



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

February 9, 2016

CERTIFIED MAIL #7015 0640 0000 6441 5836

Casey Stowell, Regional Vice President
Fresenius Medical Care-Pacific Northwest Region
7780 Southwest Mohawk Place
Tualatin, Oregon 97062

RE: DOR #16-16

Dear Mr. Stowell:

Enclosed is Replacement Authorization (RA) #086 issued to Fresenius Medical Care approving the replacement of FMC-Columbia Basin Dialysis Center to a new site within Benton County. At project completion, FMC-Columbia Basin Dialysis Center will have 13 approved stations as noted on the certificate and described in the application.

Replacement Authorization #086 is valid for two years. The project must begin during this time. If there is substantial and continuing progress, we may extend the authorization for one six month period. For an extension, you must submit an extension request at least 120 days before the expiration date. You cannot begin a project after the expiration date.

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

Appeal Option 1:

You or any interested or affected person 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

Casey Stowell, Regional Vice President
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Appeal Option 2:

You or any affected 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, Building 6
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 me at (360) 236-2955.

Sincerely,



Janis Sigman, Manager
Certificate of Need Program
Community Health Systems

Enclosure



In accordance with RCW 70.38 and implementing rules and regulations, 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.

Replacement Authorization #086 is issued to:

Current Facility Owner: Fresenius Medical Care
Current Facility Name: FMC-Columbia Basin Dialysis Center
Current Facility Address: 510 North Colorado, #B, Kennewick, Washington 99336
Current County Location: Benton County
Current Number of Stations: 13

Replacement Facility Information

Replacement Facility Owner: Fresenius Medical Care
Replacement Facility Name: FMC-Columbia Basin Dialysis Center
Replacement Facility Address: 6600 West Rio Grande Avenue, Kennewick, Washington 99336
Replacement Facility County Location: Benton County
Replacement Facility Number of Stations: 13
Capital Expenditure of Project: \$1,869,000

Description of Approved Project

Fresenius Medical Care is approved to relocate FMC-Columbia Basin Dialysis Center to a new site in Benton County as allowed under WAC 246-310-289, provided that Fresenius Medical Care agrees to specific conditions. On February 5, 2016, Fresenius Medical Care agreed to the following conditions.

Conditions of Exemption Approval

- 1) At project completion, FMC Columbia Basin Dialysis Center is approved to certify and operate 13 dialysis stations at the new site.

This Replacement Authorization is effective from February 9, 2016, through February 9, 2018, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Issued: February 9, 2016

A handwritten signature in blue ink that reads "Janis R. Sigman".

Janis Sigman
Manager, Certificate of Need Program
Community Health Systems

This Replacement Authorization is not transferable.