



**POLICY INTENT NOTICE**

**PIN: 50**

**SUBJECT**

Integrated Review (IR)  
*(Formerly Collaborative Review and Construction (CRC) process & Phased Plan Review (PPR))*

**Effective: 07/30/2021**  
**Revised: 04/29/2026**



**PURPOSE**

This Policy Intent Notice (PIN) incorporates lessons learned on Phased Plan Review (PPR) and Collaborative Review and Construction (CRC) projects completed to date and incorporates them into the Integrated Review (IR) process.

**BACKGROUND**

The Department of Health Care Access and Information’s Office of Statewide Hospital Planning and Development (OSHPD) implemented its Phased Plan Review (PPR) process in 2007. Due to the Industry’s growing demand for utilizing LEAN principles and Integrated Project Delivery methods, in 2013 OSHPD implemented an optional plan review process known as Collaborative Review and Construction (CRC). Several iterations of these integrated review processes have been used successfully on many projects, reducing the time to first approval by up to six months, and minimizing the number of back checks and post approval documents during construction. With new developments in Electronic Plan Review, many of the benefits for CRC have been incorporated and are available for a wider assortment of projects. Considering this, CRC and PPR are being combined and are now known as Integrated Review (IR).

From the California Health and Safety Code, Section 129765:

(b) Notwithstanding subdivision (a), department, at its sole discretion, may enter into a written agreement with the hospital governing authority for the phased submittal and approval of plans. The department shall charge a fee for the review and approval of plans submitted pursuant to this subdivision. This fee shall be based on the estimated cost but shall not exceed the actual cost of the entire phased review and approval process for those plans. This fee shall be deducted from the application fee pursuant to Section 129785.

From the California Administrative Code Part 1 of Title 24 of the California Code of Regulations:

**7-111 Definitions.**

**INTEGRATED REVIEW** is the process that engages the office, at its sole discretion, early in the project design and continues through the development and submission of documents during the (design phases of) conceptualization, criteria design, detailed design, implementation documents, office review, and final plan approval. Within each phase milestones are established for specific, agreed upon points where segments of the design/building system are completely designed and/or

defined in their entirety. The Office provides an agreed upon level of review that allows for written conditional acceptance of these elements and/or systems.

**7-121(c) Integrated review.** A request for Integrated Review (IR) must be submitted to the Office in writing prior to the presubmittal meeting being scheduled. In addition to the items listed in Section 7-121(a), for IR projects, the architect or engineer in responsible charge shall submit the following information to the Office:

1. Complete project schedule.
2. Proposed review matrix outlining all phases, milestones, increments, and segments for the project.
3. Initial draft of the Integrated Review Plan (IRP) proposed, defining roles and accountability of the participants.

**7-130 Integrated submittal, review and approval.** The Office, at its sole discretion, may enter into a written agreement with the hospital governing board or authority for the phased/integrated submittal, review and approval of construction documents.

**7-133(h) Integrated Review submittal.**

1. The fee for integrated submittal, review and approval pursuant to Section 7-130 shall be based on the written agreement, which shall include a schedule for payment. The integrated review fee shall be 1.95 percent of the estimated construction cost as calculated in accordance with Section 7-133(a) 4 through 7.

## **POLICY**

This Policy implements the Integrated Review process (IR). The IR is a discretionary process that requires a significant investment of time, resources, and planning for all entities involved in the project. IR is not suitable for the traditional Design-Bid-Build project delivery approach. Also, not all large projects are suitable candidates for IR. Projects with significant uncertainties in program or budget are not suitable candidates, since significant changes in the project scope are likely, thus reducing the benefits of early review efforts.

IR is usually combined with an Integrated Project Delivery (IPD) project in which all major design disciplines, the contractor, and trade partners are selected at the beginning of the project to work as a team. This model often relies on Lean Construction principles. In a typical IPD contract, all major parties work from an open book and put their profit at risk, thereby ensuring that the success of the individual team member relies on the success of the entire team. The IPD team simultaneously designs the building and how it is going to be built, thereby minimizing ACDs, and substantially improving adherence to budget. The need for deferred submittals should also be substantially reduced, if not eliminated, using this model. The time to initial permit may be longer than a traditional design-bid-build project but can be reviewed by OSHPD with a greater certainty of constructability.

