



# BlueCross BlueShield of South Carolina and BlueChoice® HealthPlan of South Carolina

## Clinical Laboratory Improvement Amendment Certification Verification Form

The Centers for Medicare & Medicaid Services (CMS) regulates all laboratory testing (except research) performed on humans in the U.S. through the Clinical Laboratory Improvement Amendments (CLIA). The objective of the CLIA program is to ensure quality laboratory testing. All clinical laboratories must be properly certified to receive Medicare or Medicaid payments.

Email the completed form and [required documents](#) to Provider.Blue.Enroll@bcssc.com or fax 803-870-8919.

Date: \_\_\_\_\_

Name of Physician/Facility: \_\_\_\_\_

Does Provider/Facility Bill for Laboratory Services In Office?

N/A Applies to only to: (DME, PT, ST, OT, NP, SLP and Dietitian)

Yes  No  N/A

Do you have current CLIA Certification?

N/A Applies to only to: (DME, PT, ST, OT, NP, SLP and Dietitians)

Yes  No  N/A

CLIA Certification Number: \_\_\_\_\_ **Very**

**Important - Attach a legible copy of CLIA certificate**

Contact Person at Applicant's Office: Contact \_\_\_\_\_

Person's Title: \_\_\_\_\_ **Date:** \_\_\_\_\_

### This Section to be Completed by Credentialing Staff

Employee's Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

BlueCross BlueShield of South Carolina and BlueChoice HealthPlan are independent licensees of the Blue Cross and Blue Shield Association