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


1871703645

NPI 1871703645: DR. WILLIAM L LYNN MD



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NPI Number 1871703645 General Information

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NPI Number

1871703645

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Entity Type Code

Individual

Provider Name / Organization

DR. WILLIAM L LYNN MD

Provider Business Mailing Address

 Copy Mailing Address

First Line

219 SCOTT ST

Second Line

City

BEAUFORT

State

SC

Postal Code (Zip)

29902-5554

Country


US

Phone

843-524-3773 (<https://web.archive.org/web/20170827194501/tel:843-524-3773>)

Fax

Provider Business Practice Location

 Copy Practice Location

First Line

219 SCOTT ST

Second Line

City

BEAUFORT

State

SC

Postal Code (Zip)

29902-5554

Country

US

Phone

843-524-3773 (<https://web.archive.org/web/20170827194501/tel:843-524-3773>)

Fax

Authorized Official

Title or Position

Name

Credential

Telephone Number

Provider Enumeration Date

05/23/2007

Last Updated

07/08/2007

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Synchronize (<https://web.archive.org/web/20170827194501/http://www.npivalidator.com/UpdateProfile.aspx?NPI=1871703645&Action=Sync>)

Detailed Information

NPI Number **1871703645** has the "Individual" type of ownership and has been registered to the following primary business legal name (which is a provider name or healthcare organization name) — **DR. WILLIAM L LYNN MD**. Records indicate that the provider gender is "Male". The enumeration date of this NPI Number is **05/23/2007**. NPI Number information was last updated on **07/08/2007**.

The provider is physically located (Business Practice Location) at:

219 SCOTT ST
BEAUFORT, SC
29902-5554, US

DR. WILLIAM L LYNN MD can be reached at his practice location using the following numbers:

Phone:  843-524-3773 (<https://web.archive.org/web/20170827194501/tel:843-524-3773>)
Fax: 

The provider's official mailing address is:

219 SCOTT ST
BEAUFORT, SC
29902-5554, US

The contact numbers associated with the mailing address are:

Phone:  843-524-3773 (<https://web.archive.org/web/20170827194501/tel:843-524-3773>)
Fax: 

Scope of Practice

The following information about the specialty of the provider is available:

Taxonomy Code

Taxonomy Specialty

#	Taxonomy Code	Taxonomy Specialty
1	207VH0002X (https://web.archive.org/web/20170827194501/http://www.hipaaspace.com/Medical_Billing/Coding/Healthcare.Provider.Taxonomy.Code.Set/207VH0002X)	Hospice and Palliative Medicine (https://web.archive.org/web/20170827194501/http://www.hipaaspace.com/Medical_Billing/Coding/Healthcare.Provider.Taxonomy.Code.Set/207VH0002X)
2	207VH0002X (https://web.archive.org/web/20170827194501/http://www.hipaaspace.com/Medical_Billing/Coding/Healthcare.Provider.Taxonomy.Code.Set/207VH0002X)	Hospice and Palliative Medicine (https://web.archive.org/web/20170827194501/http://www.hipaaspace.com/Medical_Billing/Coding/Healthcare.Provider.Taxonomy.Code.Set/207VH0002X)

Legacy (other) Identifiers

For crosswalk purposes, the following legacy (non-NPI) identifiers are available for this provider:

#	Provider Identifier	Identifier Type	Identifier State	Issuer
1	D17625	MEDICARE UPIN	SC	

Reference NPI Information

Full replica of the CMS (NPPES) NPI record:

