

Categorical waivers offered by CMS



Current S&C	Prior S&C (if applicable)	Provision	Description	Code Requirement	Code Origin (if prior to 2012 edition)	Conditions	ASHE Issue Brief
April 19, 2013 (S&C: 13-25-LSC & ASC)		Relative humidity in the OR	Lowers the relative humidity (RH) requirement for operating rooms and other anesthetizing locations from at least 35 percent to at least 20 percent.	NFPA 99-2012, 5-4.1.1 and Addendum D of the ASHRAE 170-2008		To use this waiver, a facility must demonstrate that it meets the minimum RH standard of ≥ 20 percent. The waiver does not apply when more stringent RH control levels are required by state or local laws and regulations; or where reduction in RH would negatively affect ventilation system performance.	April 22 issue brief
August 30 (S&C 13-58-LSC)		Medical gas master alarms	Allows substitution of a centralized computer system for one Category 1 medical gas master alarm.	NFPA 99-2012, 5.1.9.4 and compliance with all other applicable NFPA 99-1999 medical gas master alarm provisions	NFPA 99-2005	The organization must demonstrate that it complies with all other applicable NFPA 99-1999 medical gas master alarm provisions, as well as with section 5.1.9.4 of NFPA 99-2012.	September 5 issue brief
August 30 (S&C 13-58-LSC)		Openings in exit enclosures	Permits existing openings in exit enclosures to mechanical equipment spaces if they are protected by fire-rated door assemblies.	NFPA 101-2012, 7.1.3.2.1(9)(c) and all other applicable NFPA 101-2000 exit provisions	NFPA 101-2003	The mechanical equipment space must be in a building protected with an approved supervised automatic sprinkler systems, must be used only for non-fuel-fired mechanical equipment, must contain NO storage of combustible materials, and must be protected by a fire rated door assembly.	September 5 issue brief
August 30 (S&C 13-58-LSC)		Emergency generators and standby power systems	Reduces the annual diesel-powered generator exercising requirement from two (2) continuous hours to one hour and 30 minutes.	NFPA 110-2010, 8.4.2.3 and all other applicable NFPA 110-1999 operational inspection and testing provisions		The annual load test is only required when the monthly diesel generator test does not comply with minimum loading requirements to avoid wet stacking.	September 5 issue brief
August 30 (S&C 13-58-LSC)		Door locking arrangements	Allows door locking arrangements in areas where there are clinical needs, security risks or specialized protective measures required for safety.	NFPA 101-2012, 18/19.2.2.2.2 through 18/19.2.2.2.6 as well as all other applicable NFPA 101-2000 door provisions	NFPA 101-2009		September 5 issue brief

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August 30 (S&C 13-58-LSC)		Multiple delayed egress locks	Allows more than one delayed-egress lock in the egress path where the clinical needs require specialized security measures or when a patient requires specialized protective measures for safety.	NFPA 101-2012, 18/19.2.2.2.4 and compliance with all other applicable NFPA 101-2000 door provisions	NFPA 101-2009	The facility must also use compensating safety measures specified in those sections that facilitate rapid removal of occupants.	September 5 issue brief
August 30 (S&C 13-58-LSC)		Suites	Accommodates the use of suites by allowing: (1) one of the required means of egress from sleeping and non-sleeping suites to be through another suite, provided adequate separation exists between suites; (2) one of the two required exit access doors from sleeping and non-sleeping suites to be into an exit stair, exit passageway, or exit door to the exterior; and (3) an increase in sleeping room suite size up to 10,000 sq. ft.	NFPA 101-2012, 18/19.2.5.7 and compliance with all other applicable NFPA 101-2000 suite provisions	NFPA 101-2006, with subsequent changes in the 2009 and 2012 editions	Corridor wall and door requirements for the outer boundary of the suite must meet the requirements for the smoke zone. One or more egress routes may be required, depending on the size of the suite. *	September 5 issue brief
August 30 (S&C 13-58-LSC)		Extinguishing requirements	Allows for the reduction in the testing frequencies for sprinkler system vane-type and pressure switch type waterflow alarm devices to semiannual, and electric motor-driven pump assemblies to monthly.	NFPA 25-2011, 5.3 and 8.3 and all other applicable NFPA 25-1998 (as referenced in section 9.7.5 of the NFPA 101-2000)	The semimonthly water flow test first appeared in NFPA 25-2002 .		September 5 issue brief
August 30 (S&C 13-58-LSC)		Clean waste and patient record recycling containers	Allows the increase in size of containers used solely for recycling clean waste or for patient records awaiting destruction outside of a hazardous storage area to be a maximum of 96 gallons.	NFPA 101-2012, 18/19.7.5.7.2		The container must pass an FM fire test.	September 5 issue brief

