



March 8, 2022

Washington State Building Code Council  
PO Box 41449  
Olympia, WA 98504-1449

**RE: 2021 Commercial Energy Code (WSR 22-02-076)**

Dear Chair Klein and Building Code Council Members,

On behalf of the Washington State Hospital Association (WSHA), thank you for the opportunity to provide feedback on the proposed 2021 Commercial Energy Code. WSHA represents more than 100 hospitals and health systems in our state. Our hospital members range from large statewide health care delivery systems to small rural hospitals that are the only health care safety net serving rural, remote communities. Hospital structures include recently constructed modern buildings and those built more than half a century ago that are updated to meet current state and local requirements. Our facilities have unique federal and state regulatory requirements to provide safe patient care that must be balanced with appropriate building codes designed to reduce emissions and promote energy efficiency. Because of this, hospitals are particularly concerned about the space heating and water heating proposals in the Council's CR 102 proposal. Hospitals offer the following recommendations to ensure that the adopted code considers hospitals' unique needs to ensure patient safety.

***Summary of Recommendations***

- Hospitals recommend a new exception in C403.1.4 for essential facilities;
- Hospitals recommend the Council adopt proposed Option #2 for C503.4.6;
- Hospitals recommend the Council adopt proposed Option #1 for C404.2 with a new exception for essential facilities; and
- Hospitals recommend the Council adopt proposed Option #2 for C503.5.

***Space Heating- C403.1.4 and C503.4.6***

WSHA is very concerned about the proposal to eliminate fossil fuel combustion for space heating due to hospitals' unique backup power requirements. Hospitals' top priority is to keep patients safe under all circumstances 24/7 and 365 days a year. Because of this, the Centers for Medicare and Medicaid Services (CMS) require hospitals to have at least 96 hours of backup power available in the event of a power outage. This is a mandatory condition for CMS accreditation that ensures hospitals are ready to serve patients if their power supply is disrupted. Hospitals' backup power is currently provided by onsite fossil fuel generators, which is the only available technology to meet the high-power demands within hospital facilities since battery technology is not feasible on the scale needed to power a hospital for at least 96 hours. Every hospital hopes to use its' generators infrequently, but recent cases of extreme weather, power outages, wildfires, and flooding have caused hospitals throughout the state to use their backup power systems to maintain operations.

Unfortunately, C403.1.4 prohibits the use of fossil fuel combustion appliances for HVAC heating in new construction projects. This will create challenges for new hospital buildings permitted under the 2021

code since they will need the ability to connect their HVAC heating systems to their fossil fuel backup power systems to ensure patient safety during an emergency. We recognize that exception #9 provides a limited exception for health care purposes. However, the exception is insufficient because it is subject to the discretion of local code officials and limited to specific building areas. Because of this, hospitals recommend the Council add a new exception to accommodate essential facilities, as defined by the 2018 Washington State Building Code, that by regulation are required to have in place redundant emergency backup power systems. This will help ensure new hospitals are compliant with the code and other state and federal regulations. Hospitals offer the following exception language:

**18. Essential facilities.** Including but not limited to I-2 occupancies and related medical facilities that by regulation are required to have in place redundant emergency backup systems.

Our recommended exception is also important when considering the options presented for C503.4.6 for existing buildings since both options require compliance with C403.1.4 for replacing existing equipment. Our preference of the two options in C503.4.6 is option #2 since it explicitly addresses like-for-like equipment replacement. However, if our proposed exception and option #1 are adopted, then hospitals will have the certainty necessary to replace existing equipment without being out of code compliance.

#### ***Water Heating- C404.2 and C503.5***

Hospitals' water heating needs are complex and require large volumes of hot water to be ready at all times to meet the needs of patients, staff, and visitors. For most hospitals, fossil fuels are the primary method for powering water heating systems capable of serving patient care areas, steam sterilization equipment, food service and laundry facilities, and all other areas where hot water is necessary for safe patient care. Moreover, current fossil fuel powered water heating systems can remain powered when the electricity is disrupted, which ensures the continuity of hot water service during an emergency.

Because of this, hospitals urge the Council to adopt proposed Option #1 for C404.2, which would give new hospitals the option of choosing between high-efficiency fossil fuel powered water heating equipment or electric heat pump water heaters when designing facilities. This will ensure that hospitals can choose the water heating source that is best suited to the facility and its' location.

**Hospitals also recommend adding a new exception to the list in C404.2.1 with clear language to provide a specific exception for essential facilities that by regulation are required to have in place redundant emergency backup heating systems.** Hospitals offer the following exception language:

**8. Essential facilities.** Including but not limited to I-2 occupancies and related medical facilities that by regulation are required to have in place redundant emergency backup systems.

Additionally, hospitals urge the Council to adopt proposed Option #1 for C404.2 and proposed Option #2 for C503.5 together to allow facilities to upgrade to more efficient fossil fuel powered equipment. This will make it easier and less burdensome for older hospitals to replace equipment while remaining compliant with the code.

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Thank you again for the opportunity to comment on the Council's 2021 Commercial Energy Code

proposal. Should you have additional questions on WSHA's recommendations, please contact David Streeter via email at [DavidS@wsha.org](mailto:DavidS@wsha.org).

Sincerely,



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