CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF PROVIDER-PERFORMED MICROSCOPY PROCEDURES

LABORATORY NAME AND ADDRESS

UNIVERSITY OF COLORADO HOSPITAL INTERNAL MEDICINE AND SPECIALITY CARE 8111 E LOWRY BLVD STE 120 DENVER, CO 80230

EFFECTIVE DATE

CLIA ID NUMBER

11/01/2025

06D0937657

LABORATORY DIRECTOR

GREGARY T. BOCSI

EXPIRATION DATE

10/31/2027

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

CENTERS FOR MEDICARE & MEDICAD SERVICES

Gregg Brandush, Director

Division of Clinical Laboratory Improvement & Quality Quality & Safety Oversight Group

Quality & Safety Oversight Group Center for Clinical Standards and Quality

If this is a Certificate for Provider-Performed Microscopy Procedures, it certifies the laboratory to perform only those laboratory procedures that have been specified as provider-performed microscopy procedures and, if applicable, examination or procedures that have been approved as waived tests by the Department of Health and Human Services.