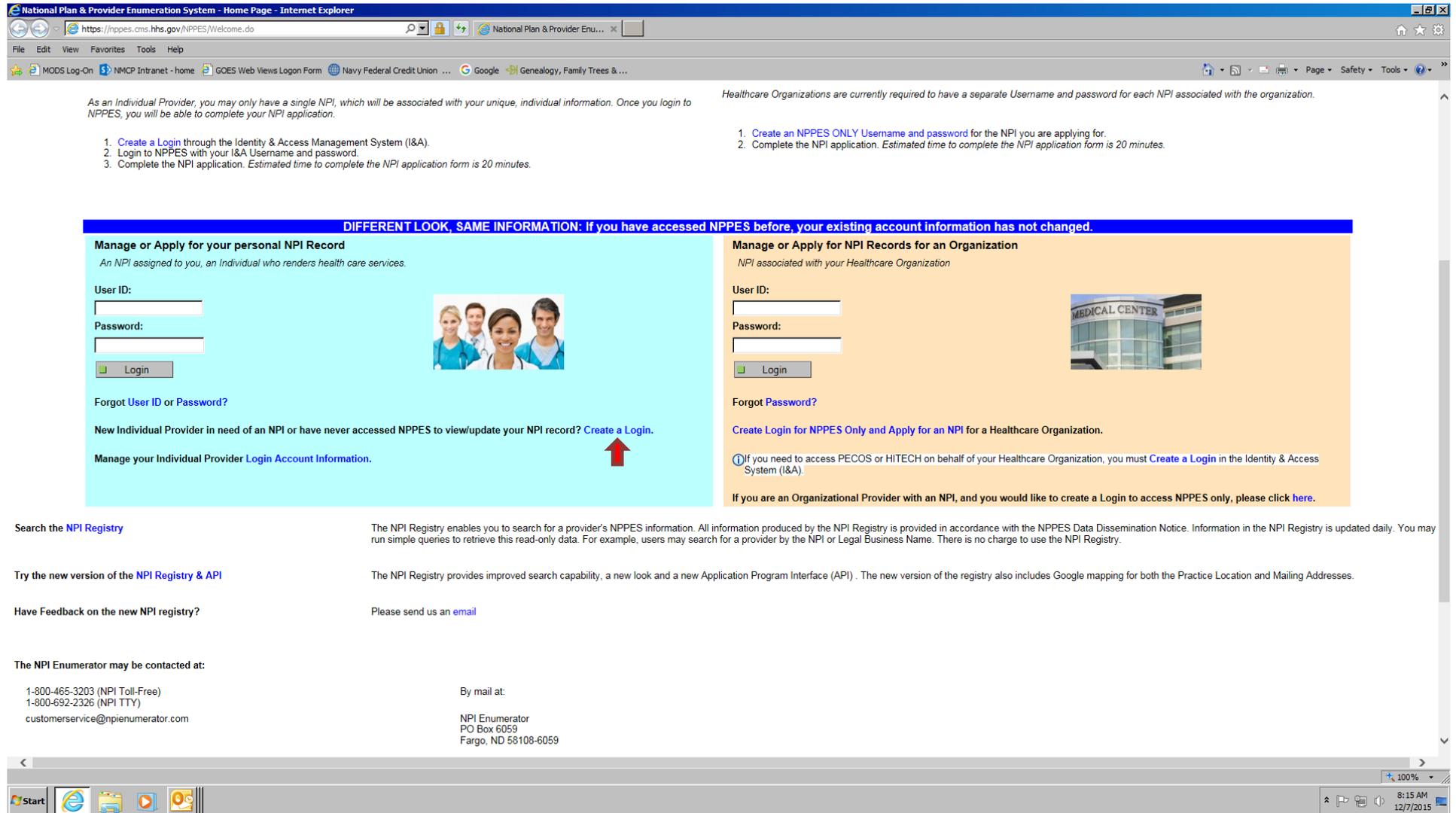


Now to Apply for an National Provider Identification (NPI) Number

1. Go to the National Plan and Provider Enumeration System (NPPES) located at <https://nppes.cms.hhs.gov/NPPES/Welcome.do> as shown below
2. Once there click on “New Individual Provider in need of an NPI or have accessed NPPES to view/update your NPI record?”



The screenshot shows the NPPES website interface. At the top, there is a navigation bar with the title "National Plan & Provider Enumeration System - Home Page - Internet Explorer". Below the navigation bar, there is a main content area with two columns of information. The left column is titled "Manage or Apply for your personal NPI Record" and includes a "User ID:" field, a "Password:" field, and a "Login" button. The right column is titled "Manage or Apply for NPI Records for an Organization" and includes a "User ID:" field, a "Password:" field, and a "Login" button. A red arrow points to the "Create a Login" link in the left column. Below the main content area, there are links for "Search the NPI Registry", "Try the new version of the NPI Registry & API", and "Have Feedback on the new NPI registry?". At the bottom, there is contact information for the NPI Enumerator, including phone numbers and an email address.

