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State of California—Health and Human Services Agency
California Department of Public Health



EDMUND G. BROWN JR.
Governor

California Department of Public Health (CDPH)
Environmental Health Laboratory Branch (EHLB)

**APPROVAL INSTRUCTIONS FOR ENROLLMENT IN THE
CALIFORNIA BLOOD LEAD PROFICIENCY ASSURANCE PROGRAM (CBLPAP)**

To qualify for reimbursement by the Child Health and Disability Prevention (CHDP) program for the analytical portion of blood lead level testing, the following documentation must be submitted to EHLB:

- I. A completed “Application for Participation in the California Blood Lead Proficiency Assurance Program”.
- II. A copy of the laboratory’s most recent *5-specimen* blood lead proficiency testing (PT) evaluation report from a proficiency testing provider approved by the Centers for Medicare & Medicaid Services (CMS).
- III. Copies of the Clinical Laboratory Improvement Amendments (CLIA) Certificate and the State of California Laboratory License or Laboratory Registration for the laboratory.
- IV. A letter of attestation signed by the Laboratory Director. This letter must include the complete laboratory or practice name, address, and Laboratory Director name. This letter will serve as a written statement to the effect that the Laboratory Director attests that:
 - a. the copy of PT results provided to CBLPAP is an exact replica of that provided to your laboratory by said CMS-approved PT provider.
 - b. the PT analyses were performed in your laboratory using the same instrumentation, analytical method, and staff used in blood lead testing of CHDP patients.
 - c. any and all deviations from Quality Control (QC)/Quality Assurance (QA) criteria which document the quality of laboratory performance as established by CLIA, and which may be brought to your laboratory's attention through information such as that provided by these PT results, are being and will be addressed immediately by your laboratory so as to assure favorable patient outcome.

- d. your laboratory is in full compliance with CLIA requirements appropriate to the test system used for blood lead testing, and with the California Health and Safety Code and the California Business and Professions Code.

Once we receive the required documentation, we will evaluate your submission for enrollment in our program. Please note your laboratory must be a CHDP provider in order to receive reimbursement by CHDP. The complete package may be mailed to the address below or faxed to (916) 440-5853.

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If you have any questions about CBLPAP enrollment, please contact Josephine Alvaran at (510) 620-2892 or Josephine.Alvaran@cdph.ca.gov.