Field Name	Value	Description
NPI	1871703645	10-position all-numeric identification number assigned by the NPS to uniquely identify a health care provider.
Entity Type	Individual	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).
Is Sole Proprietor	Y	Indicate whether provider is a sole proprietor. <ul style="list-style-type: none"> A sole proprietor is the sole (the only) owner of a business that is not incorporated; that unincorporated business is a sole proprietorship. In a sole proprietorship, the sole proprietor owns all of the assets of the business and is solely liable for all of the debts of the business. There is no difference between a sole proprietorship and a sole proprietor; they are legally a single entity: an individual. In terms of NPI assignment, a sole proprietor is an Entity type 1 (Individual) and is eligible for only one NPI (the sole proprietorship business is not eligible for its own NPI). As an individual, a sole proprietorship cannot be a subpart and cannot have subparts. (See NPI Final Rule for information about subparts.) A sole proprietorship may or may not have employees. Often, the IRS assigns an EIN to a sole proprietorship in order to protect the sole proprietor's SSN from disclosure in claims or on W-2s. NPPES does not capture a sole proprietorship's EIN. Many types of health care providers could be sole proprietorships (for example, group practices, pharmacies, home health agencies).
Provider Last Name (Legal Name)	LYNN	The last name of the provider (if an individual). If the provider is an individual, this is the legal name. This name must match the name on file with the Social Security Administration (SSA). In addition, the date of birth must match that on file with SSA. (First and last names are required for initial applications.) The First, Middle, Last and Credential(s) fields allow 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.
Provider First Name	WILLIAM	The first name of the provider, if the provider is an individual.
Provider Middle Name	L	The middle name of the provider, if the provider is an individual.
Provider Name Prefix Text	DR.	The name prefix or salutation of the provider if the provider is an individual; for example, Mr., Mrs., or Corporal.
Provider Credential Text	MD	The abbreviations for professional degrees or credentials used or held by the provider, if the provider is an individual. Examples are MD, DDS, CSW, CNA, AA, NP, RNA, or PSY. These credential designations will not be verified by NPS.
Provider First Line Business Mailing Address	219 SCOTT 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".
Provider Business Mailing Address City Name	BEAUFORT	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".
Provider Business Mailing Address State Name	SC	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".
Provider Business Mailing Address Postal Code	29902-5554	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".
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".

Field Name	Value	Description
Provider Business Mailing Address Telephone Number	843-524-3773	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".
Provider First Line Business Practice Location Address	219 SCOTT 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.
Provider Business Practice Location Address City Name	BEAUFORT	The city name in the location address of the provider being identified.
Provider Business Practice Location Address State Name	SC	The State or Province name in the location address of the provider being identified.
Provider Business Practice Location Address Postal Code	29902-5554	The postal ZIP or zone code in the location address of the provider being identified. NOTE: ZIP code plus 4-digit extension, if available.
Provider Business Practice Location Address Country Code	US	The country code in the location address of the provider being identified.
Provider Business Practice Location Address Telephone Number	843-524-3773	The telephone number associated with the location address of the provider being identified.
Provider Enumeration Date	05/23/2007	The date the provider was assigned a unique identifier (assigned an NPI).
Last Update Date	07/08/2007	The date that a record was last updated or changed.
Provider Gender Code	M	The code designating the provider's gender if the provider is a person.
Provider Gender	Male	The provider's gender if the provider is a person.
Healthcare Provider Taxonomy Code #1	207VH0002X	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.
Healthcare Provider Taxonomy 1	Hospice and Palliative Medicine	Healthcare Provider Taxonomy #1
Provider License Number 1	10114	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.
Provider License Number State Code 1	SC	Provider License Number State Code #1
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.

Field Name	Value	Description
Healthcare Provider Taxonomy Code 2	207VH0002X	Healthcare Provider Taxonomy Code #2
Healthcare Provider Taxonomy 2	Hospice and Palliative Medicine	Healthcare Provider Taxonomy #2
Provider License Number 2	026148	Provider License Number #2
Provider License Number State Code 2	GA	Provider License Number State Code #2
Healthcare Provider Primary Taxonomy Switch 2	N	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.
Other Provider Identifier 1	D17625	Other Provider Identifier #1
Other Provider Identifier Type 1	MEDICARE UPIN	Other Provider Identifier Type #1
Other Provider Identifier State 1	SC	Other Provider Identifier State #1

Driving Directions to " DR. WILLIAM L LYNN MD" Practice Location

These directions are for planning purposes only. You may find that construction projects, traffic, or other events may cause road conditions to differ from the map results.

Yours Location (Starting point)	Practice Location (Destination)	
<input type="text" value="My Location"/>	<input type="text" value="219 SCOTT ST BEAUFORT SC 29902-5554"/>	<input type="button" value="Get Direction"/>

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 NAICS Codes Lookup (https://web.archive.org/web/20170827194501/http://www.hipaaspace.com/Medical_Billing/Coding/North_American_Industry_Classification_System/NAICS_Codes_Lookup.aspx)
 LOINC Codes Lookup (https://web.archive.org/web/20170827194501/http://www.hipaaspace.com/Medical_Billing/Coding/Logical_Observation_Identifier_Names_Codes/LOINC_Codes_Lookup.aspx)
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