DIFFERENT LOOK, SAME INFORMATION: If you have accessed NPPES before, your existing account information has not changed.

Manage or Apply for your personal NPI Record
An NPI assigned to you, an Individual who renders health care services.

User ID:

Password:

Login

Forgot User ID or Password?

New Individual Provider in need of an NPI or have never accessed NPPES to view/update your NPI record? [Create a Login](#).

Manage your Individual Provider Login Account Information.

Manage or Apply for NPI Records for an Organization
NPI associated with your Healthcare Organization

User ID:

Password:

Login

Forgot Password?

[Create Login for NPPES Only and Apply for an NPI for a Healthcare Organization.](#)

If you need to access PECOS or HITECH on behalf of your Healthcare Organization, you must [Create a Login](#) in the Identity & Access System (I&A).

If you are an Organizational Provider with an NPI, and you would like to create a Login to access NPPES only, please click [here](#).

Search the NPI Registry
The NPI Registry enables you to search for a provider's NPPES information. All information produced by the NPI Registry is provided in accordance with the NPPES Data Dissemination Notice. Information in the NPI Registry is updated daily. You may run simple queries to retrieve this read-only data. For example, users may search for a provider by the NPI or Legal Business Name. There is no charge to use the NPI Registry.

Try the new version of the NPI Registry & API
The NPI Registry provides improved search capability, a new look and a new Application Program Interface (API). The new version of the registry also includes Google mapping for both the Practice Location and Mailing Addresses.

Have Feedback on the new NPI registry?
Please send us an [email](#)

The NPI Enumerator may be contacted at:

1-800-465-3203 (NPI Toll-Free)
1-800-692-2326 (NPI TTY)
customerservice@npienumerator.com

By mail at:
NPI Enumerator
PO Box 6059
Fargo, ND 58108-6059

3. Click on "Accept" Terms and Conditions.

The screenshot shows an Internet Explorer browser window with the following details:

- Browser Title:** Identity & Access Management System - CMS Warning - Internet Explorer
- Address Bar:** https://ppes.cms.hhs.gov/IAWeb/warning.do?fvurl=/register/startRegistration.do
- Page Header:** CMS Centers for Medicare & Medicaid Services
- Section Header:** Identity & Access Management System
- Content:**

Terms and Conditions

You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:
You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system.

At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.

Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

To continue, you must accept the terms and conditions. If you decline, you will not be able to continue.
- Buttons:** Accept, Decline
- Annotation:** A red arrow points to the "Accept" button.

The Windows taskbar at the bottom shows the Start button, Internet Explorer, File Explorer, and other applications. The system tray displays the time as 9:13 AM on 12/7/2015 and a zoom level of 85%.

4. Enter and confirm your email address.

The screenshot shows a web browser window titled "User Registration Create E-mail - Internet Explorer" with the URL <https://rppes.cms.hhs.gov/IAWeb/register/starRegistration.do>. The page content is from the CMS Centers for Medicare & Medicaid Services Identity & Access Management System. The main heading is "Identity & Access Management System" with a "Help" link. The "User Registration" section includes a note: "Note: The e-mail address provided must be a unique e-mail address for you, and will be the e-mail address used to contact you regarding your user account." Below this are two required text input fields: "E-mail Address:" and "Confirm E-mail Address:". There is also a CAPTCHA image with the text "dunkey" and a "Listen to audio" link. At the bottom of the form are "Submit" and "Cancel" buttons. To the right, there are four resource links: "Quick Reference Guide" (PDF icon), "Frequently Asked Questions" (PDF icon), "Video: How to Create an Account" (video icon), "Video: How to register as an Authorized Official for your Organization" (video icon), "Video: Setting Up Staff" (video icon), and "Video: Connections?" (video icon). The Windows taskbar at the bottom shows the Start button, Internet Explorer, and other open applications. The system tray shows the time as 9:03 AM on 12/7/2015.

5. Create a User ID, Password and five security questions.

The screenshot shows a web browser window displaying the CMS Identity & Access Management System. The page is titled "User Registration - User Security" and is part of a three-step process: Step 1 (User Security), Step 2 (User Info), and Final Review. The current step, Step 1, contains the following fields and instructions:

- User ID:** A text input field. Instructions: Must be 6-12 alphanumeric characters and unique within the Identity & Access Management System and NPDES. Must not contain more than four digits, nor spaces or special characters. Must not contain personally identifiable information such as SSN or NPI.
- Password:** A text input field. Instructions: Must be 8-12 alphanumeric characters. Must contain at least one letter and one number. May not contain any special characters nor be the same as the User ID.
- Confirm Password:** A text input field.

Below these fields, there is a section titled "Please select five different security questions and enter their answers below:". It contains five pairs of dropdown menus for questions and corresponding text input fields for answers.

At the bottom of the form, there are "Continue" and "Cancel" buttons.

The browser's address bar shows the URL: <https://npdes.cms.hhs.gov/IAWeb/register/display.do>. The taskbar at the bottom shows the Start button and several application icons, including Internet Explorer, File Explorer, and Word. The system tray in the bottom right corner shows the time as 9:04 AM on 12/7/2015.

