

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 32D0537331	(X3) Date Survey Completed 08/12/2025
Name of Provider or Supplier De Baca Family Practice Clinic	Street Address, City, State 546 N 10th St, Fort Sumner, NM	
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 August 12, 2025 for De Baca Family Practice Clinic. The facility was found to be out of compliance with the following condition level deficiencies: 42 C.F.R. 493.803 Condition: Successful Participation 42 C.F.R. 493.1403 Condition: Moderate Complexity 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 Certification and Survey Provider Enhanced Reporting (CASPER) Report 155 Individual Laboratory Profile, and API (American Proficiency Institute) proficiency testing records for 2024 and 2025 the laboratory failed to</p>

	<p>achieve satisfactory performance (80% or greater) in the specialty Endocrinology in the analyte Thyroid stimulating hormone (TSH) for two out of three testing events resulting in unsuccessful performance. Refer to 2107</p>
<p>D2107</p>	<p>ENDOCRINOLOGY CFR(s): 493.843(f)</p> <p>(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.</p> <p>This STANDARD is not met as evidenced by: Based on review of the Certification and Survey Provider Enhanced Reporting (CASPER) Report 155 Individual Laboratory Profile, and API (American Proficiency Institute) proficiency testing records for 2024 and 2025 the laboratory failed to achieve satisfactory performance (80% or greater) in the specialty Endocrinology in the analyte Thyroid stimulating hormone (TSH) for two out of three testing events resulting in unsuccessful performance. Findings included: 1. A review of the CASPER report 155 lists a score of 60% in the specialty endocrinology in analyte TSH for event 3 in 2024 and a score of 0 in the specialty Endocrinology for analyte TSH for event 2 in 2025. 2. A proficiency testing desk review of the API proficiency testing records for 2024 and 2025 confirmed that the laboratory received unsatisfactory scores in the specialty Endocrinology for analyte TSH for the 3rd event in 2024 and 2nd event in 2025.</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 Certification and Survey Provider Enhanced Reporting (CASPER) Report 155 Individual Laboratory Profile, and API (American Proficiency Institute) proficiency testing records the laboratory director failed to ensure successful participation in the specialty endocrinology in the analyte thyroid stimulating hormone (TSH) for two out of three testing events in 2024 and 2025. 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 Certification and Survey Provider Enhanced Reporting (CASPER) Report 155 Individual Laboratory Profile, and API (American Proficiency Institute) proficiency testing records the laboratory director failed to ensure successful participation in the specialty endocrinology in the analyte thyroid stimulating</p>

hormone (TSH) for two out of three testing events in 2024 and 2025. Findings included: 1. A review of the CASPER report 155 lists a score of 60% in the specialty endocrinology in analyte TSH for event 3 in 2024 and a score of 0 in the specialty Endocrinology for analyte TSH for event 2 in 2025. 2. A proficiency testing desk review of the API proficiency testing records for 2024 and 2025 confirmed that the laboratory received unsatisfactory scores in the specialty Endocrinology for analyte TSH for the 3rd event in 2024 and 2nd event in 2025.