

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 33D0132601	(X3) Date Survey Completed 03/22/2022
Name of Provider or Supplier Optum Medical Care Pc	Street Address, City, State 1111 Park Avenue, New York, NY	
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
D3037	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(4)</p> <p>Proficiency testing records. Retain all proficiency testing records for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on review of the American Proficiency Institute (API) Proficiency Testing (PT) records for calendar years 2019, 2020, 2021 and confirmed in an interview with the practice manger, the laboratory failed to retain the signed attestation forms for the hematology API PT challenges for the 2019, 2020 and 2021 events.</p>
D5211	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(a)</p> <p>The laboratory must review and evaluate the results obtained on proficiency testing performed as specified in subpart H of this part.</p> <p>This STANDARD is not met as evidenced by: Base on review of the 2019, 2020 and 2021 API PT summary reports and an interview with the practice manager the laboratory failed to review and evaluate the API hematology PT results. FINDINGS: 1. The API PT summary records did not include evidence of review and evaluation of the PT results for al 2nd event of 2019, 1st & 3rd events in 2020 and 1st & 2nd events of 2021. 2. The laboratory had scored 100% for all the events but did not sign the summary report as reviewed and evaluated.</p>