



Department of Health

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Licensee Details

Data current as of: August 15, 2017

Name\Phone Peggy Peng Ye 2028777479		Business Address 106 Irving St. NW POB 4700-N Washington DC 20010	
Number: MD040333	Profession: MEDICINE	Type: MEDICINE AND SURGERY	Obtained By Method: Waiver of Examination
From State/Prov:	Issue Date: 2/27/2012	Expiration Date: 12/31/2018	Status: Active

Specialty Information (as reported by Licensee)

Obstetrics & Gynecology

Discipline Information from 1996 to Present - Please click item(s) below to view public orders

NONE

Practitioner Profile - Unless otherwise indicated, this information has been self-reported and has not been verified by the Board of Medicine.

General Information

The Health Emergency Preparedness and Response Administration (HEPRA) is the agency responsible for mobilizing health care professionals during an emergency. Please indicate if you would be willing to volunteer with HEPRA during an emergency: No

2. Number of years in active, clinical practice in the United States or Canada following completion of medical training and the number of years? 2

3. Number of years in active, clinical practice outside the United States or Canada following completion of medical training and the number of years? 0

4. Do you accept or participate with Medicare? Yes

4b. Are you accepting new Medicare patients? Yes

5. Do you accept or participate with Medicaid? Yes

5b. Are you accepting new Medicaid patients? Yes

6. Do you accept or participate with DC Managed Care (DC Healthcare Alliance)? Yes

6b. Are you accepting new DC Managed Care (DC Healthcare Alliance)? Yes

Post Graduate Medical Training

Post Grad Residency Training Program Name	Specialty	Type	City	State/Province	Country	Years Attended From	Years Attended To
University Hospitals Case Medical Center		Residency	Cleveland		USA	2008	2012
		Fellowship	Washington		USA	2012	2014

MedStar
Washington
Hospital Center

Medical School

Have you attended any medical or osteopathic schools? Y

Name of school	Other School	Graduation/Completion Date
		05/20/2008

Primary Practice Location

Address Line 1: 106 Irving St. NW
 Address Line 2: POB 4700 North
 City/Town: Washington
 State: DC
 Zipcode: 20010
 Telephone Number: 2028777479
 Percentage of time spent at this location: 100
 Do you offer translating services? Y

Secondary Practice Location

Do you have a secondary location(s)? N

Academic Appointments

School	Academic Rank	Years of Service	From	To
		No data available		

Publications

Title	Journal	Volume	Website	Date
		No data available		

Board Certifications

Do you have any specialty Board Certifications? Y

Name	From	To
	12/05/2014	12/31/2016

Specialties

Specialty
OB/GYN

Hospital Information

Are you affiliated with any hospitals? Y

Name of Hospital	No data available
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Insurance Information	
Do you accept insurance?	Y
Name of Insurance	
Blue Cross Blue Shield	
Aetna	
United HealthCare	
Health Services Children	
DC Medicaid	
MedStar Family Choice	

Criminal Information	
Have you had any Misdemeanor and/or felony convictions?	N

Final Orders	
Have you received any final orders in the last 10 years?	N

Malpractice Information	
Have you had any malpractice payouts in the last 10 years?	N

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