Medical Quality Assurance
Quarterly Performance Report
January 1 - March 31, 2017
As required by Section 456.025(9), Florida Statutes
MQA REPORTS

Review prior annual and quarterly performance reports for the division by visiting www.FLHealthSource.gov. Once you are on the main page, hover your mouse over “Consumer Services” in the top menu bar and select “Annual and Quarterly Reports.” You will then be redirected to the “MQA Annual and Quarterly Reports” page.

Section 456.005, Florida Statutes, requires the Florida Department of Health (Department), Division of Medical Quality Assurance (MQA) to develop and implement a long-range plan. This plan serves as a road map for accomplishing the Department’s mission. This plan is communicated quarterly, as required by section 456.025(9), Florida Statutes, and it must be revised and modified to remain current with trends in health care services and regulation.
<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>03</td>
<td>DIRECTOR’S MESSAGE &amp; BUREAU MESSAGES</td>
</tr>
<tr>
<td>04</td>
<td>EXECUTIVE SUMMARY</td>
</tr>
<tr>
<td>05</td>
<td>I AM MQA</td>
</tr>
<tr>
<td>07</td>
<td>UNLICENSED ACTIVITY (ULA)</td>
</tr>
<tr>
<td>08</td>
<td>BUREAU OF ENFORCEMENT HEALTH CARE COMPLAINT PORTAL</td>
</tr>
<tr>
<td>09</td>
<td>BALANCED SCORECARD MEASURES</td>
</tr>
<tr>
<td>12</td>
<td>BY THE NUMBERS</td>
</tr>
<tr>
<td>15</td>
<td>GLOSSARY</td>
</tr>
</tbody>
</table>
Lucy Gee,
MQA Division Director

Throughout this quarter, MQA continued to show great strides in meeting the Department’s strategic goals, reaching performance measures, and successfully completing its initiatives.

A pair of key achievements speaks volumes about our progress: (1) Several of Florida’s health care provider boards and councils – including the Boards of Psychology and Respiratory Care, and the Electrolysis Council – reported a decrease in application processing and licensure times. (2) The Bureau of Enforcement reduced the amount of *non-jurisdictional complaints by 45 percent through the new online Complaint Portal.

This report contains more in-depth information about the above-mentioned and other accomplishments. It provides a platform for us to highlight projects, initiatives and customer service that exemplify what we do as an organization. It is with great pleasure that I present the Quarterly Performance Report (QPR) for the third quarter of the 2016-2017 fiscal year.

*Non-jurisdictional Complaints: Complaints without an authority or agency assigned to handle them.

---

**Bureau of Operations**

This quarter, the Bureau of Operations made significant progress in upgrading the document repository for the Licensing and Enforcement Information Database System (LEIDS). LEIDS is an information technology solution for MQA’s three key business processes: licensure, enforcement, and information. AxiomPro, MQA’s document repository, contains vital documents from enforcement cases and initial licensure and renewal applicants. Throughout the quarter, employees worked to migrate 30 million documents, or 110 million pages worth of printed information, from a physical server to the cloud. In the next phase of this project, the AxiomPro software will be upgraded with the following key features:

- Improved graphical interface and user experience
- New and intuitive dashboard, providing quick access to popular features
- Improved data entry and required field design
- Ability to personalize and standardize search functionality with search templates and save search criteria
- User friendly administrative tools to set up users, roles, drop-down menus, and retention schedules

As part of the upgrade process, users will receive specific training on the revamped system. This endeavor is extremely beneficial to MQA employees who use LEIDS, and it supports the Department’s strategic goal of reducing licensure times; searching for documents in the repository will be more intuitive, and the response time for viewing them will be faster.

**Bureau of Health Care Practitioner Regulation**

Several of Florida’s 22 health care provider boards reported significant improvements in application processing performance for the first half of the 2016-2017 fiscal year. Despite a 29.8 percent increase in applications processed, Board of Psychology employees still managed to reduce the average number of days to issue a license by 25.85 days, or 15.18 percent. In addition, the same Board reduced the initial processing time of licenses by 21.2 percent. The Board of Respiratory Care also noted a decrease in application processing times during the first half. Employees there reduced the days to license an applicant by 8.3 percent and overall processing time by 21.1 percent. Furthermore, one of Florida’s six health care provider councils saw improved licensure processing numbers. Employees worked with the Florida Electrolysis Council to reduce the average number of days to issue a license by 23.06 days, or 24 percent. Their application processing time was reduced by 2.03 days, or 27.75 percent.

