§ 170.557 Authorized certification methods.
An ONC–ACB must provide remote certification for both development and deployment sites.

§ 170.560 Good standing as an ONC–ACB.
An ONC–ACB must maintain good standing by:
(a) Adhering to the Principles of Proper Conduct for ONC–ACBs;
(b) Refraining from engaging in other types of inappropriate behavior, including an ONC–ACB misrepresenting the scope of its authorization, as well as an ONC–ACB certifying Complete EHRs and/or EHR Module(s) for which it does not have authorization; and
(c) Following all other applicable Federal and State laws.

§ 170.565 Revocation of ONC–ACB status.
(a) Type-1 violations. The National Coordinator may revoke an ONC–ACB’s status for committing a Type-1 violation. Type-1 violations include violations of law or ONC HIT Certification Program policies that threaten or significantly undermine the integrity of the ONC HIT Certification Program. These violations include, but are not limited to: False, fraudulent, or abusive activities that affect the ONC HIT Certification Program, a program administered by HHS or any program administered by the Federal government.
(b) Type-2 violations. The National Coordinator may revoke an ONC–ACB’s status for failing to timely or adequately correct a Type-2 violation. Type-2 violations constitute noncompliance with §170.560.
1) Noncompliance notification. If the National Coordinator obtains reliable evidence that an ONC–ACB may no longer be in compliance with §170.560, the National Coordinator will issue a noncompliance notification with reasons for the notification to the ONC–ACB requesting that the ONC–ACB respond to the alleged violation and correct the violation, if applicable.
2) Opportunity to become compliant. After receipt of a noncompliance notification, an ONC–ACB is permitted up to 30 days to submit a written response and accompanying documentation that demonstrates that no violation occurred or that the alleged violation has been corrected.
(i) If the ONC–ACB submits a response, the National Coordinator is permitted up to 30 days from the time the response is received to evaluate the response and reach a decision. The National Coordinator may, if necessary, request additional information from the ONC–ACB during this time period.
(ii) If the National Coordinator determines that no violation occurred or that the violation has been sufficiently corrected, the National Coordinator will issue a memo to the ONC–ACB confirming this determination.
(iii) If the National Coordinator determines that the ONC–ACB failed to demonstrate that no violation occurred or to correct the area(s) of noncompliance identified under paragraph (b)(1) of this section within 30 days of receipt of the noncompliance notification, then the National Coordinator may propose to revoke the ONC–ACB’s status.
(c) Proposed revocation. (1) The National Coordinator may propose to revoke an ONC–ACB’s status if the National Coordinator has reliable evidence that the ONC–ACB has committed a Type-1 violation; or
(2) The National Coordinator may propose to revoke an ONC–ACB’s status if, after the ONC–ACB has been notified of a Type-2 violation, the ONC–ACB fails to:
(i) To rebut the finding of a violation with sufficient evidence showing that the violation did not occur or that the violation has been corrected; or
(ii) Submit to the National Coordinator a written response to the noncompliance notification within the specified timeframe under paragraph (b)(2) of this section.
(d) Suspension of an ONC–ACB’s operations. (1) The National Coordinator may suspend the operations of an ONC–ACB under the ONC HIT Certification Program based on reliable evidence indicating that:
(i) The ONC–ACB committed a Type-1 or Type-2 violation; and
(ii) The continued certification of Complete EHRs, EHR Module(s), and/or other types of HIT by the ONC–ACB