

1538366471



NPI 1538366471

NPI 1538366471 : MEMPHIS REGIONAL PLANNED PARENTHOOD : MEMPHIS, TN

General Information	
NPI Number	1538366471
Entity Type	Organization
Provider Name (Legal Business Name)	MEMPHIS REGIONAL PLANNED PARENTHOOD
Provider Business Mailing Address	
First Line	11782 MCAULEY ST
Second Line	
City	ARLINGTON
State	TN
Zip	38002-3889
Country	US
Telephone Number	901-496-7806
Fax Number	
Provider Practice Location Address	
First Line	1407 UNION AVE
Second Line	SUITE 300
City	MEMPHIS
State	TN
Zip	38104-3627
Country	US
Telephone Number	901-725-1717
Fax Number	901-274-4790

Authorized Official	
Title or Position	MEDICAL DIRECTOR
Name	DR. MICHAEL STACK
Credential	M.D.
Telephone Number	901-725-1717
Dates	
Provider Enumeration Date	07/02/2007
Last Update Date	07/08/2007

Scope of Practice (Provider's specialty)

#	Taxonomy Code	Taxonomy	License Number	License Number State
1	<u>261QA0005X</u> (Http://Www.Hipaaspace.Com/Medical_billing/Coding/Healthcare.Provider.Taxonomy.Code.Set/261QA0005X)	Ambulatory Family Planning Facility	5816	TN

NPI Data Dissemination. Special Note for Health Care Providers.

In September 2007, CMS began disclosing **NPPES health care provider data that are disclosable under the Freedom of Information Act (FOIA)** to the public. The FOIA-disclosable data for a health care provider (individual or organization) who deactivated an NPI will now be disclosed within the files. For a deactivated NPI, CMS will only disclose the deactivated NPI and the associated date of deactivation within the files.

The NPI Registry and the downloadable files will contain data from the NPPES as reported to NPPES **by you, or by someone acting on your behalf**, or by an organization provider's Authorized Official. If the downloadable file or the NPI Registry reflects information that is incorrect, health care providers should correct that information.

At any time, providers, or someone acting on their behalf, may edit their records by going to <https://nppes.cms.hhs.gov>, or by obtaining a paper NPI Application/Update Form (CMS-10114) from the NPI Enumerator or from the CMS forms page (<http://www.cms.gov/Medicare/CMS-Forms/CMS-Forms>) and mailing the completed, signed form to the NPI Enumerator. Providers who need assistance in editing their records should contact the NPI Enumerator by phone at 1-800-465-3203, by email customerservice@npienumerator.com, or by letter: NPI Enumerator, P.O. Box 6059, Fargo, ND 58108-6059.

Read more at CMS.GOV

<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvIdentStand/DataDissemination.html> (<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvIdentStand/DataDissemination.html>)

Reference Data. Full Replica of the NPPES NPI Record.

#	Field Name	Value	Description
1	NPI	1538366471	10-position all-numeric identification number assigned by the NPS to uniquely identify a health care provider.
2	Entity Type	Organization	Code describing the type of health care provider that is being assigned an NPI. Codes are: <ul style="list-style-type: none"> • 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).
3	Provider Organization Name (Legal Business Name)	MEMPHIS REGIONAL PLANNED PARENTHOOD	Provide the full legal business name of the organization. This name must match the name IRS has on file for the Employer Identification Number (EIN). This is a required field and hence indicated with a red asterisk sign. If the Provider Organization's EIN is already in NPPES, you will have the ability to select the LBN from a dropdown list. If the Provider Organization's EIN is not in the system, you will be required to enter the LBN.
4	Provider First Line Business Mailing Address	11782 MCAULEY 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".
5	Provider Business Mailing Address City Name	ARLINGTON	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".
6	Provider Business Mailing Address State Name	TN	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".
7	Provider Business Mailing Address Postal Code	38002-3889	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".
8	Provider Business Mailing Address Country Code	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".

9	Provider Business Mailing Address Telephone Number	901-496-7806	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".
10	Provider First Line Business Practice Location Address	1407 UNION AVE	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.
11	Provider Second Line Business Practice Location Address	SUITE 300	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.
12	Provider Business Practice Location Address City Name	MEMPHIS	The city name in the location address of the provider being identified.
13	Provider Business Practice Location Address State Name	TN	The State or Province name in the location address of the provider being identified.
14	Provider Business Practice Location Address Postal Code	38104-3627	The postal ZIP or zone code in the location address of the provider being identified. NOTE: ZIP code plus 4-digit extension, if available.
15	Provider Business Practice Location Address Country Code	US	The country code in the location address of the provider being identified.
16	Provider Business Practice Location Address Telephone Number	901-725-1717	The telephone number associated with the location address of the provider being identified.
17	Provider Business Practice Location Address Fax Number	901-274-4790	The fax number associated with the location address of the provider being identified.
18	Provider Enumeration Date	07/02/2007	The date the provider was assigned a unique identifier (assigned an NPI).
19	Last Update Date	07/08/2007	The date that a record was last updated or changed.
20	Authorized Official Last Name	STACK	The last name of the person authorized to submit the NPI application or to change NPS data for a health care provider.
21	Authorized Official First Name	MICHAEL	The first name of the authorized official
22	Authorized Official Title or Position	MEDICAL DIRECTOR	The title or position of the authorized official
23	Authorized Official Name Prefix Text	DR.	Authorized Official Name Prefix Text
24	Authorized Official Credential Text	M.D.	Authorized Official Credential Text
25	Authorized Official Telephone Number	901-725-1717	The 10-position telephone number of the authorized official.
26	Healthcare Provider Taxonomy Code #1	261QA0005X	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.

27	Healthcare Provider Taxonomy 1	Ambulatory Family Planning Facility	Healthcare Provider Taxonomy #1
28	Provider License Number 1	5816	Certain taxonomy selections will require you to enter your license number and the state where the license was issued. Select Foreign Country in the state drop down box if the license was issued outside of United States. The License Number field allows the following special characters: ampersand, apostrophe, colon, comma, forward slash, hyphen, left and right parentheses, period, pound sign, quotation mark, and semi-colon. A field cannot contain all special characters. DO NOT report the Social Security Number (SSN), IRS Individual Taxpayer Identification Number (ITIN) in this section.
29	Provider License Number State Code 1	TN	Provider License Number State Code #1
30	Healthcare Provider Primary Taxonomy Switch 1	Y	Primary Taxonomy: <ul style="list-style-type: none"> • 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.

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