

Staff Contacts:

Sarah Willson
swillson@mhanet.com
573/893-3700, ext. 1304

Jackie Gatz
jgatz@mhanet.com
573/893-3700, ext. 1330

CMS Adopts 2012 Edition Of NFPA Life Safety Code

The Centers for Medicare & Medicaid Services has adopted the 2012 edition of National Fire Protection Association 101: Life Safety Code®. The final rule adopting the 2012 edition was published in the *Federal Register* on May 4. The 100-page document includes background material for reference. For easier reference, the American Society for Healthcare Engineering has [extracted](#) the final rule from the larger document to outline the relevant Conditions of Participation for hospitals, critical access hospitals, ambulatory surgical centers and other health care facilities.

The change is effective July 5, 2016, and comes after years of CMS considering the change to the more updated standard. In its rule, CMS adopts the 2012 editions of the Life Safety Code and the NFPA: Health Care Facilities Code, but makes several changes to the codes. For example, the chapters of NFPA 99 on the following topics are not included in the adoption: information technology (Chapter 7), plumbing (Chapter 8), emergency management (Chapter 12) and security (Chapter 13). CMS previously had proposed its own emergency preparedness rules separate from NFPA 99 requirements.

The rule also will make several changes for hospitals, including the following.

- Corridor doors and doors to rooms containing flammable or combustible materials must be provided with positive latching hardware. Roller latches are prohibited on such doors under the CMS rule.
- In consideration of a recommendation by the state survey agency or accrediting organization, CMS may waive specific provisions of the Life Safety Code that would result in unreasonable hardships, but only if the waiver will not adversely affect the health and safety of the patients.
- Hospitals may install alcohol-based hand rub dispensers in its facility if the dispensers are installed in a manner that adequately protects against inappropriate access. This requirement from CMS differs from the Life Safety Code, which does not have any requirements against inappropriate access.
- When a sprinkler system is shut down for more than 10 hours, hospitals must either evacuate the building or portion of the building affected by the system outage until the system is back in service or establish a fire watch until the system is back in service.
- Buildings must have an outside window or door in every sleeping room, and for any building constructed after 60 days past the publication date of the rule, the sill height must not exceed 36 inches above the floor. Windows in atrium walls are considered outside windows for the purposes of this requirement. The sill height requirement does not apply to newborn nurseries and rooms intended for occupancy for less than 24 hours. The sill height in special nursing care areas of new occupancies must not exceed 60 inches.

The 2012 edition of the Life Safety Code includes several advantages compared to the 2000 edition, which is currently required by CMS. The 2012 edition reduces conflicts with other codes, including the

International Building Code, meaning hospitals will use fewer resources trying to comply with conflicting codes. The 2012 edition also reflects the needs of modern health care facilities, such as larger critical care patient rooms.

MHA is working in collaboration with national resources to bring our members a variety of educational offerings and resources surrounding this change. Visit MHA's [website](#) for the most current information. Additional resources also may be found on ASHE's [website](#).

The information included in this email is reprinted with the permission of ASHE.

Missouri Hospital Association • P.O. Box 60 • Jefferson City, MO 65102
Phone: 573/893-3700 • Fax: 573/893-2809 • [MHAnet](#)
[Unsubscribe](#) • [Contact Us](#) • [Privacy Policy](#)