While the IR has many benefits it also has challenges. All entities must be fully committed to follow through with ensuring all IR deliverables are complete and comply with the agreed upon schedule. Failure to do so may result in the project being changed from IR to a Standard Review Project. The IR also requires a substantial commitment on the part of OSHPD. Because of this a region will typically

not take on more than two IRs at any given time. This means that an IR may be reviewed by a different region than that in which the project is located. To the extent possible OSHPD will accommodate appropriate IR requests. However, in cases where staff are not available to service an IR adequately, OSHPD may refuse an IR and request that it be submitted as a Standard Review Project.

Careful planning is required for all segments at the start of an IR. Planning must also consider that elements are reviewed and approved in the order in which they are constructed. Moving elements from one segment to another or submitting them as a deferred approval/ACD after the start of an increment will be highly discouraged.

**PROCEDURE**

See Appendix A: Definitions for Terms Used in This PIN (that are not in Title 24 or OSHPD’s Master Glossary.)

Acronyms and Definitions assist the user in recognizing and identifying various acronyms and terms generally used in the Advisory Guide. Please refer to the Master Glossary of Acronyms and Definitions on the HCAI website at <https://hcai.ca.gov/document/master-glossary-of-acronyms-and-definitions/> for a list that includes terms used in this Advisory Guide, as well as in other OSHPD published documents. Other definitions may also be found in Title 24.

Access to the referenced codes and definitions for terms defined in Title 24 in this PIN, is provided through the California Building Standards Commission website (<https://www.dgs.ca.gov/en/BSC/Codes>) with active links to each publisher’s website for read-only public access versions of the codes. These codes are also known as California Code of Regulations, Title 24. Part 1, California Administrative Code Part 2, California Building Code, Volumes 1 and 2 Part 3, California Electrical Code (Note: Accessed through the National Fire Protection Association (NFPA), however, requires the creation of a user account to view the [Free Access – NFPA 70: 2022 California Electrical Code – NFPA 70 \(2020 NEC®\)](#) Part 4, California Mechanical Code Part 5, California Plumbing Code Part 6, California Energy Code Part 9, California Fire Code Part 10, California Existing Building Code.

The table which follows describes the IR process, including project parameters which must be considered, description of sequential steps through completion, required elements, and goals and best practices. For an overview of the IR process see Appendix D: Flow Chart for Integrated Review.

<b>INTEGRATED REVIEW</b>
<b>Project Parameters: The project parameters below are provided as a guideline and are subject to modifications on a project-by-project basis at the discretion of the Office.</b>
Project Cost: > \$50 million
Increments: 6
Phases: 3 per Increment + final Implementation documents.
Segments: 3 per Phase.

Submittals: 1 per segment. (Indicate which disciplines require review)
<b>Required Elements:</b>
Request for Integrated Review RIR (OSH-FD-122)
Integrated Review Plan (IRP) and Review Matrix
Presubmittal Meeting
Owner-approved Space and Operational Program prior to first submittal.
Integrated Review and Record Review Set
Plan Check Review Log
Current review completed before Back Check
For projects > \$100 million – BIM Modeling Software or at a minimum 3D Modeling Software.
For projects > \$100 million – Project Design Team Integrated with a CM/GC and major subcontractors for the MEP trades.
<b>Optional Elements:</b>
Plan Exchange Meetings

<b>IR – Process</b>
Upon acceptance of IR by the Office, assign OSHPD staff for the plan review of permit sets.
Owner to schedule the Presubmittal Meeting with the Office to review draft IRP and Review Matrix outlining tasks through approval of last CD or implementation submittal.
Submit final IRP including Review Matrix for Office review and approval.
Upon approval of IRP, submit first review with plan review application as scheduled within the approved Review Matrix.
Plan reviews shall consist of: Plan Exchange Meetings as needed: 1-hour discipline-to-discipline pre-review meetings for design consultants to clarify segments to reviewers or 1-hour discipline-to-discipline post-review meetings for reviewers to clarify comments to design consultants. Submittals and review per Review Matrix schedule. Rolling Reviews: All comments and conditional acceptance for each discipline will be entered in the OSHPD Plan Check Review Log and be available to design team. Major Code Issues must be immediately resolved with rolling reviews, emails, meetings, or teleconference.