**Bureau of Enforcement**

The Orlando Investigative Services Unit met with the Orlando Medicaid Fraud Unit to educate them about the investigative process, including regulatory and unlicensed activity cases. The event provided an opportunity for information sharing and continued collaboration between the two units. The Investigative Services Unit (ISU) also worked to provide training on office surgery center inspections in Tampa. This three-day session included classroom and on-site training at existing office surgery facilities. ISU employs registered nurses to
conduct office surgery center inspections and pain management clinic inspections. Yet another collaborative effort entailed a meeting between the Miami Investigative Services Unit and Mount Sinai Hospital. During that event, Mt. Sinai leadership agreed to partner with investigators and expedite ISU’s subpoena requests for medical and personnel records. Collecting these documents in a timely manner will allow ISU to conduct investigations more efficiently to effectively carry out the Department’s mission.

**EXECUTIVE SUMMARY**

*The Quarterly Performance Report (QPR) required by Section 456.005 and Section 456.025(9), Florida Statutes, offers the Division of Medical Quality Assurance (MQA) an opportunity to update its 22 health care provider boards and four councils, as well as all stakeholders and health care consumers, on the important work undertaken in health care regulation.*

MQA upholds the Department’s mission to protect, promote and improve the health of all people in Florida through integrated state, county and community efforts. MQA collaborates with other stakeholder agencies at the state and federal level, and our regional investigative offices work with local officials and law enforcement agencies to stop dangerous activity within Florida’s communities. The QPR for the third quarter of the 2016-2017 fiscal year provides statutorily required information on revenue, expenditures and performance measures, and highlights MQA’s accomplishments, outstanding employees and successful partnerships.

**LICENSING**

MQA received 31,710 licensee applications and issued 24,309 initial licenses in the third quarter. The remaining licenses (7,401) that were not issued are either still in process or missing documentation required for issuance. The Department of Health has made concerted efforts to reduce regulation and eliminate unnecessary barriers to licensure. During this fiscal year, the division will continue to refine and encourage enrollment into the new MQA Online Services Portal. Now, 103 professional and six facility licenses are available in the new portal; the division will continue to make improvements throughout the year to better serve Florida’s health care licensees and applicants.

**ENFORCEMENT**

MQA received 367 complaints of unlicensed activity. This quarter, 110 cease and desist orders were given to unlicensed individuals, whose unregulated and illegal activity could be disfiguring and even deadly to its victims. Ninety-nine (99) complaints were also referred to law enforcement for potential criminal violations.

**FINANCES**

MQA is committed to ensuring cost-effective regulation. The division regularly reviews its licensing fees and recommends fee adjustments so that it collects only what is needed to regulate each profession. The division is accountable for how it spends licensees' money, and strives to maintain efficient regulatory processes that save money and help practitioners begin work faster.
In order to promote and educate the strategic plan among its employees, the Division of Medical Quality Assurance launched the “I AM MQA” Strategic Plan Integrated Marketing Campaign. This campaign is designed to help employees determine the role they play in steering the strategic plan forward, and to spark thoughtful conversations regarding MQA’s strategic initiatives over the next three years. Each quarter, a different office within the division will be highlighted. This quarter, it is the Call Center.

The Front Line of MQA: An Inside Look at the Call Center

Internally, the MQA Call Center is often referred to as the division’s “front line.” This designation is apropos as it is one of MQA’s most visible and publicly interactive offices. Moreover, hundreds of current and aspiring health care professionals utilize the Call Center as a vital resource in managing their credentials.

Call Center personnel can field more than 2,000 calls per day, with each call averaging about seven to eight minutes in length. The most frequent call topic pertains to the logistics of registering in the MQA Online Services Portal, also known as Versa Online. While the portal, launched back in September 2015, provides a streamlined platform for licensure management, callers often require assistance with this new technology.

