

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  13D0927132	<b>(X3) Date Survey Completed</b>  08/25/2025
<b>Name of Provider or Supplier</b>  High Valley Dermatology	<b>Street Address, City, State</b>  2085 Providence Way, Idaho Falls, ID	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5209</b>	<p><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b> CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the Centers for Medicare and Medicaid Services (CMS) 209 personnel form, a lack of documentation and an interview with the laboratory lead on 8/25/2025, the laboratory failed to follow written procedures to assess testing personnel's training and competency for potassium hydroxide (KOH) examinations and the laboratory director failed to assess the competency of the technical supervisor (TS) in 2024 and 2025. The findings include: 1. A lack of training records identified two testing personnel listed on the CMS 209 hired since the last inspection on 5/31/2023 that failed to have documentation of initial training for KOH examinations. 2. A lack of competency assessment records identified two testing personnel listed on the CMS 209 hired since the last inspection on 5/31/2023 that failed to have documentation of a six month competency assessment for KOH examinations. 3. A lack of competency assessment records for the TS identified one of two TS listed on the CMS 209 failed to have an annual TS competency assessment for 2024 and 2025. 4. An interview with the laboratory lead on 8/25/2025 at 2:12 pm confirmed the above findings. 5. The laboratory reports performing 950 tests annually.</p>