

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 52D0665546	(X3) Date Survey Completed 09/10/2019
Name of Provider or Supplier Prohealth Medical Group, Inc -	Street Address, City, State 210 Nw Barstow St Suite 201, Waukesha, WI	
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
D2007	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the CMS (Centers for Medicare and Medicaid Services) Form 209 Laboratory Personnel Report (CLIA) and proficiency testing records and interview with the technical consultant, thirty-two providers that routinely perform provider performed microscopy testing have not tested the proficiency samples with their regular patient workload. Findings include: 1. Review of the CMS Form 209 showed thirty-three individuals identified as testing personnel. 2. Review of proficiency testing records showed the technical consultant, who is also a testing personnel, performed all provider performed microscopy proficiency challenges in 2018 and 2019. 3. Interview with the technical consultant on September 10, 2019 at 10:30 AM confirmed thirty-three testing personnel perform microscopy testing on patient samples. Further interview confirmed the laboratory has not ensured testing personnel other than the technical consultant performed and submitted the proficiency testing challenges with their regular patient workload.</p>
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p>

This STANDARD is not met as evidenced by:

Based on surveyor review of laboratory procedures and interview with the technical consultant, the laboratory has not established written policies and procedures to assess testing personnel and technical consultant competency. Findings include: 1. Review of laboratory procedures showed no evidence of a written procedure for the evaluation of testing personnel and technical consultant competency. 2. Interview with the technical consultant on September 10, 2019 at 10:00 AM confirmed the laboratory did not have a procedure for evaluation of testing personnel competency that includes evaluation of providers performing microscopy testing, laboratory testing personnel performing moderate complexity testing, and the technical consultant.