



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
PO Box 47852 • Olympia, Washington 98504-7852

June 12, 2019

CERTIFIED MAIL # 7017 3380 0000 0863 8734

Rudy Lai
DaVita HealthCare Partners
32275 – 32nd Avenue South
Federal Way, Washington 98001

RE: CN Application #18-61

Dear Mr. Lai:

Enclosed is Certificate of Need #1782 issued to DaVita HealthCare Partners approving the establishment of a 17-station dialysis facility in Spokane, within Spokane County planning area #2.

The certificate is not an approval for any other local, federal, or state statutes, rules, or regulations. Such a project may also need Department of Health approval for a construction plan and facility licensing or certification, as well as other federal or local jurisdiction permits.

The Certificate of Need is valid for two years. The project must begin during this time. If there is substantial and continuing progress, we may extend the certificate for one six month period. For an extension, you must submit an extension request at least 120 days before the expiration. You cannot begin a project after the expiration date.

This decision may be appealed. The appeal options are listed below.

Appeal Option 1:

Any person with standing may request a public hearing to reconsider this decision. The request must state the specific reasons for reconsideration in accordance with Washington Administrative Code 246-310-560. A reconsideration request must be received within 28 calendar days from the date of the decision at one of the following addresses:

Mailing Address:
Department of Health
Certificate of Need Program
Mail Stop 47852
Olympia, WA 98504-7852

Physical Address:
Department of Health
Certificate of Need Program
111 Israel Road SE
Tumwater, WA 98501

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Appeal Option 2:

Any person with standing may request an adjudicative proceeding to contest this decision within 28 calendar days from the date of this letter. The notice of appeal must be filed according to the provisions of Revised Code of Washington 34.05 and Washington Administrative Code 246-310-610. A request for an adjudicative proceeding must be received within the 28 days at one of the following addresses:

Mailing Address:

Department of Health
Adjudicative Service Unit
Mail Stop 47879
Olympia, WA 98504-7879

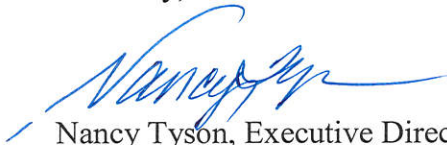
Physical Address

Department of Health
Adjudicative Service Unit
111 Israel Road SE
Tumwater, WA 98501

We monitor projects until completed or the expiration date, whichever occurs last. We do this with quarterly progress reports. At least 30 days before the report's due date, you will receive a form to complete and return.

If you have any questions, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,



Nancy Tyson, Executive Director
Health Facilities and Certificate of Need
Washington State Department of Health

Enclosure



This Certificate is granted under the authority of RCW 70.38. Issuance of this Certificate does not constitute approval under any other local, federal or state statute, implementing rules and regulations. Examples where additional approval may be necessary include, but are not limited to, construction plan approval through the Construction Review Unit of the Department of Health, facility licensing/certification through the Department of Social and Health Services or Department of Health, and other federal or local jurisdiction permits.

Certificate of Need #1782 is issued to:

Applicant's Legal Name: DaVita, Inc.
Applicant's Address: 32275 – 32nd Avenue South, Federal Way, Washington 98001
Facility Type End State Renal Disease Facility
Project Type End State Renal Disease Facility
Facility Name: DaVita Indian Trail Dialysis Center
Facility Address: Parcel #26225.0152, Spokane, Washington 99218

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED JUNE 6, 2019 (CN APP # 18-61)

Project Description

This certificate approves the establishment of a 17-station dialysis center to be located at Parcel #26225.0152 in Spokane [99218] within Spokane County planning area #2. The table below provides a breakdown of the total number of stations at project completion.

	CMS Certified Stations	Stations Counted in Methodology
General Use In-Center Stations	15	15
Permanent Bed Station	1	1
Private Isolation Station	1	0
Total Stations	17	16

Services to be provided at the new dialysis center include in-center hemodialysis, isolation capabilities, and a permanent bed station. There will also be a patient shift starting after 5pm.

Service Area

Spokane County Planning Area #2

Conditions

1. Approval of the project description as stated above. DaVita, Inc. further agrees that any change to the project as described in the project description is a new project that requires a new Certificate of Need.
2. DaVita, Inc. shall finance this project consistent with the financing described in the application.
3. DaVita, Inc. shall provide an executed patient transfer agreement with an area partner prior to opening.

Approved Capital Expenditure

The total capital expenditure for this project is \$2,551,523

This Certificate authorizes commencement of the project from June 12, 2019 to June 12, 2021 unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: June 12, 2019

Nancy Tyson, Executive Director
Health Facilities and Certificate of Need
Washington State Department of Health

This Certificate is not transferable