## APPENDIX A

### DEFINITIONS FOR TERMS USED IN THIS PIN

**Acronyms and Definitions** assist the user in recognizing and identifying various acronyms and terms generally used in this PIN. Please refer to the “Master Glossary of Acronyms and Definitions – Acronyms and Definitions Used in OSHPD Published Documents” which is posted on the HCAI website at <https://hcai.ca.gov/document/master-glossary-of-acronyms-and-definitions/h> Other definitions may also be found in the [California Building Standards Code, Title 24, California Code of Regulations](#).

**Conditional Acceptance:** This is the Office’s acknowledgment that a certain segment, as currently shown, has been accepted by the Office for code compliance, with the condition that no changes that affect this acceptance are made to the project.

**Construction Documents:** Written, graphic and pictorial documents prepared or assembled for describing the design, location and physical characteristics of the elements of a project necessary for obtaining a building permit. This would include integrated phased review submittals.

**Comment Disposition:** Comments made by OSHPD staff or contractors are marked as:

Open = where a response is required.

Closed = where the issue is resolved and shown on the construction documents.

Resolved = where the issue is resolved but the construction documents have not been updated to show the changes required. Comments may be resolved where the change required is transmitted to the reviewer as a screenshot. Resolved comments are closed when the construction documents are revised in document refresh.

**Document Refresh:** At agreed-upon milestones, revised construction documents are uploaded to OSHPD (ePR). The ‘refreshed’ construction documents are then used to continue the review and close previously resolved comments.

**Integrated Review Meetings:** Meetings between the design team and plan reviewers to review progress, outstanding issues and major code issues.

**Integrated Review Plan (IRP):** IRP is an agreement between the Hospital governing authority and the Office that describes the project scope, plan review type, and corresponding fees. The IRP shall define the roles and responsibilities of the participants with the review matrix and the project schedule as the basis for the IRP. See Appendix C.

Note:

- The fee for integrated reviews shall be in accordance with CAC, Section 7-133(h) as being amended.
- Integrated reviews require a non-refundable fee of not less than 10% of the total fee and is due upon approval of the written agreement. This portion of the fee shall be deducted from the application fee specified in CAC, Section 7-133(a).
- The IRP may be terminated because of major design or scoping changes to the project, non-

compliance with the agreed upon schedule, and inadequate responsiveness to comments. If terminated, the project must be resubmitted using the traditional plan review approach. The Deputy Director or a Deputy Division Chief may terminate the IRP on behalf of the Office.

- Review turnaround times are negotiated.
- Rolling reviews may only be used within an IRP for resolution of Major Code Issues.
- Approval of increments require review and conditional acceptance of all items affecting the increment. If these required items are not to be constructed within an increment, they shall be clearly marked for reference only or be simultaneously submitted in another increment.

**Integrated Review Schedule:** Typically, a Gantt chart or bar graph showing the schedule for all phases of plan review and construction.

**Major Code Issue (MCI):** Non-compliant portion of the project that may require significant redesign. MCI's require resolution prior to subsequent submittals.

**Milestone:** A point in time defined by the percentage of completeness of a specified integrated design phase for the entire project (or increment for incremented projects), when specific segments are reviewed.

**Phase:** Represents level of completion of construction documents for a project or an increment. Based on 2007, version 1, AIA Guide for Integrated Project Delivery, and numbered for use in the OSHPD data tracking system (ePR) and the Review Matrix.

Integrated Phase	Traditional Phase	Segment*
1) Conceptualization/Criteria Design	Schematic Design	1a, 1b, 1c
2) Detailed Design	Design Development	2a, 2b, 2c
3) Pre-Implementation	<100% - Construction Documents	3a, 3b, 3c
4) Implementation Documents	100% - Construction Documents	4

**Note:** Phases and Segments shall be for each increment as needed.

\*More segments in phases are discouraged, however, they can be added if necessary and accepted by OSHPD.

**Phased Plan Review:** See Integrated Review.

**Plan Check Review Log:** A log in ePR shared by OSHPD and the design team that tracks comments and their resolution.

**Plan Exchange Meetings:** As-needed meetings between the design team and plan reviewers at major hand-offs of documents:

To the Office - Design team will clarify segments to be reviewed. From the Office - Review staff will clarify general scope of comments.

