

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  15D0678428	<b>(X3) Date Survey Completed</b>  04/09/2026
<b>Name of Provider or Supplier</b>  Iu Health Lab Services Landmark Pediatrics	<b>Street Address, City, State</b>  350 S Landmark Ave, Bloomington, IN	
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>D0000</b>	A proficiency testing desk review survey was completed on 4/09/2026. It was determined that the following condition-level deficiencies existed: D2016- 42 C.F.R. 493.803 Condition: Successful participation (proficiency testing)
<b>D2016</b>	<p><b>SUCCESSFUL PARTICIPATION</b> 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 a desk review of PT records from the CMS data system CASPER report 0155D, an email from the Technical Consultant (E1) on 04/08/2026, and CAP 2025 and 2026 PT reports, the laboratory failed to successfully participate in Hematology for Analyte, WBC Differential for 2025 PT event 2 and 2026 PT event 1. Refer to D2130 Legend: E-Employee CMS- Centers for Medicare and Medicaid Services</p>

CAP- College of American Pathologist PT- Proficiency testing PTDR- Proficiency testing desk review CASPER- Certification and Survey Provider Enhanced Reporting WBC- White Blood Count

**D2130**

**HEMATOLOGY**

CFR(s): 493.851(f)

(f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance.

This STANDARD is not met as evidenced by:

Based on the PTDR of the CASPER report 0155D from the CMS data system, an email from the Technical Consultant (E1) on 04/08/2026, and CAP 2025 and 2026 PT reports, the laboratory failed to successfully participate in Hematology for analyte, WBC (white blood cell) Differential for 2025 PT event 2 and 2026 PT event 1.

Findings include: 1) Review of CASPER report 0155D indicated the following unsuccessful scores for the analyte WBC Differential in the specialty of Hematology: a) Event 2/2025=0% b) Event 1/2026=0% 2) Email received on 04/08/2026 at 4:32 pm from E1, confirmed the failing scores for analyte, WBC Differential on the CAP PT results for Event 2 (FH16-B=0%) for 2025 and Event 1(FH9-A=0%) for 2026. 3) CAP PT records confirmed the scores of 0% for 2025 Event 2 (FH16-B) and 0% for 2026 Event 1 (FH9-A).