

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 45D2163744	<b>(X3) Date Survey Completed</b> 02/12/2021
<b>Name of Provider or Supplier</b> Houston Women's Reproductive Services	<b>Street Address, City, State</b> 5225 Katy Fwy, Suite 370, Houston, TX	
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>	Noted deficiencies and plans of correction were discussed with the laboratory representative(s) at the exit conference. The facility representative(s) were given an opportunity to provide evidence of compliance with the noted deficiencies, and no such evidence was provided prior to survey exit. The facility was found to be in compliance with applicable Conditions of Participation in the CLIA program, and recertification is recommended. Note: The CMS-2567 (Statement of Deficiencies) is an official, legal document. All information must remain unchanged except for entering the plan of correction, correction dates, and the signature space. Any discrepancy in the original deficiency citation(s) will be reported to the Dallas Regional Office (RO) for referral to the Office of the Inspector General (OIG) for possible fraud. If information is inadvertently changed by the provider/supplier, the State Survey Agency (SA) should be notified immediately.
<b>D6053</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least semiannually during the first year the individual tests patient specimens.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the laboratory's submitted CMS 209 forms, a review of the laboratory's personnel records for 2019 and 2020, and staff interview, it was revealed the laboratory failed to have documentation of the technical consultant performing competency assessments at least semiannually during the first year of testing for 3 of 4 testing personnel. Findings include: 1. A review of the laboratory's submitted CMS 209 forms (signed by the laboratory director on 2/8/21) revealed the laboratory identified 4 testing personnel performing moderate complexity testing. 2. A review of the laboratory's personnel records for 2019 and 2020 revealed the following testing personnel, their hire dates, and documentation of an initial competency assessment: a)</p>

Testing personnel #1 Hire date: 2/2019 Initial competency assessment: 3/2019 Based on the hire date, testing personnel #1 should have had at least 2 competency assessments performed prior to 2/2020. b) Testing personnel #2 Hire date: 8/2019 Initial competency assessment: 6/2020 Based on the hire date, testing personnel #2 should have had at least 2 competency assessments performed prior to 8/2020. c) Testing personnel #4 Hire date: 1/2019 Initial competency assessment: 3/2019 Based on the hire date, testing personnel #4 should have had at least 2 competency assessments performed prior to 1/2020. 3. The laboratory was asked to provide documentation of a second competency assessment being performed on the above testing personnel. No documentation was provided. 4. An interview with technical consultant #2 (as indicated on the CMS 209 form) on 2/12/21 at 10:00 a.m. in the office, after review of the records, confirmed the above findings.