

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D0232508	(X3) Date Survey Completed 01/10/2018
Name of Provider or Supplier Family Physicians Of Marion	Street Address, City, State 1020 Terrace Drive - Suite 200, Marion, VA	
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.