Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 06D0709238	(X3) Date Survey Completed 12/24/2025
Name of Provider or Supplier Commonspirit Emergency & Urgent Care	**Street Address, City, State** 555 S Park Ave, Plaza Ii, Breckenridge, CO	
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	The following deficiencies are a result of a desk review of proficiency testing scores obtained from the national database and verified with the proficiency testing provider. The facility was found to be out of compliance with the conditions of the CLIA program. The following condition level deficiencies were found to be out of compliance: 42 C.F.R. 493.803 Condition: Successful Participation [proficiency testing];
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on a routine desk review of the CMS-155 report for proficiency testing performance and review of proficiency testing evaluation reports from the proficiency

	testing provider, American Proficiency Institute (API), the laboratory failed to achieve satisfactory performance for Creatinine in two out of three consecutive testing events: event 1 in 2025 and Event 3 in 2025. See D2096.
D2096	ROUTINE CHEMISTRY CFR(s): 493.841(f) (f) Failure to achieve satisfactory performance for the same analyte or test in two consecutive testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a review of the CMS-155 Individual Laboratory Profile report for proficiency testing (PT) performance and a review of the proficiency testing evaluation report provided by the American Proficiency Institute (API), the laboratory failed to achieve satisfactory performance for Creatinine in two out of three consecutive testing events: event 1 in 2025 and Event 3 in 2025. Findings include: 1. A review of the CMS-155 Individual Laboratory Profile on 12/24/2025 at 11:30 AM, revealed the Creatinine proficiency testing score for event 1 in 2025 was 40%, and the score for event 3 in 2025 was 40%. 2. A review of the PT evaluation report from the provider, API, on 12/24/2025 at 12:00 PM revealed the Creatinine proficiency testing score for event 1 in 2025 was 40%, and the score for event 3 in 2025 was 40%.