6. Enter required fields and continue.

The screenshot shows a web browser window displaying the CMS Identity & Access Management System. The page is titled "User Registration - User Information" and is part of a three-step process: Step 1 (User Security), Step 2 (User Info), and Final Review. The current step is Step 2, which requires the user to provide personal details for identity verification. The form includes fields for First Name, Middle Name, Last Name, Suffix, Business Phone Number, Fax Number, Date of Birth, SSN, Personal Phone Number, Home Address Line 1, Home Address Line 2, City, Country, State/Province/Territory, and Postal/ZIP Code. A "Continue" button is visible at the bottom of the form, and a "Cancel" link is also present. The user is logged in as "devildoc67".

User Registration User Info - Internet Explorer
https://rppes.cms.hhs.gov/IAWeb/register/createUserInfo.do

National Plan & Provider Enumer... User Registration User Info

File Edit View Favorites Tools Help

MODS Log-On NMCP Intranet - home GOES Web Views Logon Form Navy Federal Credit Union ... Google Genealogy, Family Trees & ...

Page Safety Tools

CMS Centers for Medicare & Medicaid Services Logged in as devildoc67 Sign Out

Identity & Access Management System Help

User Registration - User Information

Step 1 ✓ User Security Step 2 User Info Final Review

Please provide the details below. They will be used to verify your identity. [Back to Previous Page](#)

* indicates required field(s)

* First Name:

Middle Name:

* Last Name:

Suffix:

* Business Phone Number:

Fax Number:

* Date of Birth: (MM/DD/YYYY)

* SSN:

Primary E-mail Address: hm1kinder@yahoo.com

* Personal Phone Number:

* Home Address Line 1:

Home Address Line 2:

* City:

* Country: United States

* State/ Province/ Territory: SE - Select One

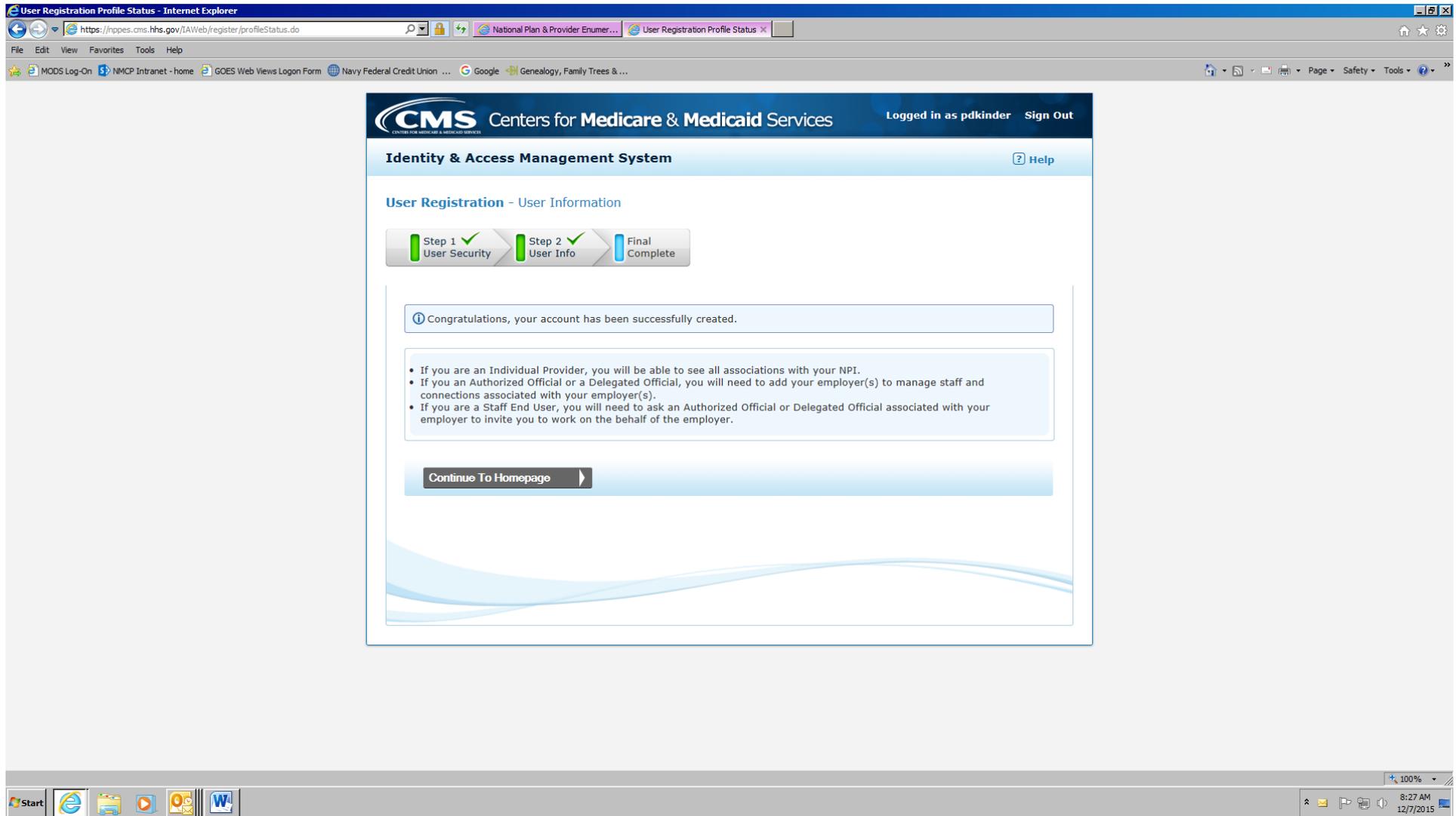
* Postal/ZIP Code:

