

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 15D2252781	(X3) Date Survey Completed 03/21/2022
Name of Provider or Supplier Covid Solutions Llc	Street Address, City, State 1841 N Coliseum Blvd, Fort Wayne, IN	
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
D1002	<p>REPORTING OF SARS-CoV-2 TEST RESULTS</p> <p>During the Public Health Emergency, as defined in 400.200 of this chapter, each laboratory that performs a test that is intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19 (hereinafter referred to as a "SARS-CoV-2 test") must report SARS-CoV-2 test results to the Secretary in such form and manner, and at such timing and frequency, as the Secretary may prescribe.</p> <p>This CONDITION is not met as evidenced by: Based on record review and interview the laboratory failed to report SARS-CoV-2 test results for 5 of 18 days reviewed from February 11 to February 28, 2022. Findings include: 1. In interview, on 3/18/2022 at 12:03 pm SP2, Operations Manager, indicated SARS-CoV-2 testing using the Indicaid Rapid Antigen tests occurred from February 11, 2022 to February 28, 2022 and 38 patients were tested during this time. 2. In email, on 3/18/2022 at 8:27 pm, ERC1, Indiana Epidemiology Resource Center contact, confirmed 27 results (25 negative and 2 positives) had been reported to the stated from 2/18/2022 to 2/28/2022. 3. Review of excel sheets labeled "ISDH_SARS_CoV_2_Data" indicated 11 patient's (PT 1-11) SARS-CoV-2 test results were not reported as required for 5 days in February. 4. 1 positive test and 10 negative tests were not reported as required during the period of review. 5. The laboratory performed 38 SARS-CoV-2 tests during the period of review.</p>