSWRIGHT, EARL JAY**CROSSWRIGHT, EARL JAY*****DIVISION OF MEDICAL QUALITY ASSURANCE*****LICENSE ACTION****Date of Action: 11/06/1997****Subsequent Action****Basis for Initial Action**

- LICENSE-MISC.: LICENSE RESTORED OR REINSTATED

- INFORMATION NOT PROVIDED

This action has related reports:

Initial Action: - LICENSE PROBATION: ALLOWING UNLICENSED
PERSON TO PRACTICE**Date of Action:** 10/30/1996 **DCN:** 5500000025471277**Subsequent Action:** [This Action]**A. REPORTING
ENTITY**

Entity Name: FLORIDA BOARD OF MEDICINE *

Address: 1940 N MONROE ST

City, State, Zip: TALLAHASSEE, FL 32399

Country:

Name or Office: AMY CARRAWAY, OPERATIONAL SUPPORT SVC

Title or Department: FLORIDA DEPARTMENT OF HEALTH

Telephone: (850) 245-4120

Entity Internal Report Reference:

Type of Report: REVISION

Related Report Number: 5500000004520593

Note: The related report has been corrected since this revision to action was submitted.

The latest version of the related report is: 5500000025471277

*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 08/15/2018:

Entity Name: DIVISION OF MEDICAL QUALITY ASSURANCE

Address: BUREAU OF OPERATIONS

4052 BALD CYPRESS WAY BIN C-01

City, State, Zip: TALLAHASSEE, FL 32399-0001

Country:

**B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)**

Subject Name: CROSSWRIGHT, EARL JAY

Other Name(s) Used:

Gender: MALE

Date of Birth: 12/29/1960

Organization Name:

Work Address: 5505 NORTH "W" STREET

City, State, ZIP: PENSACOLA, FL 32505

Home Address:

City, State, ZIP:

Deceased: NO

Social Security Numbers (SSN): ***-**-6199

Professional School(s) & Year(s) of Graduation: HOWARD UNIVERSITY (1988)

Occupation/Field of Licensure: PHYSICIAN (MD)

State License Number, State of Licensure: ME0063345, FL

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Drug Enforcement Administration (DEA) Numbers:

**C. INFORMATION
REPORTED**

Date of the Report: 11/12/1997
Type of Action Taken: LICENSE (L)
Action Classification: LICENSE-MISC.: LICENSE RESTORED OR REINSTATED (40100)
Date of the Action: 11/06/1997
Length of Action: PERMANENT
Effective Date: 11/06/1997

**Description of Act(s) or Omission(s)
or Other Reasons for Action Taken:** LICENSEE HAS COMPLETED HIS PERIOD OF PROBATION ON
11/5/1997 AND COMPLIED WITH ALL THE TERMS OF THE FINAL
ORDER ISSUED ON 11/6/1996.

**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: 11/12/1997

Date of Most Recent Change: 11/12/1997

**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): 1376532739

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.

CONFIDENTIAL DOCUMENT - FOR AUTHORIZED USE ONLY

NATIONAL PRACTITIONER DATA BANK

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END OF REPORT

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DISCLOSURE HISTORY

Report Number: 5500000007897948

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
12/09/1997	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
06/11/1998	HERITAGE MEDICAL SYSTEMS 2445 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 95492 707-55
02/12/1999	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
04/08/1999	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/21/1999	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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Date Released	Entity Name
07/01/1999	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
09/09/1999	PANHANDLE PHYSICIANS HEALTH NET - PPFL01 8800 UNIVERSITY PKWY, BUILDING C, SUITE PENSACOLA, FL 32514 40784 337-75
11/29/1999	COVENTRY HEALTH CARE OF GEORGIA, INC. 1100 CIRCLE 75 PARKWAY SUITE 1400 ATLANTA, GA 30339 (800) 470-2004
01/25/2000	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
02/14/2000	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/22/2001	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
03/29/2001	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815

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Date Released	Entity Name
07/10/2001	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
08/03/2001	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
09/07/2001	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
09/27/2001	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
11/08/2001	WEST FLORIDA HOSPITAL 8383 N DAVIS HWY PENSACOLA, FL 32514 (850) 494-4981
01/24/2002	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
02/05/2002	UNITED HEALTHCARE- FLORIDA GULF COAST 4350 WEST CYPRESS STREET TAMPA, FL 33607 81335 751-14

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Date Released	Entity Name
01/24/2003	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
03/11/2003	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
04/01/2003	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
05/30/2003	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
02/02/2004	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
04/13/2004	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/02/2005	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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Date Released	Entity Name
06/09/2005	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
08/05/2005	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
02/08/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
03/24/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
03/29/2006	SACRED HEART HEALTH SYSTEM 5151 N 9TH AVE PENSACOLA, FL 32504 (850) 416-4815
07/17/2006	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
07/25/2006	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057

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Date Released	Entity Name
11/08/2006	CIGNA HEALTHCARE OF FLORIDA 3101 W DR MARTIN LUTHER KING JR BLVD CREDENTIALLING DEPARTMENT TAMPA, FL 33607 (813) 353-4487
11/10/2006	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
12/12/2006	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/28/2006	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
03/01/2007	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/13/2007	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120

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Date Released	Entity Name
11/09/2007	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
01/15/2008	MD MEDICARECHOICE, INC. 5501 W WATERS AVE SUITE 401 TAMPA, FL 33634 (813) 901-9208
02/27/2008	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
04/25/2008	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
06/12/2008	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
01/16/2009	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
03/12/2009	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120

