



National Practitioner Data Bank  
Health Resources and Services Administration  
U.S. Department of Health and Human Services  
P.O. Box 10832  
Chantilly, VA 20153-0832

550000263462214  
Process Date: 01/22/2025  
Page: 1 of 1

WOLGIN, MARK ALAN  
1709 DEVON DR  
ALBANY, GA 31721-1948

**From:** National Practitioner Data Bank  
**Re:** Response to Your Self-Query

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This self-query response 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.

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## WOLGIN, MARK ALAN - SELF-QUERY RESPONSE FOR AN INDIVIDUAL

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

**Practitioner Name:** WOLGIN, MARK ALAN  
**Date of Birth:** 06/21/1960 **Gender:** MALE  
**Shipping Address:** 1709 DEVON DR, ALBANY, GA 31721-1948  
**Social Security Number:** \*\*\*-\*\*-2458 **DEA:** BW1155147  
**NPI:** 1780668780  
**License:** PHYSICIAN (MD), 58762, GA, ORTHOPEDIC SURGERY  
**Professional School(s):** DAVID GEFFEN SCHOOL OF MEDICINE AT UCLA (1986)

### B. SUMMARY OF REPORTS ON FILE WITH THE NPDB AS OF 01/22/2025

**The following report types have been searched:**

Medical Malpractice Payment Report	<b>Yes, See Below</b>	Health Plan Action(s):	No Reports
State Licensure or Certification Action	No Reports	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 provided for restricted/limited use as prescribed by statutes listed on the preceding cover page.

#### THE DOCTORS COMPANY

##### MEDICAL MALPRACTICE PAYMENT

**Basis for Action:** - SURGERY: NOT OTHERWISE CLASSIFIED

**Initial Action:** - SETTLEMENT  
**DCN:** 5500000009744338

**Date of Action:** 04/06/1998

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



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DCN: 550000009744338  
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 WOLGIN, MARK A

## WOLGIN, MARK A

### THE DOCTORS COMPANY

#### MEDICAL MALPRACTICE PAYMENT REPORT

Date of Action: 04/06/1998

#### Initial Action

#### Basis for Initial Action

- SETTLEMENT

- SURGERY: NOT OTHERWISE CLASSIFIED

#### A. REPORTING ENTITY

Entity Name: DOCTORS' COMPANY \*

Address: P.O. BOX 2900

City, State, Zip: NAPA, CA 94558-0900

Country:

Name or Office: JEANNE MCCARTHY

Title or Department: DIRECTOR OF CLAIMS OPERATIONS

Telephone: (517) 324-6583

Entity Internal Report Reference:

Type of Report: CORRECTION

Previous Report Number: 550000009325464 (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 06/22/2023:

Entity Name: THE DOCTORS COMPANY

Address: 185 GREENWOOD RD  
 PO BOX 2900

City, State, Zip: NAPA, CA 94558-6270

Country:

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

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

Subject Name: WOLGIN, MARK A

Other Name(s) Used:

Gender: UNKNOWN

Date of Birth: 06/21/1960

Organization Name: MARK A WOLGIN MD

Work Address: 1705 HOSPITAL ST

City, State, ZIP: GREENVILLE, MS 38703

\* Home Address: 481 CYPRESS LANE, APT. 6155

\* City, State, ZIP: GREENVILLE, MS 38701

Deceased: NO

Social Security Numbers (SSN):

Professional School(s) & Year(s) of Graduation: UNIVERSITY OF CALIFORNIA SCHOOL OF MEDIC (1986)

Occupation/Field of Licensure: PHYSICIAN (MD)

State License Number, State of Licensure: 14676, MS

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

#### C. INFORMATION REPORTED

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

Date of Report: 05/28/1998

Act/Omission Code: SURGERY: NOT OTHERWISE CLASSIFIED (290)

Date of Act/Omission: 05/21/1996

Payment Date: 04/06/1998



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Multiple or Single Payment: SINGLE  
 Amount of This Payment: \$ 60,000.00  
 Total Amount of Judgment or Settlement:  
 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:  
 Adjudicative Case Number:  
 Adjudicative Body Name:  
 Court File Number:  
 Reporter's Description of Act or Omission: (0105037)THE 42 YEAR OLD FEMALE OUTPATIENT UNDERWENT RIGHT CARPAL TUNNEL RELEASE BY THE INSURED. DURING THE PROCEDURE, A SENSORY BRANCH OF THE MEDIAN NERVE WAS CUT. THE INJURY WAS NOTED AND REPAIRED, BUT THE PATIENT WAS LEFT WITH RESIDUAL PAIN AND NUMBNESS  
 Reporter's Description of the Judgment or Settlement: ONE LUMP SUM PAYMENT OF \$60,000 WAS MADE ON BEHALF OF THE INSURED

**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: 04/17/1998  
 Date of Most Recent Change: 05/28/1998

**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.

Social Security Numbers (SSN): \*\*\*-\*\*-2458  
 National Provider Identifiers (NPI): 1780668780  
 Occupation/Field of Licensure: Physician (MD)  
 State License Number, State of Licensure: 057862, GA  
 Occupation/Field of Licensure: Physician (MD)  
 State License Number, State of Licensure: 9019, NV



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Occupation/Field of Licensure: Physician (MD)  
State License Number, State of Licensure: G61020, CA  
Occupation/Field of Licensure: Physician (MD)  
State License Number, State of Licensure: J1434, TX  
Drug Enforcement Administration (DEA) Numbers: BW1155147

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**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.

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**END OF REPORT**

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