

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 26D0679494	(X3) Date Survey Completed 01/22/2018
Name of Provider or Supplier Goppert-Trinity Family Care	Street Address, City, State 6675 Holmes Rd, Ste 360, Kansas City, MO	
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
No Tags	No deficiency details available.