Providing Efficient, Accurate Information

Efficiency is key when handling such a high call volume. When frequently asked questions or concerns are noted among callers, steps are made to ensure that health care professionals are informed in other ways. For example, webinars and other resources are available on www.flhealthsource.gov to educate first-time or inexperienced users on how to use the Online Services Portal. Providing this information can alleviate the number of calls received on one particular issue.

In addition, Call Center leadership regularly meets with members of management of Florida’s 22 health care provider boards. These sessions are designed to open avenues of communication, providing board managers with insight to ensure that health care professionals receive the best possible Call Center experience. This entails keeping information in the Licensing and Enforcement Information Database System (LEIDS) updated and ensuring that the current amount of time it takes to process a license is well communicated to Call Center staff. As a result, agents can provide the most up-to-date information to callers.

Have a question regarding your licensure? The call center can be reached at (850) 488-0595.

Before you call
Visit www.floridahealthsource.gov. There are resources available online that may answer your question.

Approximate # of calls received: 2,000+ PER DAY
Average amount of time per call, current: 7-8 MINUTES
Average amount of time per call, goal: > LESS THAN 5 MINUTES
Employees: 31 ALLOTTED POSITIONS, 28 CURRENTLY FILLED
Quarter 3 Accomplishments

The strategic priorities in this section are taken from MQA’s 2016-2018 strategic plan.

**PRIORITY 2.1: Long, Healthy Life**
- Miami Investigative Services Unit engaged in its first healthy initiative event of the year, a two-mile walk on Key Biscayne Bridge

**PRIORITY 3.1: Readiness for Emerging Health Threats**
- The MQA team is continuing to decrease the amount of time to issue emerging health threat alerts to health care practitioners.

**PRIORITY 4.1: Effective Agency Process**
- The Bureau of Enforcement saw a 45% decrease in the amount of non-jurisdictional complaints that were received because of the new Health Care Complaint Portal.

**PRIORITY 5.1: Regulatory Efficiency**
- The Board of Psychology, the Board of Respiratory Care and the Electrolysis Council all reported a decrease in application processing and licensure times.
UNLICENSED ACTIVITY

Individuals who perform regulated activities without the proper licensing in Florida are generally committing a felony-level criminal offense. Treatment by an unlicensed provider is dangerous and could result in injury, disease or even death. When practitioners pay their licensing fees, $5 is designated specifically for enforcement of unlicensed activity.

From educating the public to conducting complex investigations and issuing cease and desist orders, the Florida Department of Health’s Unlicensed Activity (ULA) program is dedicated to protecting the people of Florida and remaining at the forefront of health care regulation.

OUTREACH

During the months of January, February and March, ULA personnel continued outreach and education through speaking engagements, scheduled appearances, and presentations outlining the program while providing marketing materials and fostering partnerships. These efforts included the following:

- January 8-10 – Florida Police Chiefs Association Winter Conference, Orlando
- January 29-31 – Florida Sheriff’s Association Winter Conference, Jacksonville

ORDERS TO CEASE AND DESIST

The ULA program has seen an increase in the amount of cease and desist orders issued since the 2014-2015 fiscal year. Below is a comparison of the last four quarters.

ORDERS TO CEASE AND DESIST
(FY 14-15/FY15-16/FY16-17)

Consumers are encouraged to verify the license of their health care provider by utilizing the www.FLHealthSource.gov website, or calling 1-877-HALT-ULA, where they can speak directly with an investigator in the Consumer Services Unit. Tips regarding suspicious or potentially unlicensed activity may be emailed to haltula@flhealth.gov.
In March 2016, MQA unveiled the Florida Health Care Complaint Portal. This platform was developed in collaboration with the Agency for Health Care Administration (AHCA) to reduce the number of complaints received that are considered non-jurisdictional, or without an authority or agency assigned to handle them. Complaints received by or sent to the wrong agency take longer to resolve, create confusion on the part of consumers, and slow down the complaint process at each agency. The portal was designed to reduce these challenges by asking consumers a series of questions and directing them to the most appropriate agency to resolve the issue.

The results were significant – a comparison of data taken in the 11 months before and after the release of the portal show a 45 percent decrease in the number of non-jurisdictional complaints. In the 11 months prior to the portal’s debut, the Consumer Services Unit (CSU) of the Bureau of Enforcement received 1,166 non-jurisdictional complaints. In the 11 months after, they received 754. The improvement is also noteworthy on a monthly level. In July 2015, before the portal’s launch, CSU received over 150 non-jurisdictional complaints. Conversely, CSU only received 37 complaints in September 2016, after the portal’s release.

