## CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

## CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS PARKVIEW BEHAVIORAL HEALTH 1720 BEACON ST FORT WAYNE, IN 46805 CLIA ID NUMBER 15D0983604

EFFECTIVE DATE 02/27/2025

EXPIRATION DATE 02/26/2027

LABORATORY DIRECTOR
XIAOYING T. WAN

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.

She

Gregg Brandush, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality



If this is a Certificate of Waiver, it certifies the laboratory to perform only examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.