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August 30 (S&C 13-58-LSC)	March 9, 2012 (S&C 12-21-LSC) . Previous guidance concerning "not in use" criteria found in S&C-10-18-LSC is still applicable.	Items in the corridor	Allows emergency medical equipment such as crash carts and patient lift and transportation devices to be placed in the exit corridor without "in-use" restrictions. Also permits fixed furniture in the corridor.	NFPA 101-2012, 18/19.2.3-18/19.2.3.4		The "not in-use" restriction, intended for items left unattended or not moved for more than 30 minutes, still applies to non-medical equipment placed in the exit corridor, such as housekeeping carts and computers on wheels. Facilities wishing to use this waiver can follow the same process as the waivers above provided they are in compliance with all other requirements outlined in the March 9, 2012 memo (S&C 12-21-LSC).	March 15, 2012 issue brief
August 30 (S&C 13-58-LSC)	March 9, 2012 (S&C 12-21-LSC)	Kitchens open to the corridor	Allows certain types of alternative cooking arrangements including kitchens, serving less than 30 residents, to be open to corridors as long as they are contained within smoke compartments with no more than 30 beds.	NFPA 101-2012, 18/19.3.2.5, 18/19.3.2.5.2, 18/19.3.2.5.3, 18/19.3.2.5.4		Facilities wishing to use this waiver can follow the same process as the waivers above provided they are in compliance with all other requirements outlined in the March 9, 2012 memo (S&C 12-21-LSC).	March 15, 2012 issue brief
August 30 (S&C 13-58-LSC)	March 9, 2012 (S&C 12-21-LSC)	Gas fireplaces in common areas	Allows the installation of direct vent gas fireplaces in smoke compartments containing patient sleeping rooms and the installation of solid fuel burning fireplaces in areas other than patient sleeping areas.	NFPA 101-2012, 18/19.5.2, 18/19.5.2.3(2), (3) and (4)		Facilities wishing to use this waiver can follow the same process as the waivers above provided they are in compliance with all other requirements outlined in the March 9, 2012 memo (S&C 12-21-LSC).	March 15, 2012 issue brief
August 30 (S&C 13-58-LSC)	March 9, 2012 (S&C 12-21-LSC)	Installation of combustible decorations	Increases the amount of wall space that may be covered by combustible decorations.	NFPA 101-2012, 18/19.7.5, 18/19.7.5.6		Facilities wishing to use this waiver can follow the same process as the waivers above provided they are in compliance with all other requirements outlined in the March 9, 2012 memo (S&C 12-21-LSC).	March 15, 2012 issue brief
September 26 (S&C 14-46-LSC)		Power strip use in patient care areas	Allows the use of SPRPTs within the patient care vicinity and RPTs outside of the patient care vicinity	NFPA 99-2012, 6.3.2.2.6.2 and 10.2.3.6	NFPA 99-1999, Section 3-3.2.1.2 (d)(2), Section 9-2.1.3.8 and NFPA 70-1999 Article 400-8	Facilities wishing to use this waiver can follow the same process as the waivers above provided they are in compliance with all other requirements outlined in the September 26, 2014 memo (S&C 14-46-LSC).	Sept 29, 2014 issue brief

*Information from "Suite Talk" article by William Koffel, PE, FSFPE, and Diana E. Hugue, PE, with Koffel Associates, Inc., in the Spring 2013 *Inside ASHE* magazine



Instructions for Applying Waiver Options:

1. Review the selected waiver in detail by reviewing the appropriate Survey & Certification Letter and all applicable code sections and requirements in order to determine all required actions to properly apply the waiver.
2. Verify that all requirements to meet the individual waiver are in place and being adhered to.
3. Formally elect to use the specific waiver by documenting this election through a letter to the appropriate Safety or Environment of Care (EOC) Committee and with senior leadership approval. The election to use multiple waivers can be documented on a single letter.
 - a. Indicate in this letter exact locations and application of waivers being selected. As an example – if multiple delayed egress locking devices are only applicable in the means of egress for the Pediatrics and OB/Gyn Wards clearly indicate this by location i.e. ward, floor and building, and door numbers of those doors with multiple delayed egress locking devices.
 - b. Document in the minutes of the Safety or EOC Committee the vote for approval of the letter and document the voting results on the letter.
 - c. Document senior leadership approval by signature of at least one member of senior leadership.
4. Include a copy of the signed letter in the minutes of the Safety or EOC Committee minutes.
5. For those facilities that are accredited by the Joint Commission an electronic copy of all Life Safety Code waiver elections should be attached to the basic building information for the applicable facility.
6. At the entrance conference to any survey assessing *Life Safety Code* compliance the facility must notify the surveyor of all elected categorical waivers, including those mentioned in Step 5, and present the appropriate documentation indicating the formal election of all elected waivers. It should be noted that it is not acceptable for a facility to first notify surveyors of waiver election after a citation has been issued. If this step is not adhered to during the entrance conference of the survey the surveyors will conduct the survey based upon the criteria of the requirements in place prior to the categorical waivers.
7. All elected waivers should be periodically reviewed to assure that their applicability is still pertinent. For Joint Commission accredited facilities this review should be performed during the annual Intracycle Monitoring (ICM) process, including the Focused Standards Assessment (FSA) tool (which replaced the Periodic Performance Review). For other facilities this should be performed based on the accrediting organization's standards for periodic reviews or at least annually.