Currently, the complaint form can be printed out or completed online. Since the Bureau of Enforcement began allowing consumers to scan and email the complaint form approximately 75 percent of the complaint forms are received via email. This reduces the amount of time to enter a complaint into MQA’s Licensing and Enforcement Information Database (LEIDS) and eliminates the time spent scanning the documents.

The next phase of the project is a testament to MQA’s commitment to its core values of innovation and responsiveness: the division is developing a completely web-based complaint form. All stakeholders (consumers, Department employees, other agencies, law enforcement, etc.) will be able to fill out a complaint online using MQA’s VersaOnline system. The complaint will then be automatically generated in LEIDS and sent directly to a CSU investigator to be reviewed without the need for manual complaint entry.

The online complaint will also have a link to MQA’s license verification website to ensure the complaint is filed with accurate licensee information. This enhancement is anticipated to reduce the number of complaints with errors, difficult or unreadable handwriting, those identifying the wrong licensee, and other issues that come with handwritten forms. Proving MQA is committed to excellence and accountability, the portal will allow the complainant to sign in and monitor the progress of the complaint as it moves through the process. To access the portal, visit http://www.flhealthcomplaint.gov/.

![Non-Jurisdictional Complaints Received](chart.png)
BALANCED SCORECARD MEASURES

This section highlights three measures from MQA’s Balanced Scorecard that the division uses to track its strategic long-range plan. It includes short- and long-range goals and performance measures, and helps the executive management team monitor all progress toward those goals. The following three measures are identified as critical components of MQA’s strategic priorities: average number of days to process a renewal application for qualified applicants, average number of days to issue an initial license for qualified applicants, and the average number of days to complete initial inspections prior to licensure.

**MEASURE:** Average number of days to process a renewal application for a qualified applicant.

**TARGET:** 1 Day

**DEFINITION:** This measure calculates the average number of days to renew a license for health care professionals and facilities. The measure includes electronic renewal applications that are processed online and paper renewal applications that are processed through the U.S. mail. This measure does not include delinquent renewals. For practitioners who renew their license online, the measure includes the average number of days from the date the transaction was initiated online to the date the renewal application was approved. For practitioners who renew their license by mail, the measure includes the average number of days from the date the renewal fee is received in its entirety (e.g., the batch received date in the cash batch header) to the date the renewal application is approved. If a deficiency letter was sent, the measure is adjusted to the number of days from the date the renewal fee and/or documents are received in their entirety to the date the first deficiency letter was sent, plus the number of days from the renewal cleared letter to the application approved date.

**INITIATIVE:** No action steps are currently needed to improve performance.

![License Renewal Graph](image-url)
The measure calculates the average number of days from the date an application is deemed qualified to the date a license is issued. This measure considers all applications for health care professions under the Florida Department of Health submitted for licensure and registration and which are not withdrawn or generated in error.

To improve the time to issue a license to qualified applicants, the Bureau of Health Care Practitioner Regulation is reviewing and analyzing all aspects of the application process. An MQA Transformation Project Workflow Assessment was presented to each board office to provide recommendations for improving the use of the workflow features within the Licensing and Enforcement Information Database System (LEIDS). In addition, each board office was tasked with identifying trends regarding the deficiencies found in applications and providing a work plan to eliminate or ameliorate the delays caused by these deficiencies. The boards remain committed to finding and implementing innovative methods to increase efficiency and employ Floridians in public health expeditiously.

**Data source:** MQA Licensing and Enforcement Information Database System (LEIDS).
MEASURE: Average number of days to complete initial inspection prior to licensure.

TARGET: 16 days

DEFINITION: This measure calculates the average number of days from the date an applicant is ready for an opening inspection to the date the inspection is completed. This measures all initial inspections where the applicant did not formally request a delay.

