



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

May 19, 2014

CERTIFIED MAIL # 7011 1570 0002 7809 5704

David D. Natali, Regional Operations Director
DaVita HealthCare Partners, Inc.
32275 32nd Avenue South
Federal Way, Washington 98001

RE: CN14-21

Dear Mr. Natali:

Enclosed is Certificate of Need #1528 issued to DaVita HealthCare Partners, Inc. approving the establishment of DaVita North Federal Way Dialysis Center in King County planning area #5. At project completion, DaVita Rainier View Dialysis Center will have ten approved stations as noted on the certificate.

The certificate is not 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

Other Than By Mail:
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:

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

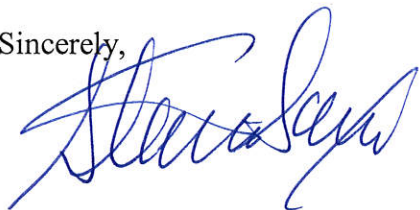
Other Than By Mail

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,



Steven M. Saxe, FACHE
Director, Community Health Systems

Enclosure

cc: Department of Health, Investigations and Inspections Office
Department of Health, Construction Review Services



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 #1528 is issued to:

Legal Name of Applicant: DaVita HealthCare Partners, Inc.
Address of Applicant: 2000 – 16th Street, Denver , Colorado 80202
Type of Service: End Stage Renal Disease Facility
Facility Name: DaVita North Federal Way Dialysis Center
Facility Address: 27320 Pacific Highway South, Federal Way, Washington 98003

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT’S RECORD AND EVALUATION DATED APRIL 14, 2014, (CN App #14-21)

Project Description:

This certificate approves the establishment of a 12 station dialysis facility in Federal Way within King County planning area #5. At project completion, the dialysis center is approved to certify and operate 12 dialysis stations. Services to be provided at DaVita North Federal Way Dialysis Center includes hemodialysis with treatment shifts beginning after 5:00 p.m., a permanent bed station, and an isolation station. A breakdown of all 12 stations is below:

DaVita North Federal Way Dialysis Center

Private Isolation Room	1
Permanent Bed Station	1
Other In-Center Stations	10
Total	12

After the 12 stations are relocated from the 25 station DaVita Federal Way Community Dialysis Center, that facility is approved to certify and operate the remaining 13 stations. A breakdown of the remaining 13 stations is shown below.

DaVita Federal Way Community Dialysis Center

Private Isolation Room	1
Permanent Bed Station	1
Training Station	1
Other In-Center Stations	10
Total	13

Service Area

King County Planning Area #5

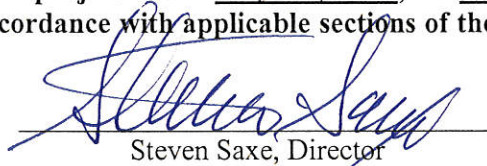
Conditions Listed on Page 2

Approved Capital Expenditure

The approved capital expenditure associated with this project is \$1,724,627.

This Certificate authorizes commencement of the project from May 19, 2014, to May 19, 2016, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: May 19, 2014



Steven Saxe, Director

This Certificate is not transferable

Certificate of Need #1528

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Conditions:

1. DaVita HealthCare Partners, Inc. agrees with the project description as stated above. DaVita HealthCare Partners, 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 HealthCare Partners, Inc. must decertify 12 stations from the 25 station DaVita Federal Way Community Dialysis Center no later than 30 days following the opening of the new 12 station dialysis center. The DaVita Federal Way Dialysis Center would be approved to certify and operate 13 dialysis stations.
3. Prior to providing services, DaVita HealthCare Partners, Inc. will provide a complete copy of its charity care policy with all addendums for review and approval.
4. Prior to providing services, DaVita HealthCare Partners, Inc. will provide an executed copy of the Patient Transfer Agreement for the department's review and approval. The executed transfer agreement must be consistent with the draft provided in the application.