Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D0662742	(X3) Date Survey Completed 02/07/2023
Name of Provider or Supplier Reproductive Biology Associates	**Street Address, City, State** 1100 Johnson Ferry Road Ne, Suite 200, Sandy Springs, GA	
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	Based on a CLIA recertification survey performed on February 7, 2023, this facility was found to be in compliance with all applicable CLIA requirements found at 42 CFR 493.1 through 42 CFR 493.1780.