INITIATIVE: To improve the time to complete an initial inspection, the Bureau of Enforcement has begun calling establishment owners within five days of a request to schedule the inspection. This process is monitored by managers and supervisors on a weekly basis. The Bureau has also created a new code to track inspections where the owner requested a delay, so our inspectors can then focus on establishments that are ready for inspection. In addition to these steps, our staff has continued to cross-train to ensure there are personnel available to complete new requests as soon as possible.

Data source: MQA Licensing and Enforcement Information Database System (LEIDS).
MQA’s Financial Data, specifically the fees that are deposited into the trust fund and expenses paid from it, are reported as required by law. At year end, MQA calculates the cost to regulate the professions, and reviews the adequacy of license renewal fees to make sure operations by the boards are sustainable.

Section 456.025(9), Florida Statutes: The Department shall provide a management report of revenues and expenditures, performance measures, and recommendations to each board at least once a quarter.

MQA is funded by a trust fund which consists of fees and fines collected through the licensing process. The funds are allocated to provide administrative support for the licensing and regulation of health care professionals. The division is committed to ensuring the administrative costs of regulation do not serve as a barrier to licensed health care practitioners practicing their profession in Florida.

MQA collaborates with individual boards to reduce fees whenever possible. A renewal fee analysis is performed annually to compare the cost of regulation against the current renewal fees.

<table>
<thead>
<tr>
<th>MQA TRUST FUND</th>
<th>LICENSED</th>
<th>UNLICENSED</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance 07/01/2016</td>
<td>$20,468,632</td>
<td>$11,966,233</td>
<td>$32,434,865</td>
</tr>
<tr>
<td>Total Revenues 03/31/2017</td>
<td>$52,680,774</td>
<td>$1,731,264</td>
<td>$54,412,038</td>
</tr>
<tr>
<td>Total Expenditures 03/31/2017</td>
<td>$49,291,773</td>
<td>$1,182,198</td>
<td>$50,473,971</td>
</tr>
</tbody>
</table>

Licensee Data

MQA issues licenses in 44 different health care professions under more than 100 different types of licenses.

MQA licenses qualified applicants in conjunction with the regulatory boards that oversee each profession. In the 2015-2016 fiscal year, the division administered seven exams required for licensing, though by January 2016, all will have moved to national professional organizations.

<table>
<thead>
<tr>
<th>QUARTERLY SUMMARY</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Applications Received</td>
<td>31,710</td>
</tr>
<tr>
<td>Initial Licenses Issued</td>
<td>24,309</td>
</tr>
</tbody>
</table>

Data for applications processed are not being reported this quarter due to changes in the data collection process.

Click here for detailed report by profession.
Unlicensed Activity Data

MQA reviews and investigates complaints of unlicensed activity by working from their central office in Tallahassee and 11 regional offices located around the state. MQA can issue cease and desist orders and fines against unlicensed providers, but the division relies on partnerships with local law enforcement for criminal prosecution.

Section 456.065(3), Florida Statutes – The Department shall include all financial and statistical data resulting from unlicensed activity enforcement as a separate category in the quarterly management report provided for in s. 456.025, FS. For an unlicensed activity account, a balance which remains at the end of a renewal cycle may, with concurrence of the applicable board and the Department, be transferred to the operating fund account of that profession. The Department shall also use these funds to inform and educate consumers generally on the importance of using licensed health care practitioners.

QUARTERLY SUMMARY

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complaints Received</td>
<td>367</td>
</tr>
<tr>
<td>Referred for Investigation</td>
<td>326</td>
</tr>
<tr>
<td>Investigations Completed</td>
<td>281</td>
</tr>
<tr>
<td>Cease and Desist Orders Issued</td>
<td>110</td>
</tr>
<tr>
<td>Referrals to Law Enforcement</td>
<td>99</td>
</tr>
</tbody>
</table>

Click here for detailed report by profession

Contact 1-877-HALT-ULA
HALTULA@flhealth.gov

CLICK TO PLAY VIDEO
The Bureau of Enforcement’s key role is to investigate complaints and reports against licensed practitioners and unlicensed practitioners. Investigations are pursued at several levels, and the bureau has several specialized units: the Unlicensed Activity Program, Consumer Services Unit, Investigative Services Unit and Compliance Management Unit.