Continue | Cancel

85%

9:07 AM 12/7/2015

7. Click "Continue to Homepage." You will be returned to the National Plan and Provider Enumeration System (NPPES) homepage.



8. Now enter Username and Password you just created in previous step and Login.

National Plan & Provider Enumeration System - Home Page - Internet Explorer
https://nppes.cms.hhs.gov/NPPES/Welcome.do

As an Individual Provider, you may only have a single NPI, which will be associated with your unique, individual information. Once you login to NPPES, you will be able to complete your NPI application.

Healthcare Organizations are currently required to have a separate Username and password for each NPI associated with the organization.

1. Create a Login through the Identity & Access Management System (I&A).
2. Login to NPPES with your I&A Username and password.
3. Complete the NPI application. Estimated time to complete the NPI application form is 20 minutes.

1. Create an NPPES ONLY Username and password for the NPI you are applying for.
2. Complete the NPI application. Estimated time to complete the NPI application form is 20 minutes.

DIFFERENT LOOK, SAME INFORMATION: if you have accessed NPPES before, your existing account information has not changed.

Manage or Apply for your personal NPI Record

An NPI assigned to you, an Individual who renders health care services.

User ID:

Password:

[Forgot User ID or Password?](#)

New Individual Provider in need of an NPI or have never accessed NPPES to view/update your NPI record? [Create a Login.](#)

[Manage your Individual Provider Login Account Information.](#)

Manage or Apply for NPI Records for an Organization

NPI associated with your Healthcare Organization

User ID:

Password:

[Forgot Password?](#)

[Create Login for NPPES Only and Apply for an NPI for a Healthcare Organization.](#)

ⓘ If you need to access PECOS or HITECH on behalf of your Healthcare Organization, you must [Create a Login](#) in the Identity & Access System (I&A).

If you are an Organizational Provider with an NPI, and you would like to create a Login to access NPPES only, please click [here](#).

[Search the NPI Registry](#)

The NPI Registry enables you to search for a provider's NPPES information. All information produced by the NPI Registry is provided in accordance with the NPPES Data Dissemination Notice. Information in the NPI Registry is updated daily. You may run simple queries to retrieve this read-only data. For example, users may search for a provider by the NPI or Legal Business Name. There is no charge to use the NPI Registry.

[Try the new version of the NPI Registry & API](#)

The NPI Registry provides improved search capability, a new look and a new Application Program Interface (API). The new version of the registry also includes Google mapping for both the Practice Location and Mailing Addresses.

[Have Feedback on the new NPI registry?](#)

Please send us an [email](#)

The NPI Enumerator may be contacted at:

1-800-465-3203 (NPI Toll-Free)
1-800-692-2326 (NPI TTY)
customerservice@npienumerator.com

By mail at:

NPI Enumerator
PO Box 6059
Fargo, ND 58108-6059

Start | 100% | 8:15 AM 12/7/2015

9. Click on "Register for an NPI."

The screenshot shows a web browser window with the URL <https://nppes.cms.hhs.gov/IAWeb/home/display.do>. The page header includes the CMS logo and the text "Centers for Medicare & Medicaid Services". The user is logged in as "pdtkinder" and can click "Sign Out".

The main heading is "Identity & Access Management System" with a "Help" link. Below this are navigation tabs for "Home", "My Profile", and "My Connections".

The "Home" section contains the following text:

Welcome to the Identity and Access Management System!

Are you an Individual Provider?

We have not been able to locate an NPI record that matches the information you provided. If you are an individual who provides health care services, please [register for an NPI](#) (or update your existing information) before you login to any additional CMS systems.

Are you responsible for an Organization?

If you are the Authorized or Delegated Official for a Healthcare Organization (or a 3rd Party Company, such as a billing or credentialing management company that does not provide health care services, but works on behalf of health care providers), select the My Profile section and add your employers to begin the approval process.

None of above?

If you do not match either description above, please review the Frequently Asked Questions (FAQ) below and/or contact your supervisor and ask that they invite you to register as a member of their staff. If they have not registered already, they will need to do so.

