

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D0952810	(X3) Date Survey Completed 06/14/2023
Name of Provider or Supplier Care Resource Community Health Centers Inc	Street Address, City, State 3510 Biscayne Blvd, Miami, FL	
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
D0000	An unannounced complaint survey, #2023008293, was conducted on 06/14/2023 at Care Resource Community Health Centers Inc. The facility was in compliance with the CLIA regulations surveyed at 42 CFR 493, Requirement for clinical laboratories.