

1730394503

**RADIOLOGIC ASSOCIATES OF NORTHERN NEW
JERSEY**

National Provider Identifiers Registry

The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandated the adoption of standard unique identifiers for health care providers and health plans. The purpose of these provisions is to improve the efficiency and effectiveness of the electronic transmission of health information. The Centers for Medicare & Medicaid Services (CMS) has developed the National Plan and Provider Enumeration System (NPPES) to assign these unique identifiers.

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<i>NPI</i>	1730394503	10-position all-numeric identification number assigned by the NPS to uniquely identify a health care provider.
<i>Entity Type</i>	Organization	Code describing the type of health care provider that is being assigned an NPI. Codes are: 1 = (Person): individual human being who furnishes health care; 2 = (Non-person): entity other than an individual human being that furnishes health care (for example, hospital, SNF, hospital subunit, pharmacy, or HMO).
<i>Provider Organization Name (Legal Business Name)</i>	RADIOLOGIC ASSOCIATES OF NORTHERN NEW JERSEY	Provide organization name (legal business name used to file tax returns with the IRS). The Organization Name field allows the following special characters: ampersand, apostrophe, "at" sign, colon, comma, forward slash, hyphen, left and right parentheses, period, pound sign, quotation mark, and semi-colon. A field cannot contain all special characters.
<i>Provider Other Organization Name</i>	THE IMAGECARE CENTERS	Other name by which the organization provider is or has been known.
<i>Provider Other Organization Name Type Code</i>	3	Code identifying the type of other name. Codes are: 3 = doing business as (d/b/a) name; 4 = former legal business name; 5 = other.
<i>Provider First Line Business Mailing Address</i>	222 HIGH ST	The first line mailing address of the provider being identified. This data element may contain the same information as "Provider first line location address".
<i>Provider Second Line Business Mailing Address</i>	STE 101	The second line mailing address of the provider being identified. This data element may contain the same information as "Provider second line location address".
<i>Provider Business Mailing Address City Name</i>	NEWTON	The City name in the mailing address of the provider being identified. This data element may contain the same information as "Provider location address City name".
<i>Provider Business Mailing Address State Name</i>	NJ	The State or Province name in the mailing address of the provider being identified. This data element may contain the same information as "Provider location address State name".
<i>Provider Business Mailing Address Postal Code</i>	07860-9604	The postal ZIP or zone code in the mailing address of the provider being identified. NOTE: ZIP code plus 4-digit extension, if available. This data element may contain the same information as "Provider location address postal code".
<i>Provider Business Mailing Address Country Code</i>	US	The country code in the mailing address of the provider being identified. This data element may contain the same information as "Provider location address country code".

<i>Provider Business Mailing Address Telephone Number</i>	973-383-1280	The telephone number associated with mailing address of the provider being identified. This data element may contain the same information as "Provider location address telephone number".
<i>Provider Business Mailing Address Fax Number</i>	973-383-2774	The fax number associated with the mailing address of the provider being identified. This data element may contain the same information as "Provider location address fax number".
<i>Provider First Line Business Practice Location Address</i>	222 HIGH ST	The first line location address of the provider being identified. For providers with more than one physical location, this is the primary location. This address cannot include a Post Office box.
<i>Provider Second Line Business Practice Location Address</i>	STE 101	The second line location address of the provider being identified. For providers with more than one physical location, this is the primary location. This address cannot include a Post Office box.
<i>Provider Business Practice Location Address City Name</i>	NEWTON	The city name in the location address of the provider being identified.
<i>Provider Business Practice Location Address State Name</i>	NJ	The State or Province name in the location address of the provider being identified.
<i>Provider Business Practice Location Address Postal Code</i>	07860-9604	The postal ZIP or zone code in the location address of the provider being identified. NOTE: ZIP code plus 4-digit extension, if available.
<i>Provider Business Practice Location Address Country Code</i>	US	The country code in the location address of the provider being identified.
<i>Provider Business Practice Location Address Telephone Number</i>	973-383-1280	The telephone number associated with the location address of the provider being identified.
<i>Provider Business Practice Location Address Fax Number</i>	973-383-2774	The fax number associated with the location address of the provider being identified.
<i>Provider Enumeration Date</i>	05/14/2007	The date the provider was assigned a unique identifier (assigned an NPI).
<i>Last Update Date</i>	07/08/2007	The date that a record was last updated or changed.
<i>Authorized Official Last Name</i>	CORDERO	The last name of the person authorized to submit the NPI application or to change NPS data for a health care provider.
<i>Authorized Official First Name</i>	ORLANDO	The first name of the authorized official
<i>Authorized Official Middle Name</i>	C	The middle name of the authorized official

<i>Authorized Official Title or Position</i>	RADIOLOGIST	The title or position of the authorized official
<i>Authorized Official Name Prefix Text</i>	DR.	Authorized Official Name Prefix Text
<i>Authorized Official Credential Text</i>	M.D.	Authorized Official Credential Text
<i>Authorized Official Telephone Number</i>	973-729-0002	The 10-position telephone number of the authorized official.
<i>Healthcare Provider Taxonomy Code #1</i>	173000000X	The Health Care Provider Taxonomy code is a unique alphanumeric code, ten characters in length. The code set is structured into three distinct "Levels" including Provider Type, Classification, and Area of Specialization.
<i>Healthcare Provider Taxonomy 1</i>	Legal Medicine	Healthcare Provider Taxonomy #1
<i>Healthcare Provider Primary Taxonomy Switch 1</i>	Y	Primary Taxonomy: X - The primary taxonomy switch is Not Answered; Y - The taxonomy is the primary taxonomy (there can be only one per NPI record); N - The taxonomy is not the primary taxonomy.
<i>Healthcare Provider Taxonomy Group 1</i>	193200000X MULTI-SPECIALTY GROUP	Healthcare Provider Taxonomy Group 1
<i>Healthcare Provider Taxonomy Group Description 1</i>	Multi-Specialty Group - A business group of one or more individual practitioners, who practice with different areas of specialization.	Healthcare Provider Taxonomy Group Description 1

NPPES National Plan & Enumeration System
1-800-465-3203 (NPI Toll-Free)
1-800-692-2326 (NPI TTY)
NPI Enumerator
PO Box 6059
Fargo, ND 58108-6059
Email: customerservice@npienumerator.com

For all questions regarding this bundle please contact Support@DataLabs.Health. Also feel free to let us know about any suggestions or concerns. All additional information as well as customer support is available at <https://www.datalabs.health/>.