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Date Released	Entity Name
03/19/2009	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
05/28/2009	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/01/2009	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
09/29/2009	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
10/20/2009	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
11/09/2009	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
12/01/2009	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803

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Date Released	Entity Name
06/09/2010	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
06/17/2010	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/19/2010	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
11/02/2010	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
02/09/2011	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
04/06/2011	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
04/14/2011	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120

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Date Released	Entity Name
08/08/2011	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287
12/09/2011	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
04/19/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
05/03/2012	AGENCY FOR HEALTH CARE ADMINISTRATION 2727 MAHAN DRIVE FT. KNOX BLDG. 3, MS 50 TALLAHASSEE, FL 32308 (850) 412-4057
05/29/2012	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
06/04/2012	DIVISION OF MEDICAL QUALITY ASSURANCE BUREAU OF OPERATIONS 4052 BALD CYPRESS WAY BIN C-01 TALLAHASSEE, FL 32399 (850) 245-4120

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Date Released	Entity Name
09/25/2012	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803
10/16/2012	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
02/14/2013	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/03/2013	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847
06/25/2013	COVENTRY HEALTH CARE/SOUTHCARE, PPO 1340 CONCORD TERRACE SUNRISE, FL 33323 (954) 858-3597
06/25/2013	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
02/21/2014	HUMANA INC 12501 LAKEFRONT PL LOUISVILLE, KY 40299 (502) 476-5287

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Date Released	Entity Name
04/30/2014	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
05/15/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
07/31/2014	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
11/12/2014	WELL CARE OF FLORIDA, INC. 8735 HENDERSON RD REN2 TAMPA, FL 33634 (813) 206-3839
01/13/2015	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328
06/18/2015	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
07/07/2015	HUMANA GOVERNMENT BUSINESS PO BOX 740062 500 W MAIN STREET #515-4 LOUISVILLE, KY 40201 (502) 318-0803

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Date Released	Entity Name
10/12/2015	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
12/31/2015	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
03/02/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
03/22/2016	MOLINA HEALTHCARE OF FLORIDA, INC. 1330 N WASHINGTON ST STE 4000 SPOKANE, WA 99201 (509) 321-1320
06/07/2016	UNITEDHEALTHCARE 9200 WORTHINGTON RD WESTERVILLE, OH 43082 (614) 410-7008
11/01/2016	AETNA LIFE INSURANCE COMPANY AND ITS AFFILIATES 151 FARMINGTON AVENUE HARTFORD, CT 06156 (860) 273-5403
02/22/2017	BAPTIST HOSPITAL, INC. 1000 W MORENO ST PENSACOLA, FL 32501 (850) 469-2328

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Date Released	Entity Name
03/05/2017	SELF-QUERIER
Date Released	Entity Name
03/17/2017	SELF-QUERIER
Date Released	Entity Name
03/28/2017	SELF-QUERIER
Date Released	Entity Name
04/19/2017	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690
Date Released	Entity Name
05/02/2017	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169
Date Released	Entity Name
05/23/2017	SUNSHINE STATE HEALTH PLAN 1301 INTERNATIONAL PKWY STE 400 SUNRISE, FL 33323 (954) 514-1721
Date Released	Entity Name
06/26/2017	HEALTH FIRST NETWORK, INC. 25 W CEDAR ST PENSACOLA, FL 32502 (850) 438-0818
Date Released	Entity Name
08/21/2017	SOUTH FLORIDA COMMUNITY CARE NETWORK, LLC 1643 NW 136TH AVE STE 200 BLVD H SUNRISE, FL 33323 (954) 622-3394

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Date Released	Entity Name
03/05/2018	MAGELLAN HEALTH 8621 ROBERT FULTON DR COLUMBIA, MD 21046 (410) 953-3582
04/10/2018	CIGNA HEALTHCARE OF NEW HAMPSHIRE 2 COLLEGE PARK DR HOOKSETT, NH 03106 (603) 268-7440
08/03/2018	BEECH STREET CORPORATION 6116 SHALLOWFORD RD STE 109B CHATTANOOGA, TN 37421 (423) 553-6512
11/15/2018	BLUE CROSS BLUE SHIELD 4800 DEERWOOD CAMPUS PKWY BLDG 800 JACKSONVILLE, FL 32246 (904) 905-1996
01/15/2019	BLUE CROSS AND BLUE SHIELD OF ALABAMA 450 RIVERCHASE PKWY E HOOVER, AL 35244 (205) 220-3690
03/05/2019	ESCAMBIA COMMUNITY CLINICS, INC. (ECC) DBA COMMUNITY HEALTH 2315 W JACKSON ST PENSACOLA, FL 32505 (850) 436-4630
04/24/2019	BRIGHT HEALTH INSURANCE COMPANY 219 N 2ND ST STE 400 MINNEAPOLIS, MN 55401 (402) 440-4568

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<u>Date Released</u>	<u>Entity Name</u>
06/06/2019	UNITEDHEALTHCARE NATIONAL CREDENTIALING 5900 PARKWOOD PL DUBLIN, OH 43016 (614) 698-5927
12/24/2019	HUMANA HEALTH PLANS INC 101 E MAIN ST LOUISVILLE, KY 40202 (513) 826-7169
02/05/2020	PRIME HEALTH SERVICES, INC. 331 MALLORY STATION RD FRANKLIN, TN 37067 (615) 565-9011
05/11/2020	CENTENE CORPORATION 7700 FORSYTH BLVD # 4 FLOOR / BUILDING A SAINT LOUIS, MO 63105 (314) 445-0371
05/21/2020	SELF-QUERIER