

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 52P002	(X3) Date Survey Completed 03/24/2022
Name of Provider or Supplier Versiti Wisconsin	Street Address, City, State 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.		

(X4) ID Prefix Tag	Summary Statement of Deficiencies (Each deficiency should be preceded by full regulatory or LSC identifying information)
Z0000	An unannounced recertification survey was conducted by a Federal survey team at Versiti Wisconsin, Inc. in Milwaukee, Wisconsin on March 21-24, 2022. The supplier was found to be in compliance with the requirements for participation in Medicare at 42 CFR 486, Subpart for Organ Procurement Organizations