

135C.40 Citations when violations found — penalties — exception.

1. If the director determines, based on the findings of an inspection or investigation of a health care facility, that the facility is in violation of [this chapter](#) or rules adopted under [this chapter](#), the director within five working days after making the determination, may issue a written citation to the facility. The citation shall be served upon the facility personally, by electronic mail, or by certified mail, except that a citation for a class III violation may be sent by ordinary mail. Each citation shall specifically describe the nature of the violation, identifying the Code section or subsection or the rule or standard violated, and the classification of the violation under [section 135C.36](#). Where appropriate, the citation shall also state the period of time allowed for correction of the violation, which shall in each case be the shortest period of time the department deems feasible. Failure to correct a violation within the time specified, unless the licensee shows that the failure was due to circumstances beyond the licensee's control, shall subject the facility to a further penalty of fifty dollars for each day that the violation continues after the time specified for correction.

a. If a facility licensed under [this chapter](#) is subject to or will be subject to denial of payment including payment for Medicare or medical assistance under [chapter 249A](#), or denial of payment for all new admissions pursuant to [42 C.F.R. §488.417](#), and submits a plan of correction relating to a statement of deficiencies or a response to a citation issued under rules adopted by the department and the department elects to conduct an on-site revisit inspection, the department shall commence the revisit inspection within the shortest time feasible of the date that the plan of correction is received, or the date specified within the plan of correction alleging compliance, whichever is later.

b. If the department recommends the issuance of federal remedies pursuant to [42 C.F.R. §488.406\(a\)\(2\)](#) or [\(a\)\(3\)](#), relating to an inspection conducted by the department, the department shall issue the statement of deficiencies within twenty-four hours of the date that the centers for Medicare and Medicaid services of the United States department of health and human services was notified of the recommendation for the imposition of remedies.

c. The facility shall be provided an exit interview at the conclusion of an inspection and the facility representative shall be informed of all issues and areas of concern related to the deficient practices. The department may conduct the exit interview either in person or by telephone, and a second exit interview shall be provided if any additional issues or areas of concern are identified. The facility shall be provided two working days from the date of the exit interview to submit additional or rebuttal information to the department.

d. (1) The department shall establish and maintain a process to review each citation issued for immediate jeopardy or substandard quality of care prior to issuance of final findings under [section 135C.40A](#). Representatives of the nursing facility issued such a citation may participate in the review to provide context and evidence for the department to consider in determining if a final finding of immediate jeopardy or substandard quality of care should be issued. The review shall ensure consistent and accurate application of federal and state inspection protocols and defined regulatory standards.

(2) For the purposes of this paragraph:

(a) *“Immediate jeopardy”* means a situation in which the provider's noncompliance with one or more requirements of participation has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident.

(b) *“Likely”* means probable and reasonably to be expected, and suggests a greater degree of probability than a mere risk, potential, or possibility that a particular event will cause serious injury, harm, impairment, or death to a resident.

(c) *“Substandard quality of care”* means the same as defined in [42 C.F.R. §488.301](#).

2. When a citation is served upon or mailed to a health care facility under [subsection 1](#) and the licensee of the facility is not actually involved in the daily operation of the facility, a copy of the citation shall be mailed to the licensee. If the licensee is a corporation, a copy of the citation shall be sent to the corporation's office of record. If the citation was issued pursuant to an inspection resulting from a complaint filed under [section 135C.37](#), a copy of the citation shall be sent to the complainant at the earliest time permitted by [section 135C.19, subsection 1](#).

3. No health care facility shall be cited for any violation caused by any practitioner licensed pursuant to [chapter 148](#) if that practitioner is not the licensee of and is not otherwise financially interested in the facility and the licensee or the facility presents evidence that reasonable care and diligence have been exercised in notifying the practitioner of the practitioner's duty to the patients in the facility.

[C77, 79, 81, §135C.40; [81 Acts, ch 61, §1](#)]

[84 Acts, ch 1227, §4](#); [2008 Acts, ch 1088, §89](#); [2009 Acts, ch 156, §5](#); [2024 Acts, ch 1157, §71](#)

Referred to in [§135C.19](#), [135C.36](#), [135C.41](#), [135C.46](#)

Subsection 1, NEW paragraph d