

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  52P002	<b>(X3) Date Survey Completed</b>  03/24/2022
<b>Name of Provider or Supplier</b>  Versiti Wisconsin	<b>Street Address, City, State</b>  638 North 18th Street, Milwaukee, WI	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>  (Each deficiency should be preceded by full regulatory or LSC identifying information)
<b>E0000</b>	An unannounced, onsite Medicare recertification survey was conducted at Versiti Wisconsin, Inc. in Milwaukee, Wisconsin on March 21-24, 2022 by a Federal survey team. The supplier was found to be in substantial compliance with the requirements for participation in Medicare at 42 CFR Subpart 486.360 for Emergency Preparedness.