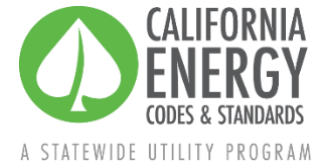


# Meeting Notes:

## April 20, 2026



Posted April 28, 2026

These notes summarize the content from the 2028 Title 24, Part 6 Code Cycle Utility-Sponsored Stakeholder Meeting on **Healthcare Prototype Enhancements**

If you are interested in providing input on any of the topics covered in this meeting, please email your comments to [info@title24stakeholders.com](mailto:info@title24stakeholders.com) by May 12, 2026. Comments received after then may not be incorporated into the final version of the CASE Report.

### Quick Links

- [Key Points from Meeting](#) – Read through highlights from each measure and review feedback requested from stakeholders.
- [In-Meeting Questions / Comments](#) – Navigate directly to questions asked during the meeting and responses from CASE Authors
- [Zoom Polls & Responses](#) – Review the Poll Questions asked during the meeting and see the responses from stakeholders.
- [Meeting Materials](#) (available on Title24Stakeholders.com) – Review slides, measure summaries, proposed code language and more on our website.

### Meeting Information

**Meeting Date:** 04/20/2026

**Meeting Time:** 11 am – 1pm PT

**Meeting Host:** California Statewide Utility Codes and Standards Team

### Meeting Agenda

Time	Topic	Presenter
11:00 AM	Introduction	Cosimina Panetti, Kelly Cunningham, Payam Bozorgchami
11:15 AM	Healthcare Prototype Enhancements	Krishnan Gowri, Alamelu Brooks
1:00 PM	Conclusion / Wrap-Up	Cosimina Panetti

## Members of the CASE Team

### 1.1.1 Statewide Utility Codes and Standards Team – Utility Staff

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### 1.1.2 Statewide Utility Codes and Standards Team – Codes and Standards Enhancement (CASE) Team Members

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## California Energy Commission

### Contact for 2028 Code Cycle:

Any questions for the CEC can be sent to: [EnergyCodeUpdateInquiries@energy.ca.gov](mailto:EnergyCodeUpdateInquiries@energy.ca.gov)

### CEC Docket

Comments on the 2028 Energy Code update can be formally submitted to the docket: <https://efiling.energy.ca.gov/Ecomment/Ecomment.aspx?docketnumber=25-BSTD-03>

## Key Points from Meeting

The purpose and benefits of each measure presented at this meeting are noted below. Specific topics we are looking for feedback on are highlighted.

To provide input, email the CASE Authors noted above or send to [info@title24stakeholders.com](mailto:info@title24stakeholders.com).

### Healthcare Prototype Enhancements

- **Purpose:** To introduce proposed modifications to the current Healthcare Hospital Prototype, as well as new prototype for Skilled Nursing Facilities (SNF), and add prototype enhancements to compliance software.
- **Benefits:** To increase alignment between HCAI, Title 24 Part 6, and ASHRAE 90.1/IECC. The existing large hospital prototype's Energy Use Intensity is low and default values are conflicting with other California Building Codes and there is no prototype for Skilled Nursing Facilities. The recommended prototype modifications and new SNF Prototype will help more accurate accounting of energy consumption and savings.
- **Feedback requested:**
  - What percentage of the hospital chiller plant load is met by water-cooled chillers.
  - What percentage of the total conditioned floor area (CFA) of the hospital is served by the DX systems.
  - Recommendations for air-cooled HVAC plants over water-cooled HVAC plants for hospitals
  - Understand what spaces that will impact the energy use intensity and need to be included in the prototype.
  - Feedback on what features should be added or modified to accommodate Healthcare building systems.
  - Understand critical spaces like operation rooms served by constant volume air handler.
  - Which spaces are considered for turn down in projects.

### In-Meeting Questions / Comments

During the meeting, questions and comments were submitted in the Q&A pane in Zoom as well as asked aloud. Answers are provided below.

Attendees were also asked to respond to polls. Navigate directly to the [Zoom Polls & Responses](#) by clicking the link.

Due to time limitations, not all written questions and comments were discussed during the meeting, but all have responses available in these meeting notes.

## Healthcare Prototype Enhancements

1. Question asked via Zoom question pane by Nikhil Kapur: Currently there is no baseline system in the ACM HVAC map - so mention of changing baseline requirements for HVAC systems is a bit confusing. Under current modeling protocols the compliance software just creates a baseline model with requirements as per code for envelope, lighting and domestic hot water. For HVAC current modeling rules just use the proposed system modeled in the standard/baseline design system (with baseline efficiencies) and fan power adjustments. Just to confirm the proposal seems to be creating a new Standard/Baseline Design system in the ACM System Map or creating specific baseline HVAC systems for critical spaces (such as we do for process spaces such as Kitchens, Labs). Can you clarify. Or the intent of this proposal is just for changing the proposed prototype and still continue using the same HVAC system in Proposed and Standard design besides the efficiency metrics which change based on the standard design sizing. Could you clarify?
  - [Alamelu]: Verbal Response: Yeah, now the trade-off is allowed because we are requiring them, At the system level, zone level, and spaces level. The big change is going to be on the alteration side, even though we are talking about the prototype, but it's going to impact... it's going to have an impact on the ACM and also the code, so for alterations, they are required to So, the trade-off is right now it is X mark, now it's going to be allowed. Number two, they can take credit for only these measures that we are modifying or removing, but they cannot take credit for exceptions that are still in the code. They have to model identically. So, the credit is allowed only for the exceptions that are modified. So, the trade-off is right now it is X mark, now it's going to be allowed.
2. **Comment via Zoom question pane by Jireh Peng:** For the current Hospital prototype, re: VAV vs CAV, I'm seeing that the OR system and other critical area systems have flow minimums very close to the design flows, so there shouldn't be too much impact from the change to CAV.