**Presubmittal Meeting:** This meeting is required per Part 1, Title 24, Section 7-121(c), for projects \$20 million and over. This meeting will be held after approval of the Request for Integrated Review. It

will include a presentation of the project, proposed increments, and a rough draft of the IRP, including a Review Matrix outlining all milestones, increments, phases and segments for the project.

**Review Matrix:** A tool to plan the entire Integrated Review process that includes the following items: Tasks, milestones, design times, review times, comment response times, construction times, and the priority needed for acceptance of certain segments.

**Note:** These are all considerations required for a well-thought-out matrix. See attached Sample Review Matrix in Appendix B.

**Record Review Set:** Review of all submittals to the Office shall be completed prior to changing any plans. Any changes because of responses to comments or design revisions shall be incorporated into the next back check submittal. These submittals are maintained within the Office Electronic Plan Review (ePR) system as record review sets.

**Request for Integrated Review (RIR) OSH-FD-122:** This form is available on the [OSHPD website](#) and is required to request that the Office utilize an Integrated (Phased) Review process for a specific project. It will give pertinent information for the Office to determine if an Integrated Review process is appropriate. The Office will try to keep the same assigned staff on the project for its entire duration to the extent possible.

**Rolling Review:** Plan review utilizing a plan check review log wherein plan review comments are available through ePR, design team responses are logged, and the Office acceptance is recorded. Comment resolution may be discussed in integrated review or plan exchange meetings or through collaboration tools in ePR; however, corrected plans shall not be submitted for back check until planned document refreshes at specific milestones.

**Segment:** Clearly defined part(s) of the building or building system that is substantially complete and submitted for review of specific elements (e.g. architectural layout, Fire/Life Safety conditions, accessibility). If submitted under an increment the segment must only include work to be constructed within that increment. Segments receive conditional acceptance, not plan approval. Building permits are for projects or increments; therefore, segments do not have associated building permits.