The Division of Medical Quality Assurance receives about 20,000 complaints a year. The Department lacks the authority to pursue many of those complaints because they are not violations of statute or rule (e.g. billing disputes or bedside manner complaints). MQA, in conjunction with the boards that regulate the professions, issued final orders against 1,489 health care practitioners last fiscal year. Some practitioners are directed to obtain additional training to prevent errors; some are reprimanded; and some are sanctioned. The Department takes emergency action for violations that pose an immediate and serious threat to the public and violations under section 456.074, Florida Statutes, including the commission of crimes, violations of standards of care, drug use, impairment, drug diversion, sexual misconduct or student loan defaults.

### QUARTERLY SUMMARY

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complaints Received</td>
<td>5,197</td>
</tr>
<tr>
<td>Legally Sufficient</td>
<td>1,622</td>
</tr>
<tr>
<td>Investigations Completed</td>
<td>1,399</td>
</tr>
<tr>
<td>Citations Issued</td>
<td>2</td>
</tr>
<tr>
<td>Dismissed by Panel</td>
<td>682</td>
</tr>
<tr>
<td>Probable Cause Found</td>
<td>737</td>
</tr>
<tr>
<td>Probable Cause Dismissed</td>
<td>49</td>
</tr>
<tr>
<td>Final Orders</td>
<td>336</td>
</tr>
</tbody>
</table>

### EMERGENCY ORDERS ISSUED

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Restriction Orders</td>
<td>46</td>
</tr>
<tr>
<td>Emergency Suspension Orders</td>
<td>30</td>
</tr>
<tr>
<td>Total Emergency Orders</td>
<td>76</td>
</tr>
</tbody>
</table>

### FINES AND COST DATA FOR CURRENT LICENSEES

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dollar Amount Collected</td>
<td>$575,175</td>
</tr>
<tr>
<td>Dollar Amount Imposed</td>
<td>$578,971</td>
</tr>
<tr>
<td>Percentage Collected</td>
<td>99.34%</td>
</tr>
</tbody>
</table>

### NUMBER OF ACTIVE CASES

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consumer Services</td>
<td>6,701</td>
</tr>
<tr>
<td>Investigative Services</td>
<td>797</td>
</tr>
<tr>
<td>Prosecution Services</td>
<td>5,063</td>
</tr>
</tbody>
</table>

[Click here for detailed report by profession]
GLOSSARY

**Are You Renewal Ready? (AYRR):** An initiative aimed at helping practitioners maintain their credentials.

**AxiomPro:** The Licensing and Enforcement Information Database System (LEIDS) document repository.

**Balanced Scorecard:** A way to measure whether the key processes performed by MQA (licensing, enforcing, and providing information) support our vision and our strategic objectives.

**CE/CME Electronic Tracking System:** The system used by the Department of Health to track licensee compliance with continuing education/continuing medical education (CE/CME) requirements for renewal.

**Emergency Action:** An action suspending or restricting the ability to practice taken by the State Surgeon General when a licensed health care practitioner poses an immediate and serious threat to the health, safety and welfare of the public.

**Emergency Suspension Order (ESO):** An order issued by the Florida Department of Health suspending the license of a practitioner. A practitioner may not practice in the state of Florida while under an emergency suspension order.

**Emergency Restriction Order (ERO):** An order issued by the Florida Department of Health restricting the practice of a practitioner in the state of Florida under conditions specified by the Department.

**LEIDS:** Licensing and Enforcement Information Database System – MQA’s licensure and enforcement database.

**Non-jurisdictional Complaints:** Complaints without an authority or agency assigned to handle them.

**MQA Trust Fund Unlicensed Activity Fee:** A $5 fee collected at initial and renewal licensing that specifically funds the investigation and enforcement of unlicensed activity laws.
Health care resources for professionals and consumers are available 24 hours a day at www.FLHealthSource.gov. Apply for a license, verify a license, or renew a license.
Contact Us
Your feedback is important to us. If you have questions or suggestions about this report, please let us know.

MQA Division Director
Lucy C. Gee, MS

Mailing Address
Department of Health
Medical Quality Assurance
4052 Bald Cypress Way
Bin C-00
Tallahassee, Florida 32399-3256

Phone: 850-245-4224
Fax: 850-414-8209

Email
MedicalQualityAssurance@flhealth.gov

Website
www.FLHealthSource.gov