



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

June 11, 2014

Theresa Boyle,
MultiCare Health System
Post Office Box 5299 – MS315-L4-SBD
Tacoma, Washington 98415

DOR #14-07-Amended

Dear Ms. Boyle:

We have completed our review of your supplemental information and documentation regarding the pediatric level of care for Tacoma General Hospital based on the February 2013 level of care guidelines. Below is the Certificate of Need Program's amended conclusion.

INFORMATION CONSIDERED

- Revised Code of Washington (RCW) 70.38
- Washington Administrative Code (WAC) 246-310
- Washington State Perinatal and Neonatal Level of Care Guidelines, February 2013
- MultiCare Tacoma General Hospital's August 19, 2013, Determination of Reviewability (DOR) request
- MultiCare Tacoma General Hospital's supplemental information received on December 20, 2013
- MultiCare Tacoma General Hospital's supplemental information received during our March 31, 2014, meeting
- Certificate of Need Program meeting notes from November 12, 2013, meeting with representative from MultiCare Tacoma General Hospital
- Certificate of Need Program meeting notes from March 14, 2014, meeting with representative from MultiCare Tacoma General Hospital
- Data provided by Craig Jackson, MD received on October 31, 2013, November 8, 2013, December 2, 2013, January 23, 2014
- Data provided by Bat-Sheva Stein received on October 25, 2013, and February 10, 2013
- American Academy of Pediatrics *Policy State Levels of Care Criteria*
- Certificate of Need historical files for MultiCare Tacoma General Hospital

Theresa Boyle,
MultiCare Health System
DOR #14-07-Amended
June 11, 2014
Page 2 of 2

CONCLUSION

Based on the totality of information considered, MultiCare Tacoma General Hospital is recognized as a level IV provider as described in the February 2013 level of care guidelines. The department further recognizes that MultiCare Tacoma General Hospital has 40 level III neonatal intensive care beds at the hospital and all 40 beds would be available for level IV use. Please note that any increase in level IV pediatric beds beyond 40 requires prior Certificate of Need review and approval.

APPEAL OPTION

This decision may be appealed. You 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:

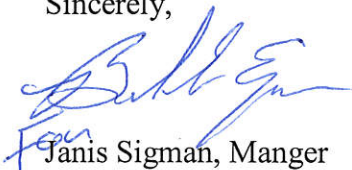
Department of Health
Adjudicative Service Unit
Mail Stop 47879
Olympia, WA 98504-7879

Other Than By Mail

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

Please call me directly at (360) 236-2955 if you have any questions or you would like to meet to discuss this determination.

Sincerely,



Janis Sigman, Manger
Certificate of Need Program
Community Health Systems

cc: Department of Health, Investigations and Inspections Office
Bat-Sheva Stein, Department of Health
Craig Jackson, MD