APPENDIX B  
SAMPLE REVIEW MATRIX

Sample Integrated Review Matrix

Phase	Segment	Estimated Submittal Date	Estimated Review Completion	Elements to be Reviewed	Disciplines Required				
					ARCH	STRUCT	MECH	ELEC	FLSO
<b>INCREMENT 1 - SITE UTILITIES AND SHORING</b>		<b>12/01/20</b>	<b>08/21/21</b>						
<b>PHASE 3 - PRE-IMPLEMENTATION</b>		<b>12/01/20</b>	<b>07/13/21</b>						
3	3a Site Utilities	12/01/20	07/13/21	Site fire service plan (OSHPD review) Site Utility Plan - Domestic water, sewer, med gas, elec/telecom and storm drain (concurrent OSHPD and city review)	X		X	X	X
	3b Shoring	05/03/21	07/13/21	Temporary egress during tower construction Shoring for construction of hospital expansion		X			
<b>PHASE 4 - IMPLEMENTATION</b>		<b>07/17/21</b>	<b>08/14/21</b>						
4	4 Final Increment #1 Package	07/17/21	08/14/21	Review drawings against segmental conditional approvals	X	X	X	X	X
	Permit Process	08/15/21	08/21/21	Final clean set for approval stamping					
<b>INCREMENT 2 - FOUNDATION AND SUPERSTRUCTURE</b>		<b>07/03/21</b>	<b>06/15/22</b>						
<b>PHASE 1 - CONCEPTUAL/CRITERIA</b>		<b>07/03/21</b>	<b>08/18/21</b>						
1	1a Detailed Approach and Loading	07/03/21	08/18/21	Detailed approach to design including sample calculations Dead load, live load, seismic load and loading maps Architectural plans (for reference only)		X			
<b>PHASE 2 - DETAILED DESIGN</b>		<b>08/28/21</b>	<b>11/17/21</b>						
2	2a Gravity Framing	08/28/21	11/17/21	Application of Approach Gravity framing model Gravity framing details		X			
	2b Lateral Framing	08/28/21	11/17/21	Application of Approach Global modeling issues Massing Moment frame beam and column sizing		X			
<b>PHASE 3 - PRE-IMPLEMENTATION</b>		<b>11/27/21</b>	<b>02/16/22</b>						
3	3a Diaphragm/Chords/Drags/Connections Typical Details and Specifications	11/27/21	02/16/22	Diaphragm, chord and collector analysis Diaphragm, chord and collector design Special moment frame connection design Chord and collector connection design Slab Dimension control plans - floor openings and edge of slab Existing Building structural modifications	X	X			
	3b Foundation Design/Waterproofing	11/27/21	02/16/22	Foundation, retaining wall - model, details, general notes Specifications (structural divisions 1 thru 5) Subgrade waterproofing and details MEP utility under-slab and penetrations through basement walls Architectural, MEP floor plans (for reference only)	X	X	X	X	X
<b>PHASE 4 - IMPLEMENTATION</b>		<b>02/26/22</b>	<b>06/01/22</b>						
4	4 Final Increment #2 Package	02/26/22	06/01/22	Typical details, general notes Structural specifications Miscellaneous design items not reviewed in prior segments	X	X	X	X	X
	Permit Process	06/04/22	06/14/22	Final clean set for approval stamping					
<b>INCREMENT 3 - BUILDING ENCLOSURE, VERTICAL CIRCULATION</b>		<b>11/01/21</b>	<b>10/12/22</b>						
<b>PHASE 3 - PRE-IMPLEMENTATION</b>		<b>11/01/21</b>	<b>08/24/22</b>						
3	3a Building Enclosure & Vertical Circulation	11/01/21	03/29/22	Architectural Core & Shell Plans Edge of slab firestopping Elevator and Stair plans, sections, details and calculations Exterior seismic joint assemblies and details Building mounted signage	X	X			X
	3b Curtain Wall, Screen Wall and Window Washing	04/02/22	06/22/22	Building connection plans, framing, details and calculations Curtain wall and screen wall structural drawings and calculations Exterior wall embeds	X	X			
	3c Exterior Framing	06/11/22	08/24/22	Window washing davits and equipment layout, anchorage and calculations Exterior light gage metal framing drawings and calculations		X			
<b>PHASE 4 - IMPLEMENTATION</b>		<b>09/02/22</b>	<b>10/05/22</b>						
4	4 Final Increment #3 Package	09/02/22	10/05/22	Review drawings against segmental conditional approvals	X	X			X
	Permit Process	10/08/22	10/12/22	Final clean set for approval stamping					

