DOCKETED

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Project Title:	2019 Title 24, Part 6, Building Energy Efficiency Standards Rulemaking
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Document Title:	CA Hospital T24 standards analysis and case study
Description:	Email support comment letter regarding the Title 24 Part 6 standards for healthcare facilities.
Filer:	Gabriel Taylor
Organization:	California Energy Commission
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From: Arash Guity
To: Taylor, Gabriel@Energy
Subject: Proposed CA Hospital T24 standards analysis and case study
Date: Tuesday, February 27, 2018 11:35:26 PM

Gabe,

As we previously discussed, Mazzetti is very supportive about the new proposed Title 24, Part 6 revisions pertaining to healthcare facilities. As an evaluation exercise, we performed an evaluation of one of our current CA hospital projects in design to see how this would impact common practices.

The project that we picked for this comparison has the following characteristics and considerations:

- Building type: General hospital
- Location: [redacted]
- Size: 230,000 SF
- Baseline standard: ASHRAE 90.1-2007
- Energy goals: Targeting LEED Silver certification (V3/2009)
- Estimated savings over baseline: 25%
- Design characteristics: Our combined architectural and building systems designs consisted of industry “best practices” and cost-effective approaches.

This is a summary of our findings of a comparison:

- 90%+ of the proposed requirements would be met by our design for the prescriptive requirements
- Though a CBECC-COM engine was not available at the time of our analysis, we estimate that the performance path based energy savings would be in the order of 10-15% above the new proposed standard.
- None of the proposed requirements would be substantially cost prohibitive to comply with
- The proposed requirements would yield a life-cycle cost benefit (payback of less than 5 years)
- All of the proposed requirements are included in almost every one of our current CA healthcare projects in design

In short, as a result of our analysis, we consider the proposed requirements to be basic current design principals and industry best practices that are easily achievable. In fact, we believe that additional requirements should be incorporated specifically related to HVAC systems that are already standard practice, yet are not included in the current proposed language.

I hope that this is informative as a reference case study to illustrate that the proposed requirements are not onerous or prohibitive and that they will help to align our CA energy standards with what the industry already considers to be “par for the course”. As originally stated, we strongly support the proposed standards and believe that this will help align our state’s healthcare facility energy performance with the rest of the nation and hopefully ultimately bring us to the point where we are

again setting an example for others. We certainly have a long way to go to make up ground.

Please let us know if you have any questions or desired clarifications. We are eager to support your efforts in this noble endeavor.

Kindest regards,

Arash

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