The "News & Alerts" box on the right contains:

EUS Contact Information:
External User Services (EUS)
PO Box 792750
San Antonio, Texas 78279
<https://eus.custhelp.com>

At the bottom, there are several quick reference items:

- Quick Reference Guide:** Overview of features and tools to manage your account.
- Video: How to Create an Account:** Video on how to create an account if you are an individual provider, an Authorized or Delegated Official for your organization or to work on behalf of providers.
- Video: How to register as an Authorized Official for your Organization:** Video on how to register with CMS as an Authorized or Delegated Official.
- Frequently Asked Questions:** (represented by a PDF icon)
- Video: Setting Up Staff:** (represented by a video icon)
- Video: Connections?:** Video on how a (represented by a video icon)

The Windows taskbar at the bottom shows the Start button, Internet Explorer, and other open applications. The system tray shows the date and time as 8:28 AM on 12/7/2015.

10. Click on "New NPI Application."

The screenshot shows the NPPES National Provider System website in Internet Explorer. The browser address bar shows the URL <https://nppes.cms.hhs.gov/NPPES/Status.do>. The page title is "Application Status - Internet Explorer". The NPPES logo is visible in the top left corner, and "Logoff Help" is in the top right corner.

The main content area is titled "Welcome to the National Provider System" and displays the user name "User Name: Paul Kinder". Below this, a message states: "You do not have an individual (Type 1) NPI. Click the Submit New NPI Application button to begin the process."

There are two main sections of options:

- NPI Options:** Submit new NPI, Generate NPI Assignment Notification and View the NPI record in a single page view.
 - New NPI Application** (highlighted with a green arrow) - Apply for an NPI
 - Send E-mail Notification** - Send NPI Assignment Notification to the Contact Person e-mail address
 - View Printer Friendly Application** - View the NPI record in a single page
- Account Options:** Update your account in the Identity & Access (I&A) Management System. You will be navigated to the I&A Management System, which will require you to sign in with I&A User ID and password. Upon successful login, you will be navigated to the appropriate page.
 - Go to I&A** - Manage your Profile
 - Change Password** - Update the Password
 - Change Security Question/Answer** - Update the Security Questions and Answers

The Windows taskbar at the bottom shows the Start button, Internet Explorer, File Explorer, and other applications. The system tray in the bottom right corner shows the date and time as 8:30 AM on 12/7/2015.

11. Check the certify box and click on "Submit New NPI Application."

Application Instructions - Internet Explorer
https://nppes.cms.hhs.gov/NPPES/StaticForward.do?forward=static.instructions.type1

NPPES
National Plan & Provider Enumeration System

NPI Application Instructions

Note: Use of **Back** and **Forward** browser buttons could result in loss of all the information entered. Users should use the Next and Previous buttons provided on the application to navigate between the pages of the application.

Step 1: Before you begin, make sure you have the following information.
This information will be required to complete the NPI Application Form.
You will not be able to save your work if you quit before you have completed the application form.

- Information Required for Individual Providers**
 - Provider Name
 - SSN (or ITIN if not eligible for SSN) ²
 - Provider Date of Birth
 - Country of Birth
 - State of Birth (if Country of Birth is U.S.)
 - Provider Gender
 - Mailing Address
 - Practice Location Address and Phone Number
 - Taxonomy (Provider Type) ⁴
 - State License Information ¹
 - Contact Person Name
 - Contact Person Phone Number and E-mail
- Information Required for Organizations**
 - Organization Name
 - Employer Identification Number (EIN) ³
 - Name of Authorized Official for the Organization
 - Phone Number of Authorized Official for the Organization
 - Organization Mailing Address
 - Practice Location Address and Phone Number
 - Taxonomy (Provider Type) ⁴
 - Contact Person Name
 - Contact Person Phone Number and E-mail

¹ (required for certain taxonomies only)
² (SSN or ITIN information should only be reported in the SSN or ITIN field)
³ Do not report an SSN or IRS ITIN in the EIN field
⁴ Provider Taxonomy codes can be obtained from <http://www.wpc-edi.com/codes/taxonomy>

Online Help is available from each page of the Application / Update Form by clicking "Help" at the top right of the page.
If you need additional help or have any questions concerning your application, contact the NPI Enumerator.

NPI Enumerator Contact Information

By phone: 1-800-465-3203 (NPI Toll-Free) 1-800-692-2326 (NPI TTY)	By e-mail at: customerservice@npienumerator.com	By mail at: NPI Enumerator PO Box 6059 Fargo, ND 58108-6059
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Step 2: Certification Statement: Read and Certify.

I certify that this form is being completed by, or on behalf of, a health care provider as defined at 45 CFR § 160.103.

- I have read the contents of the application and the information contained herein is true, correct, and complete. If I become aware that any information in this application is not true, correct, or complete, I agree to notify the NPI Enumerator immediately.
- I authorize the NPI Enumerator to verify the information contained herein. I agree to keep the NPPES updated with any changes to data listed on this application form within 30 days of the effective date of the change.
- I have read and understand the [Privacy Act Statement](#).
- I have read and understand the **Penalties for Falsifying Information** on the NPI Application / Update Form as stated in this application. I am aware that falsifying information will result in fines and/or imprisonment.