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Phase	Segment	Estimated Submittal Date	Estimated Review Completion	Elements to be Reviewed	Disciplines Required					
					ARCH	STRUCT	MECH	ELEC	FLSD	
<b>INCREMENT 4 - INTERIOR CONSTRUCTION &amp; MEP SYSTEMS</b>		<b>11/01/20</b>	<b>12/21/22</b>							
<b>PHASE 1 - CONCEPTUAL/CRITERIA</b>		<b>11/01/20</b>	<b>01/31/21</b>							
1	1a	Perliminary Submittal	11/01/20	01/31/21	Functional Program Arch, Struct, Mech, Plumb, Elec preliminary design drawings Basis of Design documents Preliminary Fire/Life Safety analysis plans - smoke compartments, exiting Plumbing fixture counts	X	X	X	X	X
<b>PHASE 2 - DETAILED DESIGN</b>		<b>09/25/21</b>	<b>12/18/21</b>							
2	2a	Fire/Life Safety Package	09/25/21	12/18/21	Complete Fire/Life Safety Plans including: occupant load analysis, exit calculation, wall ratings, wall assembly and head of wall details Engineering judgements Site Accessibility Plan	X				X
	2b	Accessibility Compliance Package	09/25/21	12/18/21	Architectural floor plans - enlarged toilet/shower rooms, typical workstations, interior elevations with accessory mounting configurations	X				
	2c	Hazardous Materials Inventory	09/25/21	12/18/21	Hazardous material inventory					X
<b>PHASE 3 - PRE-IMPLEMENTATION</b>		<b>04/11/22</b>	<b>11/19/22</b>							
3	3a	Interior Build-Out	04/11/22	11/19/22	Complete Arch, Mech, Plumb, Elec interior build-out drawings Low voltage including nurse call, public address, audio/visual and security Pneumatic Tube Fire Sprinkler Fire Alarm Specifications	X		X	X	X
	3b	Interior Framing and Structural Details	07/31/22	11/19/22	Misc. interior support, framing and structural details		X			
<b>PHASE 4 - IMPLEMENTATION</b>		<b>11/20/22</b>	<b>12/13/22</b>							
4	4	Final Increment #4 Package	11/20/22	12/13/22	Review drawings against segmental conditional approvals	X	X	X	X	X
		Permit Process	12/14/22	12/21/22						
<b>INCREMENT 5 - EQUIPMENT ANCHORAGE</b>		<b>09/19/22</b>	<b>02/28/23</b>							
<b>PHASE 3 - PRE-IMPLEMENTATION</b>		<b>09/19/22</b>	<b>01/31/23</b>							
3	3a	Special Seismic Certification	09/19/22	12/11/22	Special seismic certification MEP equipment anchorage details and calculations Medical equipment anchorage, details and calculations Furniture anchorage details and calculations Casework anchorage details and calculations Modular ceiling system details and calculations		X			
	3c	Equipment Anchorage	09/19/22	01/31/23			X			
<b>PHASE 4 - IMPLEMENTATION</b>		<b>02/07/23</b>	<b>02/21/23</b>							
4	4	Final Increment #5 Package	02/07/23	02/21/23	Review drawings against segmental conditional approvals		X			
		Permit Process	02/22/23	02/28/23						
<b>INCREMENT 6 - SEISMIC BRACING</b>		<b>06/01/22</b>	<b>04/12/23</b>							
<b>PHASE 3 - PRE-IMPLEMENTATION</b>		<b>06/01/22</b>	<b>03/09/23</b>							
3	3a	Seismic Bracing Floors B thru 3	06/01/22	02/10/23	MEP seismic bracing for floors B thru 3		X			
	3c	Seismic Bracing Floors 4 thru 6	02/11/23	03/09/23	MEP seismic bracing for floors 4 thru 6		X			
<b>PHASE 4 - IMPLEMENTATION</b>		<b>03/10/23</b>	<b>04/07/23</b>							
4	4	Final Increment #6 Package	03/10/23	04/07/23	Review drawings against segmental conditional approvals		X			
		Permit Process	04/08/23	04/12/23						

**Notes:**

1. Submittals should be in an order such that the segments submitted to OSHPD are **substantially complete** and provide enough information in conjunction with prior submittals to allow for a complete review. Segments must only include work to be constructed within that increment. Information provided that is not to be constructed within the submitted increment must be clearly marked for reference only or be simultaneously submitted in another increment.
2. Phase: 1) Conceptualization/Criteria Design, 2) Detailed Design, 3) Pre-Implementation, 4) Implementation Documents, 5) Construction, 6) Agency Review/Final Buyout, and 7) Closeout. For incremental projects, phases shall be for each increment.

**APPENDIX C**

**SAMPLE AGREEMENT**

**INTEGRATED REVIEW PLAN**

By and Between

DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION,  
OFFICE OF STATEWIDE HOSPITAL PLANNING & DEVELOPMENT

And

(Hospital governing authority name here)

Recitals

- A. California Health and Safety Code Section 129765(b) allows the Office of Statewide Hospital Planning and Development (OSHPD) to enter into a written agreement with (Hospital governing authority name here) in order to engage in the Integrated Review submittal and approval process of hospital plans.
- B. (Hospital governing authority name here), and (description i.e. California nonprofit public benefit corporation here) desires to participate in the Integrated Review submittal and approval process of hospital plans.
- C. By this Integrated Review Plan (IRP), OSHPD and (Hospital governing authority name here) hereby agree as follows:

Agreement

- 1) This IRP covers the submittal and approval of structural, mechanical, electrical, fire and life safety, and architectural plans for the (Project Name and Address here).
- 2) The Project shall include one building only under this IRP. The building is described as the proposed: (Project Name here) hospital building.  
Note: Only one architectural building per IRP for Incremental projects.
- 3) This IRP shall cover structural, mechanical, electrical, fire and life safety, and architectural design of the Project. Attached hereto as Exhibit 1 is the (Hospital governing authority name here) Review Matrix which specifies the milestones, tasks, increments and segments, with anticipated submittal and review completion dates for the entire Project.

