

Group NPI
12345XX234
Group Name
Best Medical Group
Group DBA Name
Please enter DBA name if applicable
Group Tax ID
8465489XX
Group Effective Date
1/1/2021
Provider NPI
12345XX234
Provider Type
Enter "O" for Organization Enter "P" for Provider
Provider First Name
John
Provider Middle Name
Provider Last Name
Doe
Provider Date of Birth
Provider Gender
Provider Social Security Number
Provider Degree
Provider Organization Name
Provider Language
Provider DEA Number
Provider CCN
Provider Medicare ID
Provider CAQH
Provider Note
Internal Specialty Code
Servicing Address Line 1
123 Simpson Ave
Servicing Address Line 2

Servicing Address City
New York
Servicing Address State
NY
Servicing Address Zip Code
12345
Servicing Address Zip Code Extension
Servicing Address Phone Number
123-456-7890
Servicing Address Phone Number Extension
Servicing Address Fax Number
Servicing Address Email Address
Servicing Address Effective Date
1/1/2021
Servicing Address Termination Date
Servicing Address Status
Bed Count
Specialty Type
Provider Taxonomy
Accepts New Patients Flag
For Yes enter "Y" For No enter "No"
Include in Directory Flag
For Yes enter "Y" For No enter "No"
Service Mode
Provider Class ID
Contract with Bonus Flag
Delegated Credentialing Participation
For Yes enter "Y" For No enter "No"
Delegated Credentialing Flag
Delegated Credentialing Group Name
Best Medical Group
Delegated Credentialing Audit Status

Delegated Credentialing Approval Date
Delegated Credentialing Audit Date
Delegated Credentialing ReAudit Date
Delegated Credentialing Next Audit Date
To Be Credentialed Flag
Credentialed Status
Credentialed Date
Provider Association Effective Date
Date that the Provider is associated with the Group
Provider Association Termination Date
Provider Association Status
Billing Address Contact Department
Billing Address Contact Name
Billing Address Contact Title
Billing Address Line 1
123 Simpson Ave
Billing Address Line 2
Billing Address City
New York
Billing Address State
NY
Billing Address Zip Code
12345
Billing Address Zip Code Extension
Billing Address Phone Number
123-456-7890
Billing Address Phone Number Extension
Billing Address Fax Number
Billing Address Email Address
Billing Address Effective Date

1/1/2021
Billing Address Termination Date
Billing Address Status
Mailing Address Contact Department
Mailing Address Contact Name
Mailing Address Contact Title
Mailing Address Line 1
123 Simpson Ave
Mailing Address Line 2
Mailing Address City
New York
Mailing Address State
NY
Mailing Address Zip Code
12345
Mailing Address Zip Code Extension
Mailing Address Phone Number
Mailing Address Phone Number Extension
Mailing Address Fax Number
Mailing Address Email Address
Mailing Address Effective Date
1/1/2021
Mailing Address Termination Date
Mailing Address Status
CMS Specialty Code