## **A2HC Provider Profile for Wellcare**

					AZITOTIOVIO	iei rioille ioi wellcare							
Provider Name: MANIDEEP INNAMURI													
NPI:9492792595					TIN:								
				Recrec	d Date 1	Recred Date Cycle 2							
07-20-2016				07-20-2019			07-20-2022						
Medical License:													
Education/Personal Information:													
SSN:	DOB:							Ethnic Origin:					
Gender:	Male	Male			Provider Languages:			English					
Provider Information:													
PCP or Specialist:		PCP	PCP Primary Speca		:	Allergy & Immunology			Secondary Specality:				
Board Certified:		NO	Certified In:										
Practice Information:													
Location 1: Phone/Fax:		Manideep,	Manideep, , Kandukur, Andhra Pradesh, India - 523105										
		+91-9492792595				+91-9492792595							
Office Hours:		D			D	D	D				D		
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		0			0	0	О				0		
		f			f	f	f				f		
		f			f	f					f		
Billing Information:													