4) For Integrated Review (IR)

At the end of each OSHPD integrated review submittal and review, segments may be conditionally approved. The plans shall receive final approval only upon submittal and final review of all the remaining project plan segments and shall be in accordance with California Health & Safety Code Section 129765(a) and the California Administrative Code (CAC), Title 24, Part 1, Section 7-130.

In accordance with CAC Section 7-133(h) the (Hospital governing authority name here) agrees to pay 1.95% of the estimated construction cost per paragraph 5). The final fee shall be based upon the determination of the final actual construction cost and shall be due prior to occupancy being granted.

5) Use one of the options below:

a) For IR with Increments

(Hospital governing authority name here) agrees to pay an integrated review fee of 1.95% of the estimated construction cost. This Integrated Review fee shall not exceed the total Project application fee. A nonrefundable fee of 10 percent of the fee shall be due upon approval of the written agreement and shall be deducted from the application fee specified in Section 7-133(h) or for fees pursuant to Section 7-133(e) for incremental reviews. In accordance with CAC, Section 7-133, (Hospital governing authority name here) agrees to pay 1.95% x (estimated construction cost of each Increment) at the first submission of Construction Documents (or per agreed upon schedule) for each increment submittal. The final fee shall be based upon the determination of the final actual construction cost and shall be due prior to occupancy being granted.

b) For IR with No Increments

(Hospital governing authority name here) agrees to pay a phased plan review fee of 100% of the total Project Application Fee based on 1.95% of the estimated cost of construction. This Integrated Review fee shall not exceed the total Project application fee. A nonrefundable fee of 10 percent of the fee shall be due upon approval of the written agreement and shall be deducted from the application fee specified in Section 7-133(h). In accordance with CAC, Section 7-133, (Hospital governing authority name here) agrees to pay 1.95% x (estimated construction cost of project) at the first submission of Construction Documents (or per agreed upon schedule). The final fee shall be based upon the determination of the final actual construction cost and shall be due prior to occupancy being granted.

6) OSHPD and (Hospital governing authority name here) shall engage in an ongoing review of the Project as it proceeds to ensure that the Project is yielding the intended results.

7) Failure of (Hospital governing authority name here) to meet Project requirements including the deadlines set forth in Exhibit 1 may result in the termination of this IRP, and the Project being removed from the Integrated Review process and returned to the regular plan review process of OSHPD. Such failure shall be determined to occur at the sole discretion of OSHPD. In the event this IRP is terminated, (Hospital governing authority name here) shall pay to OSHPD all actual costs incurred by OSHPD in performing under this IRP.

8) No amendment to this agreement is valid unless in writing and signed by both parties. No oral agreement or understanding not incorporated in this agreement is binding on the parties.

9) When written notice is required, such notice shall be made as follows: OSHPD

Attn: (Deputy Director or Deputy Division Chief)

Office of Statewide Hospital Planning and  
Development 2020 West El Camino Avenue, Suite 800  
Sacramento, CA 95833

Hospital Governing Authority Name

(Hospital governing authority name here) Address

(Hospital governing authority name here) Phone

The contract managers for this IRP are as follows:

a) OSHPD: \_\_\_\_\_,  
Senior Architect Telephone Number:  
Address:

b) (Hospital governing authority name here): \_\_\_\_\_,  
Project Director Telephone Number:

10)Address: This IRP is effective on the date last signed by both parties. However, OSHPD is under no obligation to commence performance under this IRP until such time as the first segment is submitted to the Office and the fees required pursuant to Paragraph 7 are paid.

Hospital Governing Authority Name  
And Description

By: \_\_\_\_\_  
(Name of Hospital governing authority name here) Representative  
Project Director