## Wrap-Up

The meeting concluded with a call for participation throughout the code cycle. Several future meeting dates were presented. Final CASE Reports will be posted May 2026 through June 2026 on [title24stakeholders.com](http://title24stakeholders.com).

Please reach out to the specific topic lead or [info@title24stakeholders.com](mailto:info@title24stakeholders.com) with input on the measures presented today.

The meeting adjourned at 1:00 PM PST.

## Zoom Polls & Responses

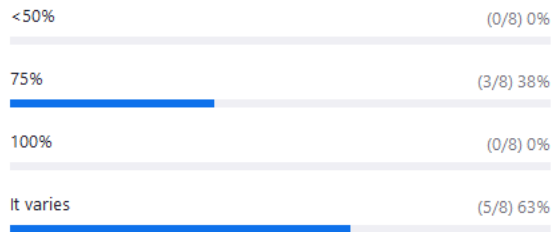
### Multiple Choice Questions

#### *Percentage of Hospital Chiller Plant Load*

Zoom Polls/quizzes

#### 1 - Percentage of Hospital Chiller Plant Load

1. What percentage of the hospital chiller plant load is met by water-cooled chillers? (Single choice)



You did not answer this question

Close

## Percentage of Conditioned Floor Area of the Hospital

z/1 Polls/quizzes

### 2 - Percentage of CFA

1. What percentage of the total conditioned floor area (CFA) of the hospital is served by the DX systems? (Single choice)



You did not answer this question

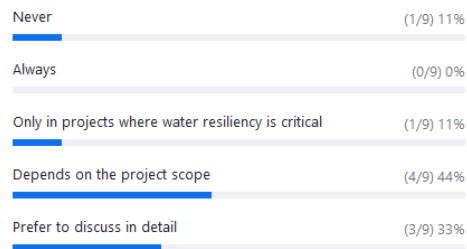
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## Air-cooled HVAC Plants

z/1 Polls/quizzes

### 3 - Air-cooled HVAC Plants

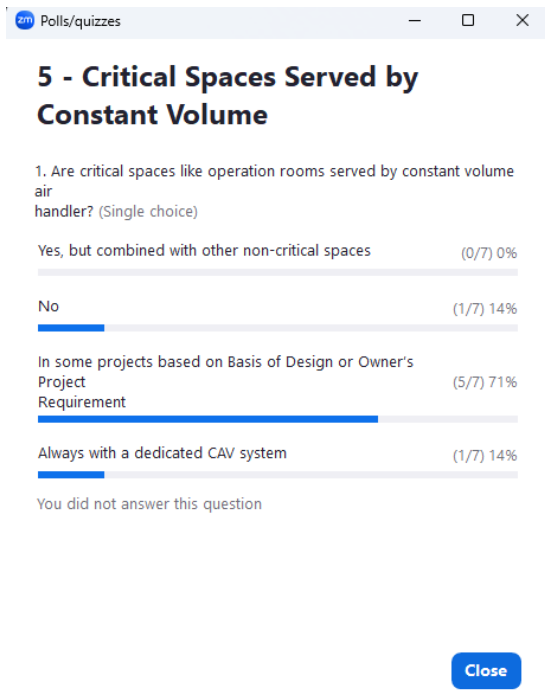
1. Do you recommend air-cooled HVAC plants over water-cooled HVAC plants for hospitals? (Single choice)



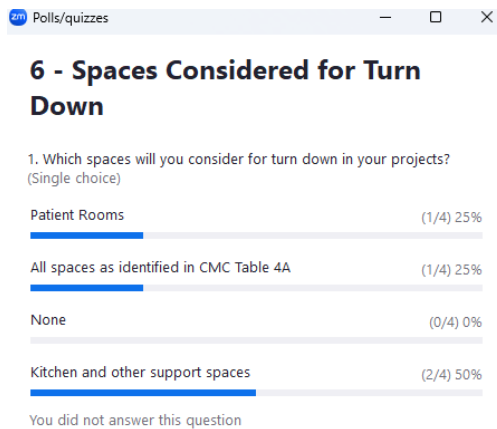
You did not answer this question

Close

## Critical Spaces Served by Constant Volume



## Spaces Considered for Turn Down



## Long Answer Question

1. **What spaces that will impact the energy use intensity, need to be included in the prototype?**
  1. critical environment
  2. Mixed use facilities MOB + Hospital Long term care facilities (R occ groups + care centers subject HCAI
  3. All