**CMS Memorandum– S&C: 13-58-LSC**

**Facility Types Included:** Hospital; Critical Access Hospital; LTCU; ASC; and Inpatient Hospice

**CATEGORICAL LSC WAIVERS PERMITTED:** CMS has determined that the 2000 edition of the LSC contains several provisions that may result in unreasonable hardship to providers/suppliers, for which an adequate level of protection may be achieved. Accordingly, CMS is making available several categorical waivers to new and existing providers and suppliers subject to the LSC.

**Waiver Process**

Providers must formally elect to use one or more of the categorical waivers and must document their election decision. If provider conforms to categorical waiver requirements, it will not need to apply to CMS for a waiver request. At entrance conference provider must notify surveyor of categorical waivers and the fact that they meet the waiver provisions. **IT IS NOT ACCEPTABLE FOR THE PROVIDER TO NOTIFY SURVEYOR OF CATEGORICAL WAIVER AFTER A LSC CITATION HAS BEEN ISSUED.**

The categorical waiver must be described under Tag K000 on the CMS 2567 form as “Facility Meets, Based Upon, 3. Waivers.” They will not be cited as a deficiency and do not require CMS approval. However, if the surveyor determines that the categorical waiver requirements are not being met, the deficiency will be cited under the appropriate K-tag.

**Categorical Waivers Available:**

1) **Medical Gas Master Alarms** – 1999 NFPA 99 requires two alarms at separate locations, and does not allow a centralized computer as a substitute.
   *WAIVER* allows a centralized computer system to substitute for one of the Category 1 medical gas master alarms, if provider is in compliance with all other applicable code requirements of 1999 NFPA 99 and 2012 NFPA 99.

2) **Openings in Exit Enclosures** – 2000 LSC limits openings in exit enclosures (e.g. stairwells) to doors from normally occupied spaces and corridor, and doors for egress from the enclosure, specifically unoccupied mechanical equipment spaces that have an exit access door to an exit enclosure.
   *WAIVER* allows existing openings in exit enclosures to mechanical equipment spaces that are protected by fire-rated door assemblies. Space may be used only for non-fuel-fired equipment, contain no combustible materials, and building must be sprinkled. Provider shall be in compliance with all other applicable code requirements of 2000 LSC and 2012 LSC.

3) **Emergency Generators and Standby Power Systems** – 1999 NFPA 110 requires diesel-powered generators that do not meet the monthly testing requirements to be run annually with various loads for a total of two (2) continuous hours.
   *WAIVER* allows annual diesel-powered generator testing of one hour and 30 minutes (1-1/2 continuous hours) per 2010 NFPA 110, but only if provider is in compliance with all other applicable code requirements of 1999 NFPA 110 and 2010 NFPA 110.

4) **Doors** – 2000 LSC permits door locking arrangements for a patients’ clinical needs (psychiatric, Alzheimer, dementia), security risk (emergency department), and safety protective measures (pediatric, newborn), provided provisions are made for rapid removal of occupants by means such as remote control locks or keys carried by staff at all times.
   *WAIVER* allows door locking arrangements when justified by the patients’ clinical needs, patients pose a security risk, or where patients require specialized protective measures for their safety, but only if the provider is in compliance with all other applicable code requirements.

5) **Suites** – 2000 LSC requires every habitable room to have an exit access leading directly to an exit access corridor; allows for exit access from a suite to include intervening rooms under certain circumstances; and requires suites of certain size to have two exit access doors remotely located from one another; and limits the size of sleeping suites to 5,000 sq ft.
   *WAIVER* permits use of suites by allowing: 1) one of required means of egress from sleeping and non-sleeping suites to be through another suite, provided there is adequate separation 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. This waiver is permitted only if provider is in compliance with all other applicable provisions of the 2000 and 2012 LSC.
6) **Extinguishing Requirements** - 2000 LSC requires that all automatic sprinkler and standpipe systems be inspected in accordance with 1998 NFPA 25, which requires quarterly testing of vane-type and pressure switch type water flow alarm devices, and weekly testing of electric motor-driven pump assemblies.

**WAIVER** allows for the reduction in testing frequency for vane-type and pressure switch type water flow alarm devices to semiannual, and electric motor-driven pump assemblies to monthly. This waiver is permitted only if provider is in compliance with all other applicable provisions of 1998 NFPA 25 and 2011 NFPA 25.

7) **Clean Waste & Patient Record Recycling** – 2000 LSC limits the size of trash collection containers to 32-gallon when located outside of a hazardous storage area and not attended.

**WAIVER** allows the increase in size of containers used solely for recycling clean waste (e.g., bottles, cans, paper) or for patient records awaiting destruction outside of a hazardous storage area to be a maximum of 96-gallons, but only if the provider is in compliance with the applicable provisions of the 2012 LSC.

8) **Clarification of Process for LSC Waivers permitted under S&C-12-21** – The CMS memorandum S&C-12-21-LSC, dated 03/09/12, also provided for categorical waivers of several provisions of the 2000 LSC (means of egress; cooking facilities; heating, ventilating, and AC; and install of combustible decoration), but required final approval by the CMS Regional Office.

**WAIVER** – allows providers seeking to take advantage of these categorical waivers, to now use the categorical waiver process described above, so long as they are in compliance with all the requirements identified in S&C-12-21-LSC.