\_\_\_\_\_  
Date

Office of Statewide Hospital Planning and Development

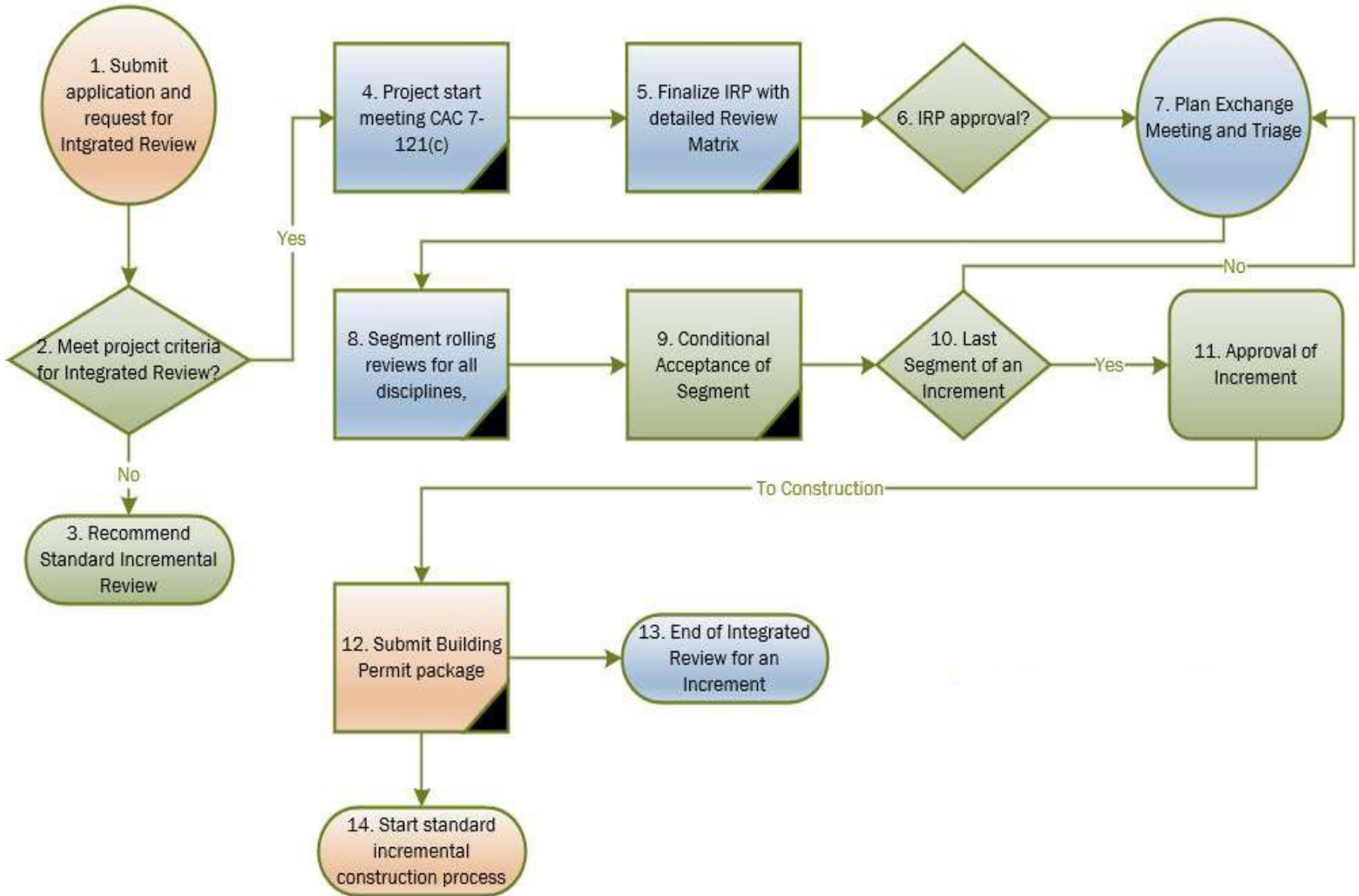
By: \_\_\_\_\_  
(Name of Deputy Director or Deputy Division Chief), (Deputy  
Director or Deputy Division Chief)

State of California  
Office of Statewide Hospital Planning and Development

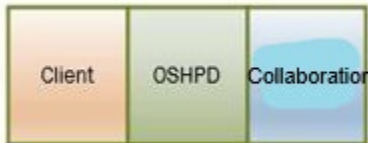
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APPENDIX D

Flow Chart for Integrated Review



LEGEND



**REVISION HISTORY**

- 04-29-2026 First revision. The purpose and background sections have been reorganized to provide a better understanding of the purpose and development of the IR program. Access to code references is provided as well as reorganization of the document for better flow. The policy section was expanded to better define the kinds of projects that OSHPD deems suitable for its discretionary IR program.
- 07-30-2021 First issued.