Penalties for Falsifying Information on the NPI Application / Update Form:
18 U.S.C. 1001 authorizes criminal penalties against an individual who in any matter within the jurisdiction of any department or agency of the United States knowingly or willfully falsifies, conceals, or covers up by any trick, scheme or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry. Individual offenders are subject to fines of up to \$250,000 and imprisonment for up to five years. Offenders that are organizations are subject to fines of up to \$500,000. 18 U.S.C. 3571(d) also authorizes fines of up to twice the gross gain derived by the offender if it is greater than the amount specifically authorized by the sentencing statute.

Step 3: Begin online application.

Windows taskbar: Start, Internet Explorer, File Explorer, Windows Media Center, Outlook, Word. System tray: 8:34 AM, 12/7/2015.

12. Enter Provider Name and Other Identifying Information. Note: Select No for "Is the Provider a Sole Proprietor."

Individual Profile - Internet Explorer
https://nppes.cms.hhs.gov/NPPES/AppPage3.do

NPPES
National Plan & Provider Enumeration System

Application Sections

- Provider Profile
- Mailing Address
- Practice Location
- Other Identifiers
- Taxonomy
- Contact Person
- Certification

NPI Application Form - Provider Profile

Note: The name, date of birth and social security number fields will not be editable until the NPI applications is enumerated. To update these fields, logoff the NPPES system and log in to Identity and Access (I&A) Management system to update your profile.

Provider Name Information: * Indicates Required Field

Prefix: * First: Middle: * Last: Suffix:

Credential(s): (M.D., D.O., etc.)

Other Name: (if applicable)

Prefix: First: Middle: Last: Suffix:

Credential(s): (M.D., D.O., etc.) Type of Other Name:

Other Identifying Information:

* Date of Birth: (MM/DD/YYYY) * Social Security Number: (Without Dashes)

State of Birth: (* If U.S.) * Country of Birth:

* Gender: Male Female

* Is the Provider a Sole Proprietor? Yes No

Next >

Note: Please use the Next button to navigate to the next page in the application.

Windows Taskbar: Start, Internet Explorer, File Explorer, VLC, Outlook, Word. System tray: 8:42 AM, 12/7/2015.

13. Enter your mailing address and click Next.

Mailing Address - Internet Explorer
https://nppes.cms.hhs.gov/NPPES/AppPage2.do

File Edit View Favorites Tools Help

MODS Log-On NMCP Intranet - home GOES Web Views Logon Form Navy Federal Credit Union ... Google Genealogy, Family Trees & ...

NPPES
National Plan & Provider Enumeration System

Logoff Help

Application Sections

- > Provider Profile
- > **Mailing Address**
- > Practice Location
- > Other Identifiers
- > Taxonomy
- > Contact Person
- > Certification

NPI Application Form - Business Mailing Address

If your address is **outside** the U.S., click here: Foreign Address

If your address is **military address**, click here: Military Address

* Indicates Required Field

Domestic Business Mailing Address Information

* Address Line 1: (Street Number and Name)

Address Line 2: (e.g. Suite Number)

* City: * State: * Zip + 4: -

Country: United States

Phone Number: Extension: Fax Number:
(Without Dashes) (Without Dashes)

< Previous Next >

Note: Please use the Previous and Next buttons to navigate between the pages in the application.

Start Internet Explorer ... 10:11 AM 12/7/2015

14. Enter **620 John Paul Jones Cir. Portsmouth, VA 23708-2197** and phone number **757 953 2891** for Business Practice Location Address.

The screenshot shows a web browser window titled "Practice Location - Internet Explorer" with the URL "https://nppes.cms.hhs.gov/NPPES/AppPage3.do". The page header includes the NPPES logo and the text "National Plan & Provider Enumeration System". A navigation menu on the left lists "Application Sections" with "Practice Location" selected. The main content area is titled "NPI Application Form - Business Practice Location Address".

Instructions and options for address type:

- If your address is **outside** the U.S., click here: Foreign Address
- If your address is **military address**, click here: Military Address

Domestic Business Practice Location Address Information

If the Business Practice Location Address is the same as the Business Mailing Address, click here: Same As Business Mailing Address

If your Business Mailing Address and Business Practice Location Address differ, please fill out the following:

- * Address Line 1: (Street Number and Name)
- Address Line 2: (e.g. Suite Number)
- * City: * State: * Zip + 4
- Country: United States
- * Phone Number: Extension: Fax Number: (Without Dashes)

Navigation buttons: < Previous, Next >

Note: Please use the Previous and Next buttons to navigate between the pages in the application.

15. If you encounter the below screen, click on "Accept Standardized Address."

The screenshot shows a web browser window titled "Address Standardization - Internet Explorer" with the URL "https://nppes.cms.hhs.gov/NPPES/AppPage3.do". The page header includes the NPPES logo and the text "National Plan & Provider Enumeration System". A sidebar on the left lists "Application Sections" with "Mailing Address" selected. The main content area is titled "NPI Application Form - Business Mailing Address Standardization".

In order to ensure the optimum performance of the National Provider System, we standardize all addresses; for example, we change "Avenue" to "Ave." This makes it easier to find your information again in the future and to ensure that we do not have duplicate entries where they should not occur.

