§ 493.563 Validation inspections—Basis and focus.

- (a) Basis for validation inspection—(1) Laboratory with a certificate of accreditation. (i) CMS or a CMS agent may conduct an inspection of an accredited laboratory that has been issued a certificate of accreditation on a representative sample basis or in response to a substantial allegation of noncompliance.
- (ii) CMS uses the results of these inspections to validate the accreditation organization's accreditation process.
- (2) Laboratory in a State with an approved State licensure program. (i) CMS or a CMS agent may conduct an inspection of any laboratory in a State with an approved State licensure program on a representative sample basis or in response to a substantial allegation of noncompliance.
- (ii) The results of these inspections are used to validate the appropriateness of the exemption of that State's licensed or approved laboratories from CLIA program requirements.
- (b) Validation inspection conducted on a representative sample basis. (1) If CMS or a CMS agent conducts a validation inspection on a representative sample basis, the inspection is comprehensive, addressing all condition-level requirements, or it may be focused on a specific condition-level requirement.
- (2) The number of laboratories sampled is sufficient to allow a reasonable estimate of the performance of the accreditation organization or State.
- (c) Validation inspection conducted in response to a substantial allegation of noncompliance. (1) If CMS or a CMS agent conducts a validation inspection in response to a substantial allegation of noncompliance, the inspection focuses on any condition-level requirement that CMS determines to be related to the allegation.
- (2) If CMS or a CMS agent substantiates a deficiency and determines that the laboratory is out of compliance with any condition-level requirement, CMS or a CMS agent conducts a full CLIA inspection.
- (d) Inspection of operations and offices. As part of the validation review process, CMS may conduct an onsite inspection of the operations and offices to verify the following:

- (1) The accreditation organization's representations and to assess the accreditation organization's compliance with its own policies and procedures.
- (2) The State's representations and to assess the State's compliance with its own policies and procedures, including verification of State enforcement actions taken on the basis of validation inspections performed by CMS or a CMS agent.
- (e) Onsite inspection of an accreditation organization. An onsite inspection of an accreditation organization may include, but is not limited to, the following:
 - (1) A review of documents.
- (2) An audit of meetings concerning the accreditation process.
- (3) Evaluation of accreditation inspection results and the accreditation decision-making process.
- (4) Interviews with the accreditation organization's staff.
- (f) Onsite inspection of a State licensure program. An onsite inspection of a State licensure program office may include, but is not limited to, the following:
- (1) A review of documents.
- (2) An audit of meetings concerning the licensure or approval process.
- (3) Evaluation of State inspection results and the licensure or approval decision-making process.
 - (4) Interviews with State employees.

§ 493.565 Selection for validation inspection—laboratory responsibilities.

- A laboratory selected for a validation inspection must do the following:
- (a) Authorize its accreditation organization or State licensure program, as applicable, to release to CMS or a CMS agent, on a confidential basis, a copy of the laboratory's most recent full, and any subsequent partial inspection.
- (b) Authorize CMS or a CMS agent to conduct a validation inspection.
- (c) Provide CMS or a CMS agent with access to all facilities, equipment, materials, records, and information that CMS or a CMS agent determines have a bearing on whether the laboratory is being operated in accordance with the requirements of this part, and permit CMS or a CMS agent to copy material

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or require the laboratory to submit material.

(d) If the laboratory possesses a valid certificate of accreditation, authorize CMS or a CMS agent to monitor the correction of any deficiencies found through the validation inspection.

§ 493.567 Refusal to cooperate with validation inspection.

- (a) Laboratory with a certificate of accreditation. (1) A laboratory with a certificate of accreditation that refuses to cooperate with a validation inspection by failing to comply with the requirements in § 493.565—
- (i) Is subject to full review by CMS or a CMS agent, in accordance with this part; and
- (ii) May be subject to suspension, revocation, or limitation of its certificate of accreditation under this part.
- (2) A laboratory with a certificate of accreditation is again deemed to meet the condition-level requirements by virtue of its accreditation when the following conditions exist:
- (i) The laboratory withdraws any prior refusal to authorize its accreditation organization to release a copy of the laboratory's current accreditation inspection, PT results, or notification of any adverse actions resulting from PT failure.
- (ii) The laboratory withdraws any prior refusal to allow a validation inspection.
- (iii) CMS finds that the laboratory meets all the condition-level requirements
- (b) CLIA-exempt laboratory. If a CLIA-exempt laboratory fails to comply with the requirements specified in §493.565, CMS notifies the State of the laboratory's failure to meet the requirements.

§ 493.569 Consequences of a finding of noncompliance as a result of a validation inspection.

- (a) Laboratory with a certificate of accreditation. If a validation inspection results in a finding that the accredited laboratory is out of compliance with one or more condition-level requirements, the laboratory is subject to—
- (1) The same requirements and survey and enforcement processes applied to laboratories that are not accredited

and that are found out of compliance following an inspection under this part; and

- (2) Full review by CMS, in accordance with this part; that is, the laboratory is subject to the principal and alternative sanctions in §493.1806.
- (b) CLIA-exempt laboratory. If a validation inspection results in a finding that a CLIA-exempt laboratory is out of compliance with one or more condition-level requirements, CMS directs the State to take appropriate enforcement action.

§ 493.571 Disclosure of accreditation, State and CMS validation inspection results.

- (a) Accreditation organization inspection results. CMS may disclose accreditation organization inspection results to the public only if the results are related to an enforcement action taken by the Secretary.
- (b) State inspection results. Disclosure of State inspection results is the responsibility of the approved State licensure program, in accordance with State law
- (c) CMS validation inspection results. CMS may disclose the results of all validation inspections conducted by CMS or its agent.

§ 493.573 Continuing Federal oversight of private nonprofit accreditation organizations and approved State licensure programs.

- (a) Comparability review. In addition to the initial review for determining equivalency of specified organization or State requirements to the comparable condition-level requirements, CMS reviews the equivalency of requirements in the following cases:
- (1) When CMS promulgates new condition-level requirements.
- (2) When CMS identifies an accreditation organization or a State licensure program whose requirements are no longer equal to, or more stringent than, condition-level requirements.
- (3) When an accreditation organization or State licensure program adopts new requirements.
- (4) When an accreditation organization or State licensure program adopts changes to its inspection process, as required by §493.575(b)(1), as applicable.