

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D0978199	(X3) Date Survey Completed 09/15/2025
Name of Provider or Supplier Middle Georgia Pediatrics Llc	Street Address, City, State 1508 B Hardeman Avenue, Attn Michelle Kelly, Macon, 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	A proficiency testing desk review was completed on September 15, 2025. At the time of the review, the laboratory was not in compliance with the Clinical Laboratory Improvement Amendments of 1988, 42 CFR 493.1 through 42 CFR 493.1780. The following condition deficiencies were cited: D2016 - 42 CFR 493.803 Condition: Successful participation [proficiency testing] D6000 - 42 CFR 493.1403 Condition: moderate Complex Laboratory Director
D2016	<p>SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c)</p> <p>(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.</p> <p>This CONDITION is not met as evidenced by: Based on review of the Centers for Medicare and Medicaid Services (CMS) CASPER</p>

	<p>155 report and review of the laboratory 's American Proficiency Institute (API) proficiency testing (PT) reports, the laboratory failed to maintain satisfactory participation in PT in the specialty of Microbiology and the subspeciality of Bacteriology. Refer to: D 2028</p>
<p>D2028</p>	<p>BACTERIOLOGY CFR(s): 493.823(e)</p> <p>(e) Failure to achieve an overall testing event score of satisfactory performance for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance.</p> <p>This STANDARD is not met as evidenced by: Based on review of the Centers for Medicare and Medicaid Services (CMS) CASPER 155 report and review of the laboratory 's American Proficiency Institute (API) proficiency testing (PT)reports, the laboratory failed to maintain satisfactory participation in PT in the specialty of Microbiology subspeciality of Bacteriology, resulting in the initial unsuccessful performance for Bacteriology. Findings: 1. Desk review of the CMS CASPER 155 report revealed the laboratory failed bacteriology : -- 2024 Event 3 Score 60% -- 2025 Event 2 Score 0% 2. Desk review of the laboratory's proficiency testing reports from API confirms the laboratory failed the aforementioned testing on the above listed events resulting in the unsuccessful performances.</p>
<p>D6000</p>	<p>MODERATE COMPLEXITY LABORATORY DIRECTOR CFR(s): 493.1403</p> <p>The laboratory must have a director who meets the qualification requirements of 493.1405 of this subpart and provides overall management and direction in accordance with 493.1407 of this subpart.</p> <p>This CONDITION is not met as evidenced by: Based on review of the CMS CASPER 155 report and review of the laboratory 's API PT reports, the laboratory director failed to provide overall management and direction for proficiency testing to ensure successful participation in PT for the specialty of Microbiology and subspeciality of Bacteriology. Refer to D6016</p>
<p>D6016</p>	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(4)(i)</p> <p>(e)(4)(i) The proficiency testing samples are tested as required under Subpart H of this part;</p> <p>This STANDARD is not met as evidenced by: Based on review of the CMS CASPER Report 155 and the API PT evaluation reports, the laboratory director failed to ensure the proficiency testing samples are tested as required under Subpart H of this part. Findings: 1. Desk review of the CMS CASPER 155 report revealed the laboratory failed bacteriology: -- 2024 Event 3 Score 60% --</p>

2025 Event 2 Score 0% 2. Desk review of the laboratory's proficiency testing reports from API confirms the laboratory failed the aforementioned testing on the above listed events resulting in the unsuccessful performances.