Your standardized address is:

620 John Paul Jones Cir
Portsmouth VA 23708 - 2197

Please do one of the following:

- 1) Accept the standardized address.
- 2) Reject the standardized address and keep your input as is.
Note: Rejecting standardized address will delay enumeration
- 3) Modify your input in the boxes below and submit for revalidation.

* Indicates Required Field

* Address Line 1: (Street Number and Name) 620 John Paul Jones Circle

Address Line 2: (e.g. Suite Number)

* City, State, Zip: Portsmouth VA - VIRGINIA 23708 - 2197

Buttons: Accept Standardized Address, Use Input Address, Revalidate Address

The Windows taskbar at the bottom shows the Start button, several application icons, and the system tray with the date and time: 8:44 AM 12/7/2015.

16. Enter other Provider Identifiers if you have them and click Next.

The screenshot shows the NPPES application interface in Internet Explorer. The browser address bar shows the URL <https://nppes.cms.hhs.gov/NPPES/AppPage4.do>. The page title is "NPI Application Form - Other Identification Numbers".

Application Sections

- Provider Profile
- Mailing Address
- Practice Location
- Other Identifiers**
- Taxonomy
- Contact Person
- Certification

NPI Application Form - Other Identification Numbers

Please Enter All Other Provider Identifiers (Medicare UPIN, Medicare PIN, Medicare OSCAR/Certification, Medicare NSC, Medicaid, and Other):

Note: These numbers will be of use in matching your NPI record to insurers' records so you can continue to be recognized by insurers. If you don't have such numbers, you are not required to obtain them. DO NOT report the Social Security Number (SSN) or IRS Individual Taxpayer Identification Number (ITIN) in this section.

Issuer	Number	State	Issuer

Note: Please use the Previous and Next buttons to navigate between the pages in the application.

The Windows taskbar at the bottom shows the Start button, Internet Explorer, File Explorer, and other applications. The system tray shows the time as 8:47 AM on 12/7/2015 and a zoom level of 90%.

17. Under Individual Taxonomy scroll down and select "Student Health Care" and then click on Next.

The screenshot shows a web browser window titled "Taxonomy Page1 - Internet Explorer" with the URL "https://nppes.cms.hhs.gov/NPPES/AppPage6.do". The page content includes the NPPES logo and the title "NPI Application Form - Select Individual Taxonomy Page 1 of 2". On the left, a sidebar lists "Application Sections" with "Taxonomy" selected. The main area contains the instruction "Please Select Provider Type Code:" followed by a dropdown menu. The dropdown menu is open, showing a list of provider type codes: 18 Pharmacy Service Providers, 36 Physician Assistants & Advanced Practice Nursing Providers, 21 Podiatric Medicine & Surgery Service Providers, 22 Respiratory, Developmental, Rehabilitative and Restorative Service Providers, 23 Speech Language and Hearing Service Providers, 33 Student Health Care (highlighted), and 24 Technologists, Technicians & Other Technical Service Providers. Below the dropdown are "Previous" and "Next" buttons. A "Note" section at the bottom left provides instructions on how to use the provider type code and where to find a complete listing.

Application Sections

- > Provider Profile
- > Mailing Address
- > Practice Location
- > Other Identifiers
- > **Taxonomy**
- > Contact Person
- > Certification

NPI Application Form - Select Individual Taxonomy Page 1 of 2

Please Select Provider Type Code:

- 18 Pharmacy Service Providers
- 36 Physician Assistants & Advanced Practice Nursing Providers
- 21 Podiatric Medicine & Surgery Service Providers
- 22 Respiratory, Developmental, Rehabilitative and Restorative Service Providers
- 23 Speech Language and Hearing Service Providers
- 33 Student Health Care**
- 24 Technologists, Technicians & Other Technical Service Providers

<< Previous Next >>

Note:

1. The Provider Type Code is the first two digits of the taxonomy number.
2. A complete listing of provider taxonomy codes can be obtained from <http://www.wpc-edi.com/codes/taxonomy>.
3. Please use the Previous and Next buttons to navigate between the pages in the application.

18. Ensure “390200000X - Student in an Organized Health Care Education/Training Program” appears under Classification Name – Area of Specialization. Highlight 390200000X - Student in an Organized Health Care Education/Training Program by clicking on it in the box then click Save.

Taxonomy Page2 - Internet Explorer
https://nppes.cms.hhs.gov/NPPES/AppPage6.pg1.do

File Edit View Favorites Tools Help

MODS Log-On NMCP Intranet - home GOES Web Views Logon Form Navy Federal Credit Union ... Google Genealogy, Family Trees & ...

NPPES
National Plan & Provider Enumeration System

Logoff Help

Application Sections

- > Provider Profile
- > Mailing Address
- > Practice Location
- > Other Identifiers
- > **Taxonomy**
- > Contact Person
- > Certification

NPI Application Form - Select Taxonomy Page 2

You have selected Provider Type: 39 Student, Health Care
Please Continue Your Taxonomy Selection:
Classification Name - Area of Specialization

390200000X - Student in an Organized Health Care Education/Training Program - ...

