

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 34D2104265	(X3) Date Survey Completed 06/01/2018
Name of Provider or Supplier Rapha Healthcare Services, Llc	Street Address, City, State 4411 Ben Franklin Boulevard, Durham, NC	
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.