Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D2122950	(X3) Date Survey Completed 12/20/2022
Name of Provider or Supplier Wellmont Medical Associates, Inc	**Street Address, City, State** 743 Island Road, Bristol, VA	
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	An announced CLIA Recertification survey was conducted at the Wellmont Medical Associates on 12/20/22 by the Virginia Department of Health's Office of Licensure and Certification. The laboratory was surveyed under 42 CFR part 493 CLIA Requirements. Specific deficiencies cited are as follows: The laboratory is performing COVID-19 testing and is in compliance with the applicable COVID-19 reporting requirements.
D6053	TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9) 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. This STANDARD is not met as evidenced by: Based on the review of Laboratory Personnel Report Form (CLIA) (CMS-209 Form), testing personnel (TP) records, lack of documentation, and interview, the technical consultant (TC) failed to perform and document the semi-annual competency assessment for one of one new TP. Dates of record review include 02/01/21 up to the date of survey on 12/20/22. Findings include: 1. Review of the CMS-209 form revealed that TP A was trained and performing patient testing as of 04/22/21. See attached TP code sheet. 2. Review of TP A records revealed a lack of documentation of a semi-annual competency assessment by the TC. 3. An exit interview with the TC on 12/20/22 at approximately 14:15 PM confirmed the findings.