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1023193646



1023193646 NPI Number Info

Status: Active (Since 10/25/2006)

KALAMANI RACHEL DHARMA MD

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(http://www.hipaaspace/http://www.hipaaspace

NPI Number 1023193646
Entity Type Individual
Provider Name KALAMANI RACHEL DHARMA MD

Provider Mailing Address

Copy Mailing Address

First Line 6421 LAVENDALE AVE
Second Line

 City
 DALLAS

 State
 TX

 Postal Code
 75230-3541

 Country
 US

Phone 972-318-9788 (tel:972-318-9788)

Fax 866-904-7568

Provider Practice Location

der Practice Location

First Line 3453 SAINT FRANCIS AVE
Second Line SUITE 125

City DALLAS
State TX
Postal Code 75228-7199
Country US

Phone 972-318-9788 (tel:972-318-9788)

Fax 866-904-7568

Authorized Official

Title or Position

Telephone Number

Provider Enumeration Date 10/25/2006

Last Updated 06/14/2013

Is it vour NPI number ?

Edit (http://www.npivalidator.com/UpdateProfile.aspx?NPI=1023193646&Action=Edit)

Delete (http://www.npivalidator.com/UpdateProfile.aspx?NPI=1023193646&Action=Delete)

 $Synchronize\ (http://www.npivalidator.com/UpdateProfile.aspx?NPI=1023193646\&Action=Sync)$

Detailed Information

Name Credential NPI Number 1023193646 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) — KALAMANI RACHEL DHARMA MD. Records indicate that the provider gender is "Female". The enumeration date of this NPI Number is 10/25/2006. NPI Number information was last updated on 06/14/2013.

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

3453 SAINT FRANCIS AVE SUITE 125 DALLAS, TX 75228-7199, US

KALAMANI RACHEL DHARMA MD can be reached at his practice location using the following numbers:

Phone: ☑ <u>972-318-9788 (tel:972-318-9788)</u>
Fax: ☐ 866-904-7568

The provider's official mailing address is:

6421 LAVENDALE AVE DALLAS, TX 75230-3541, US

The contact numbers associated with the mailing address are:

Phone: **③** 972-318-9788 (tel:972-318-9788) Fax: iii 866-904-7568

Scope of Practice

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

Taxonomy Code Taxonomy Specialty

1 <u>207V00000X</u> <u>Obstetrics & Gynecology.</u>

(http://www.hipaaspace.com/medical billing/coding/healthcare.provider.taxonomy.code.set/207V00000X) (http://www.hipaaspace.com/medical billing/coding/healthcare.provider.taxonomy.code.set/207V00000X)

Legacy (Non-NPI) Identifiers

#	Provider Identifier	Identifier Type	Identifier State	Issuer
1	101379902	MEDICAID	TX	

Legacy & Proprietary Identifiers Ever Reported To NPPES

Collection of legacy and proprietary (non NPI) identifiers ever reported for this provider:

#	Provider Identifier	Identifier Type	Identifier State	Issuer
1	101379902	MEDICAID	тх	

Reference NPI Information. Full replica of the CMS (NPPES) NPI record

NPI	Value
AF1	1023193646
	10-position all-numeric identification number assigned by the NPS to uniquely identify a health care provider.
Intity Type	Individual
	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).
s Sole Proprietor	Υ
	 Indicate whether provider is a sole proprietor. 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 sole proprietorship's EIN. Many types of health care providers could be sole proprietorships (for example, group practices, pharmacies, home health agencies).
Provider Last	DHARMA
lame (Legal lame)	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, pouncing, quotation mark, and semi-colon. A field cannot contain all special characters.
Provider First lame	KALAMANI
iame	The first name of the provider, if the provider is an individual.
Provider Middle Jame	RACHEL
iailie	The middle name of the provider, if the provider is an individual.
Provider	MD
Credential Text	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, PSY. These credential designations will not be verified by NPS.
Provider First	6421 LAVENDALE AVE
ine Business Iailing Address	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	DALLAS
Address City Name	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".
	TX
	14
Business Mailing Address State	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".
Business Mailing Address State Hame Provider	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
dusiness Mailing ddress State lame Provider dusiness Mailing ddress Postal	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". 75230-3541
Provider Business Mailing Address State Name Provider Business Mailing Address Postal Code	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". 75230-3541 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 state name".
Business Mailing Address State Name Provider Business Mailing Address Postal	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". 75230-3541 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 same information as "Provider location address postal code".

Obstetrics & Gynecology

G3289

Healthcare Provider Taxonomy #1

Healthcare

Provider License

Provider Taxonomy 1

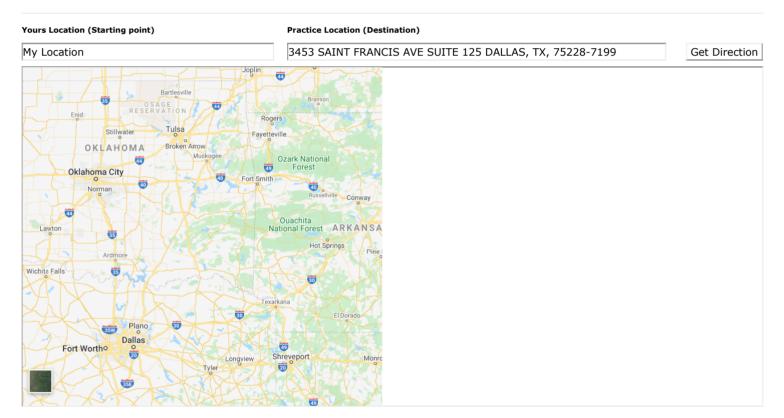
Field	Name

Value

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.

	Number (33N), The Individual Taxpayer Identification Number (111N) in this section.
Provider License Number State	тх
Code 1	Provider License Number State Code #1
Healthcare Provider	Υ
Primary	Primary Taxonomy:
Taxonomy	X - The primary taxonomy switch is Not Answered;
Switch 1	 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	101379902
Identifier 1	Other Provider Identifier #1
Other Provider	MEDICAID
Identifier Type 1	Other Provider Identifier Type #1
Other Provider	тх
Identifier State 1	Other Provider Identifier State #1

Directions to "KALAMANI RACHEL DHARMA MD" Practice Location



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We respond to notices of alleged copyright infringement and terminate accounts of repeat infringers according to the process set out in the U.S. Digital Millennium Copyright Act.

1023193646 NPI Number | KALAMANI RACHEL DHARMA MD | DALLAS, TX | NPI Registry | Medical Coding Library | www.HIPAASpac...

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3/17/2020