CMS Proposes New Fire Safety Regulations for Hospitals

On April 14, 2014, the Centers for Medicare & Medicaid Services (CMS) announced a proposed rule regarding the adoption of the 2012 edition of the Life Safety Code (LSC) and Health Care Facilities Code (HCFC), which contains key updates regarding fire safety regulations for all Medicare and Medicaid participating hospitals; long term care facilities (LTC); critical access hospitals (CAH); ambulatory surgical centers (ASC); and, other facilities. CMS asserts that the adoption of these building codes will ease compliance across facilities, as both the LSC and HCFC are aligned with international building codes. These code updates are particularly important for hospitals, as they contain new requirements for: (1) sprinkler systems; (2) fire watch requirements; (3) patient suite sizes; and, (4) door locking, among others.

The LSC did not previously require hospital facilities having four or more patients on an inpatient basis to comply with these codes; however, CMS eliminated this exception, noting that patients in any hospital setting should be afforded the same safety protections. As such, all of the following provisions apply to any hospital, regardless of its size. Due to the increased time required to evacuate high-rise buildings, CMS will require hospitals over 75 feet tall to install automatic sprinkler systems, over a period of 12 years from the date of implementation of CMS’s final rule. CMS anticipates that this sprinkler installation will give individuals additional time to safely evacuate high-rise hospital facilities. CMS estimates that this sprinkler installation requirement will cost hospitals that are already “partially-sprinklered” approximately $34,075 per year, over the proposed 12 year implementation period. For hospitals that are not “sprinklered,” CMS estimates that the sprinkler installation requirement will cost approximately $117,028 per year, over the proposed 12 year implementation period. In addition to the foregoing sprinkler requirements, hospitals must be (1) evacuated; or, (2) a fire watch must be established, in the event that the hospital’s sprinkler system has been out of service for more than 10 hours in a 24-hour service period, and until the system has been returned to service. CMS is permitting hospitals to enlarge their patient sleeping suites in order to allow for more comfort and space for patients. The new sleeping suites cannot exceed 7,500 square feet, a 2,500 square foot increase over the previous 5,000 square foot requirement. In addition to patient comfort, this increase in square footage will allow more patients in a contiguous area, thereby reducing the number of staff necessary to monitor patients. As such, CMS estimates that this new square-footage provision will reduce hospital costs by reducing the number of suites, and staff to monitor suites, to treat the same number of patients.

In addition, CMS has sanctioned door-locking arrangements in order to provide protection for wandering patients and against infant abductions. Hospital staff may lock interior doors to patient rooms, so long as:

(1) All staff members have keys;
(2) Smoke detection systems are in place;
(3) The entire facility is equipped with an automatic sprinkler system;
(4) The locks will electronically release upon loss of power to the locking device; and,
(5) The locks will electronically release upon detection of smoke in the smoke detection system or water flow in the automatic sprinkler system.

In addition to the foregoing requirements, CMS’s proposed regulations allow the use of aerosol dispensers for alcohol-based hand rubs, subject to certain exceptions, and require smoke control in anesthetizing locations. CMS’s proposed regulations also establish separate requirements for ambulatory health care occupancies (e.g., ASCs and outpatient centers) and residential board and care occupancies (e.g., skilled nursing and other boarding facilities). Despite the American Hospital Association’s (AHA) disagreements with CMS regarding the 2013 fire safety updates, the AHA has stated that, “We are pleased that CMS has proposed to update its fire safety regulations, a long-awaited improvement that should make it easier for hospitals to comply with the most recent standards for keeping patients safe.” Despite these initial, supportive comments, AHA has noted that it will provide additional comments regarding the implications of these proposed standards in the coming weeks.

2 CMS, 4/14/2014.


5 Ibid, p. 21555.

6 Ibid.

7 Ibid, p. 21570.

8 Ibid.

9 Ibid, p. 21555.

10 Ibid, p. 21554.

11 Ibid.

12 Ibid, p. 21555.

13 Ibid.

14 Ibid, p. 21555.


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