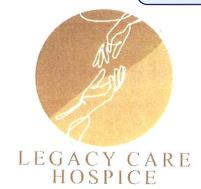
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RECEIVED

By Certificate of Need at 3:02 pm, Dec 30, 2024



December 28, 2024

Eric Hernandez, Program Manager Certificate of Need Program Via email: eric.hernandez@doh.wa.gov; DOH HSQA CHS CON <CN@doh.wa.gov>

Dear Mr. Hernandez:

Please accept this letter as Legacy Care Hospice, LLC's Letter of Intent to establish a Medicare certified/Medicaid eligible hospice agency. Per WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed: Legacy Care Hospice, LLC proposes to establish a Medicare certified/Medicaid eligible hospice agency.

2. Estimated Cost of the Proposed Project: The estimated cost of the project is \$40,000.

3. Description of the Service Area:

The primary service area for the hospice agency will be Thurston County.

Should you have any questions, please contact Judith Grey our consultant at 201-919-4905.

Sincerely,

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Kevin Basara, RN CHPN Principal