



Remittance 11514-4

Posted Date 07/27/2023
Account
Lockbox/Client ID/Lockbox Number 7511 -
HEALTHTRACKRX OF GEORGIA LLC 631622

Applied Amount \$0.00
Transaction ID 2

Remittance Detail

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS
CERTIFICATE OF ACCREDITATION
LABORATORY NAME AND ADDRESS
HEALTHTRACKRX OF GEORGIA, LLC
375 FRANKLIN GATEWAY, SUITE 440
MARIETTA, GA 30067
LABORATORY DIRECTOR
SHALINI A MURALIDHAR Ph.D.
CLIA ID NUMBER
11D2246220
EFFECTIVE DATE
08/31/2022
EXPIRATION DATE
08/30/2024
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.
CMS
Monique Spruill, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality

276 Certs_071123

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

Table with 4 columns: LAB CERTIFICATION (CODE), EFFECTIVE DATE, LAB CERTIFICATION (CODE), EFFECTIVE DATE. Rows include BACTERIOLOGY (110), MYCOLOGY (120), PARASITOLOGY (130), and VIROLOGY (140) with effective dates of 08/31/2022.



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER. PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

CLIA ID Number: 11D2246220
HEALTHTRACKRX OF GEORGIA, LLC
1500 INTERSTATE 35 W
ATTN REBECCA COLE
DENTON, TX 76207

STATE AGENCY ADDRESS AND PHONE NUMBER:
GA DHR/HEALTHCARE FACILITY REGULATION DIV
DIAGNOSTIC SERVICE UNIT/CLIA
2 PEACHTREE ST NW 31-447
ATLANTA, GA 30303-3142
(404)657-5447

LABORATORY MAILING ADDRESS: