

CMS Proposed Rule §482.41

CMS: 2012 Life Safety Code Adoption

Important Dates

- Publication of the proposed rule: April 16, 2014
- Comments due: June 16, 2014

www.regulations.gov

Search: “Fire Safety”

Comment Now!



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www.regulations.gov

The screenshot shows the regulations.gov website interface. At the top left is the logo "regulations.gov" with the tagline "Your Voice in Federal Decision-Making". To the right are navigation links: Home, Help, Resources, and Feedback and Questions. A search bar contains the text "fire safety" and a magnifying glass icon. Below the search bar is a search results section titled "Search Results".

On the left side of the search results, there are filters:

- Filter Results By...**
- Comment Period** (with an information icon):
 - Open (55)
 - Closed (12,387)
- Document Type** (with an information icon):
 - Clear Filter
 - Notice
 - Proposed Rule
 - Rule
 - Supporting & Related Material (13,418)
 - Other
 - Public Submission (18,195)
- Posted** (with an information icon):
 - Search All (with a dropdown arrow)
- Comments Due** (with an information icon)

The main search results area shows a list of items with the following details:

- Results per page:** 25 (dropdown)
- Sort By:** Best Match (dropdown)
- Medicare and Medicaid Programs: Fire Safety Requirements for Certain Health Care Facilities**
 - Document Contents : ...CFR Parts 403, 416, 418, et al. Medicare and Medicaid Programs; **Fire Safety** Requirements for Certain Health Care Facilities; Proposed Rule & Medicaid Services 42 CFR...
 - Proposed Rule by CMS on 04/16/2014 ID: CMS-2014-0058-0001
 - Buttons: **Comment Now!** (Due Jun 16, 2014 11:59 PM ET), **Open Docket Folder** (RIN: Not Assigned)
- NPRM: Safety Zones: Arts Project Cherry Grove Pride Week Fireworks Display, Great South Bay, Cherry Grove, Fire Island, NY (Federal Register Publication)**
 - Document Contents : ...0180] RIN 1625-AA00 **Safety** Zone; Arts Project Cherry Grove Pride Week Fireworks Display, Great South Bay; Cherry Grove, **Fire** Island, NY AGENCY: Coast Guard...
 - Proposed Rule by USCG on 04/25/2014 ID: USCG-2014-0180-0001
 - Buttons: **Comment Now!** (Comment Period Closed May 27, 2014 11:59 PM ET), **Open Docket Folder** (RIN: Not Assigned)
- Fire Protection in Shipyard Employment Standard; Extension of the Office of Management and Budget's (OMB) Approval of Information Collection (Paperwork) Requirements**
 - Document Contents : ...No: 2014-10045] ===== DEPARTMENT OF LABOR Occupational **Safety** and Health Administration [Docket No. OSHA-2010-0010] **Fire** Protection in Shipyard Employment Standard; Extension of the...
 - Notice by OSHA on 05/02/2014 ID: OSHA-2011-0010-0004
 - Buttons: **Comment Now!** (Due Jul 01, 2014 11:59 PM ET), **Open Docket Folder**
- Passenger Train Exterior Side Door Safety**
 - Document Contents : ...Publi/RR Industry 4 comments..... 1 hour..... 4 hours. 238.103-**Fire Safety**-Procuring 2 new railroads... 2 analyses..... 150 hours..... 300 hours. New Pass...
 - Buttons: **Comment Now!** (Due May 27, 2014 11:59 PM ET)



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Review Rule and Comments

The screenshot shows the regulations.gov website interface. At the top, there is a navigation bar with links for Home, Help, Resources, and Feedback and Questions. A search bar contains the text "fire safety" and a magnifying glass icon. Below the navigation bar, the main heading reads "PR Medicare and Medicaid Programs: Fire Safety Requirements for Certain Health Care Facilities".

The main content area includes the following sections:

- Action:** Proposed rule.
- Summary:** This proposed rule would amend the fire safety standards for Medicare and Medicaid participating hospitals, critical access hospitals (CAHs), long-term care facilities, intermediate care facilities for individuals with intellectual disabilities (ICF-IID), ambulatory surgery centers (ASCs), hospices which provide inpatient services, religious non-medical health care institutions (RNHCs), and programs of all-inclusive care for the elderly (PACE) facilities. Further, this proposed rule would adopt the 2012 edition of the Life Safety Code (LSC) and eliminate references in our regulations to all earlier editions. It would also adopt the 2012 edition of the Health Care Facilities Code, with some exceptions. We are providing the LSC citation, a description of the 2012 requirement, and an explanation of its benefits for health care facilities, patients, staff, and visitors over the 2000 version in each occupancy section.
- Dates:** To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on June 16, 2014.
- Addresses:** In commenting, please refer to file code CMS-3277-P. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission. You may submit comments in one of four ways (please choose only one of the ways listed):
 - Electronically:** You may submit electronic comments on this regulation to <http://www.regulations.gov>. Follow the "Submit a comment" instructions.
 - By regular mail:** You may mail written comments to the following address only: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-3277-P, P.O. Box 8010, Baltimore, MD 21244-8010.Please allow sufficient time for mailed comments to be received before the close of the comment period.
 - By express or overnight mail:** You may send written comments to the following address only: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-3277-P, Mail Stop 012802, 7500 Country Boulevard, Baltimore, MD 21244-1028.

On the right side of the page, there is a "Comment Now!" button with a deadline of "Due Jun 16 2014, at 11:59 PM ET". Below this, a box displays the rule ID: "ID: CMS-2014-0058-0001". There is a link to "View original printed format" with a PDF icon. Social media sharing options for Twitter, Facebook, and Email are also present.

Below the sharing options is the "Document Information" section, which includes:

- Date Posted:** Apr 16, 2014
- RIN:** Not Assigned
- CFR:** 42 CFR Parts 403, 410, 418, 460, 482, 483, 485
- Federal Register Number:** 2014-08802

A link to "Show More Details" is provided.

At the bottom of the right sidebar, there is a "Comments" section showing "15 Comments Received*".



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“Comment Now”

regulations.gov
Your Voice in Federal Decision-Making

fire safety

You are commenting on:

The Centers for Medicare Medicaid Services (CMS) Proposed Rule: Medicare and Medicaid Programs: Fire Safety Requirements for Certain Health Care Facilities

For related information, Open Docket Folder

Your Information

Information entered will be viewable on Regulations.gov

View Commenters Checklist (PDF) | Alternate Ways to Comment

Comment (Required)

6000 characters remaining

Upload file(s) (Optional)

Choose file

First Name

Last Name

Contact Information

City

State or Province (Required)

ZIP/Postal Code (Required)

Country (Required)

United States

Email Address



Support 2012 Adoption

- On the whole, ASHE supports the adoption of current codes. The new codes:
 - Incorporate lessons learned
 - Reduce conflicts
 - Are consistent with other codes
 - Recognize changes in health care delivery
 - Provide greater flexibility
 - Incorporate categorical waivers



Support 2012 Adoption



**Coalition for
Current Safety Codes**



<http://www.coalition4safety.org/>



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Support 2012 Adoption

ASHE Strategic Imperative - Unified Codes

While regulations are a critical part of keeping patients, staff, and visitors safe, current codes and standards still have much room for improvement.

ASHE is working to improve outdated codes, conflicting codes, codes not based on science, and inappropriate code interpretations.



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Why do we use consensus codes?

OMB Circular A-119 (1998) intended to:

- Encourage federal agencies to benefit from the expertise of the private sector
- Promote federal agency participation in such bodies to ensure creation of standards that federal agencies can use
- Reduce reliance on government-unique standards where an existing voluntary standard would suffice



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Overview

PROPOSED RULE

The screenshot shows the Federal Register website interface. At the top, there is a navigation bar with links for 'Home', 'Browse', 'Search', 'Policy', 'Learn', 'Log In', and 'My FR'. The main header features the Federal Register logo and the text 'FEDERAL REGISTER - The Daily Journal of the United States Government'. A blue banner highlights 'Proposed Rule'. The main content area displays the title 'Medicare and Medicaid Programs; Fire Safety Requirements for Certain Health Care Facilities' and identifies it as a proposed rule by the Centers for Medicare & Medicaid Services, dated 04/16/2014. A green button labeled 'SUBMIT A FORMAL COMMENT' is visible, along with a note that 'Comments on this document are being accepted at Regulations.gov'. Navigation links for 'Previous Document' and 'Next Document' are also present.



Adoption, change in definition

§482.41 (b)(2)(i)

- Changes definition of “health care occupancy” from applying to “4 or more patients” to “regardless of the number of patients served”
- Could apply to hospital outpatient depts.
 - Based on billing of hospital-based provider services in outpatient buildings
 - Do your buildings comply with “health care occupancy” requirements?



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Roller Latches

§482.41 (b)(2)(ii)

- Does not allow the exception in the LSC that permits use of roller latches
- CMS standards have permitted use of roller latches for more than 20 years
- Roller latches have become common in behavioral health



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Alcohol Based Hand Rubs

§482.41 (b)(7)

- 2012 LSC allows ABHRs
- Accepts 2012 LSC requirements but adds “if installed to prohibit inappropriate access”
 - Interpretive guidance is needed to determine what this means.



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Sprinkler 4-hour rule

§482.41 (b)(8)

- NFPA 25 formerly required evacuation or fire watch of facilities if a sprinkler system was out of service for more than 4 hours in a 24-hour period.
- This has been changed in NFPA 25 to 10 hours to accommodate a “work day.”
- CMS proposes going back to the 4-hour period.



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OR Smoke Vents

§482.41 (b)(9)

- Required when flammable anesthetics were used
- Removed as operating room ACH increased, sprinkler requirements were added, severity of fire risk and extent decreased
- ECRI data suggests 250 fires annually
 - Surgical fires are extremely rare: .00092%
 - Potential cost nationwide: ?



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36" Sill Height

§482.41 (b)(10)

- Okay for new construction
- As written will apply to existing construction
 - How many existing facilities will this affect?
 - What is the cost to fix this condition?
- Is it worth it?
 - Staff should not break out windows during a fire
 - Patients should not be evacuated through windows



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Adoption of NFPA 99, 2012 edition

§482.41 (c)(1)

Directly adopts NFPA 99: *Health Care Facilities Code*

Except chapters:

- | | |
|------------|--------------------------|
| Chapter 7 | = IT and Nurse Call |
| Chapter 8 | = Plumbing |
| Chapter 12 | = Emergency Preparedness |
| Chapter 13 | = Security |



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Waivers for NFPA 99

§482.41 (c)(2)

- Gives CMS authority to grant waivers to NFPA 99 requirements
- Same requirement as for NFPA 101

Guidance on

MAKING COMMENTS



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Making Comments

You are more likely to have an impact on regulatory decision-making if your comment:

- Is constructive
- Is information-rich
- Clearly communicates and supports your claims

Begin by reading and understanding the regulatory document you are commenting on.



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Making Comments

- The comment process is not a vote – one well-supported comment is often more influential than a thousand form letters.
- This is not a “Me Too!” vote
- Duplicating comments by others lessens the value of both comments



Making Comments

Clearly identify the issues. If you are commenting on a particular word, phrase, or sentence, provide the page number, column, and paragraph citation from the *Federal Register* document.

Do not feel obligated to comment on every issue – select those that concern you the most, affect you the most, and/or you understand the best.



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Making Comments

Identify credentials and experience that may distinguish your comments from others.

If you are commenting in an area in which you have relevant personal or professional experience (e.g., facility manager, recent construction project, attorney, etc.), say so.



Making Comments

Consider including examples of how the proposed rule would negatively and/or positively affect your facility.

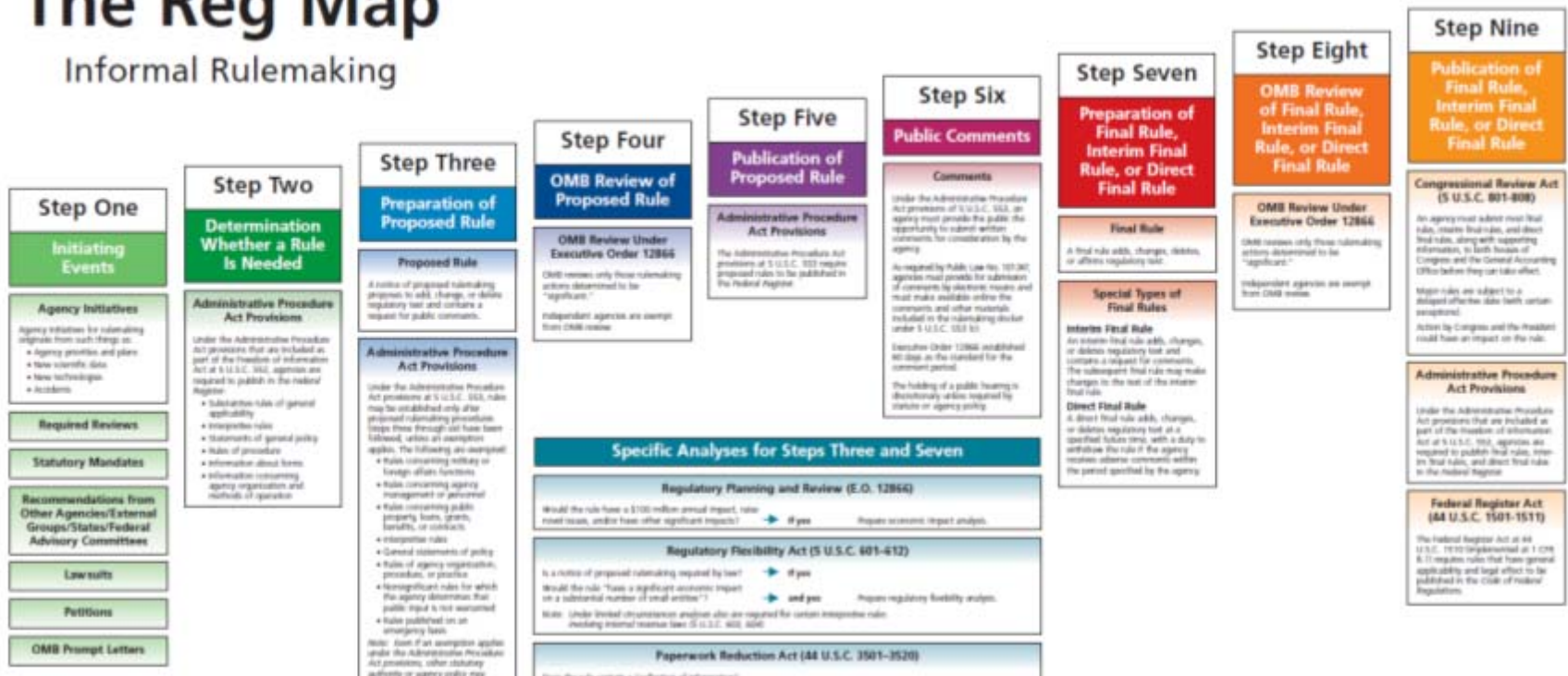
Comments that include quantitative and qualitative data on the economic effects of rules are especially helpful.



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The Reg Map

Informal Rulemaking



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Question

- What do you think of the proposal to require providers to meet the applicable provisions of the 2012 edition of NFPA 101, ***regardless of the number of patients*** served will affect the hospitals you work with?

Question

- Does your hospital currently discharge inpatients to use outpatient services and then re-admit the patients?

Question

- Do you have buildings constructed as business or ambulatory health care occupancies that are used to provide hospital services?

Question

- Do have windowless anesthetizing locations (windowless operating rooms)?
- If so, do they have a dedicated exhaust system that automatically vents smoke?
- If they have a dedicated system, do the controls shut down the surgical suite air-handling units?
- If so, would the shut down of the air handling unit shut down ventilation of multiple operating rooms?



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Question

- Is your hospital partially sprinklered?
- Do you already have plans to sprinkler the unsprinklered area?
- Will you be able to do so in the 12 year timeframe.
- How many sprinkler system impairments do you have each year that are over 4 hours and less than 10 hours?



Question

- Typically, what does your local authority require you to do to perform a fire watch because of a sprinkler impairment?

Provide Feedback to CMS!

This impacts everyone who has a stake in health care! Architects, planners, facility professionals, contractors, consultants etc.

Share your feedback

Share your evidence

Share your burden



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Comments Due: **June 16, 2014**

- <http://www.regulations.gov/#!documentDetail;D=CMS-2014-0058-0001>

Comment Now!



Help is Available!

Call The ASHE Comment Helpline!
501-813-2400

