

CENTERS FOR MEDICARE & MEDICAID SERVICES  
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS  
*CERTIFICATE OF ACCREDITATION*

LABORATORY NAME AND ADDRESS  
PROGENITY INC  
5230 SOUTH STATE ROAD  
ANN ARBOR, MI 48108

CLIA ID NUMBER  
23D2018899

EFFECTIVE DATE  
10/12/2019

LABORATORY DIRECTOR  
JOHN P TAZELAAR M.D.

EXPIRATION DATE  
10/11/2021

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.



A handwritten signature in black ink that reads "Karen W. Dyer". The signature is written in a cursive style.

Karen W. Dyer, Director  
Division of Laboratory Services  
Survey and Certification Group  
Center for Clinical Standards and Quality