Please Enter Your State License Information For Your Taxonomy Selection:

NOTE: DO NOT report the Social Security Number (SSN), IRS Individual Taxpayer Identification Number (ITIN) in the License Number field.

License Number: _____ State Where Issued: _____

< Previous Save & Add Another Save

Note: Please use the Previous and Save buttons to navigate between the pages or save the application.

Start Internet Explorer ... 8:48 AM 12/7/2015

19. Check the radio box under Primary Taxonomy and click on Next.

NPI Application Form - Taxonomy / License Information

Please Enter Provider Taxonomy (Provider Type/Specialty): * At least one taxonomy is required

NOTE: DO NOT report the Social Security Number (SSN), IRS Individual Taxpayer Identification Number (ITIN) in the License Number field.

*Primary Taxonomy	*Selected Taxonomy	State	License Number	
<input checked="" type="radio"/>	390200000X - Student in an Organized Health Care Education/Training Program -			<input type="button" value="Delete"/>

Note: Please use the Previous and Next buttons to navigate between the pages in the application.

20. Contact person is whom all notifications will be sent to. Therefore, click on Same as Provider and Same as Mailing Phone. Enter your email and click Next.

The screenshot shows the NPPES application interface in Internet Explorer. The browser title is "Contact Person - Internet Explorer" and the address bar shows "https://nppes.cms.hhs.gov/NPPES/AppPage7.do". The page title is "NPI Application Form - Contact Person Information".

Application Sections:

- Provider Profile
- Mailing Address
- Practice Location
- Other Identifiers
- Taxonomy
- Contact Person**
- Certification

Contact Person Name:

If you would like to use the Provider as the contact person, click here Same As Provider

If you would like to designate an alternate contact person, please fill out the following:

Prefix: * First: Middle: * Last: Suffix:

Credential(s): Title:

Please Complete The Following Additional Information For The Contact Person:
To use the mailing phone or practice phone for the contact, click one of the following:
 Same As Mailing Phone Same As Practice Phone

* Contact Person Phone Number: Extension:
(Without Dashes)

* Contact Person E-mail: * Retype Contact Person E-mail:

NOTE: All notifications will be sent to the Contact Person E-mail provided on this page.

< Previous Next >

Note: Please use the Previous and Next buttons to navigate between the pages in the application.

The Windows taskbar at the bottom shows the Start button, Internet Explorer, and other applications. The system tray shows the time as 8:50 AM on 12/7/2015.

21. Check the “I Certify...” box and click Submit.

The screenshot shows a web browser window titled "Certification - Internet Explorer" with the URL <https://nppes.cms.hhs.gov/NPPES/AppPage7.do>. The page header includes the NPPES logo and the text "National Plan & Provider Enumeration System". A navigation menu on the left lists "Application Sections" with options like "Provider Profile", "Mailing Address", "Practice Location", "Other Identifiers", "Taxonomy", "Contact Person", and "Certification". The main content area is titled "NPI Application Form - Certification Statement" and contains a certification statement with a checkbox and several bullet points. Below the statement is a section titled "Penalties for Falsifying Information" with a paragraph of legal text. At the bottom of the form are "Previous" and "Submit" buttons. A note at the bottom of the page reads: "Note: Please use the Submit button to submit the application or the Previous button to navigate between pages in application." The Windows taskbar at the bottom shows the Start button, several application icons, and the system clock displaying 8:51 AM on 12/7/2015.

Application Sections

- > Provider Profile
- > Mailing Address
- > Practice Location
- > Other Identifiers
- > Taxonomy
- > Contact Person
- > **Certification**

NPI Application Form - Certification Statement

I certify that this form is being completed by, or on behalf of, a health care provider as defined at 45 CFR § 160.103.

- I have read the contents of the application and the information contained herein is true, correct and complete. If I become aware that any information in this application is not true, correct, or complete, I agree to notify the NPI Enumerator of this fact immediately.
- I authorize the NPI Enumerator to verify the information contained herein. I agree to keep the NPPES updated with any changes to data listed on this application form within 30 days of the effective date of the change.
- I have read and understand the [Privacy Act Statement](#).
- I have read and understand the **Penalties for Falsifying Information** on the NPI Application / Update Form as stated in this application. I am aware that falsifying information will result in fines and/or imprisonment.

Penalties for Falsifying Information

18 U.S.C. 1001 authorizes criminal penalties against an individual who in any matter within the jurisdiction of any department or agency of the United States knowingly or willfully falsifies, conceals, or covers up by any trick, scheme or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry. Individual offenders are subject to fines of up to \$250,000 and imprisonment for up to five years. Offenders that are organizations are subject to fines of up to \$500,000. 18 U.S.C. 3571(d) also authorizes fines of up to twice the gross gain derived by the offender if it is greater than the amount specifically authorized by the sentencing statute.

Note: Please use the Submit button to submit the application or the Previous button to navigate between pages in application.

Lastly, for future reference, when you have completed residency please update your taxonomy to “Allopathic and Osteopathic Physician.”