



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

June 8, 2016

CERTIFIED MAIL #7012 1010 0000 5625 0549

Tod Dunfield, Administrator
Providence St. Joseph Care Center
17 East 8th Avenue
Spokane, Washington 99202

RE: DOR #16-31

Dear Mr. Dunfield:

Enclosed is Renovation Authorization (RA) #087 issued to Providence Health & Services-Washington approving the renovation of Providence St. Joseph Care Center located in Spokane, within Spokane County. At project completion, Providence St. Joseph Care Center will continue to have a maximum of 162 skilled nursing beds as noted on the certificate.

Renovation Authorization #087 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

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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:

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, 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

cc: Department of Social and Health Services
Department of Health, Construction Review Services #60642946



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.

Renovation Authorization #087 is issued to:

Existing Licensee: Providence Health & Services-Washington
Current Facility Name: Providence St. Joseph Care Center
Current Facility Address: 17 East 8th Avenue, Spokane, Washington 99202
Current County Location: Spokane
Current Number of Licensed Beds: 162 licensed and zero banked

Renovation Facility Information

Renovation Facility Licensee: Providence Health & Services-Washington
Renovation Facility Name: Providence St. Joseph Care Center
Renovation Facility Address: 17 East 8th Avenue, Spokane, Washington 99202
Renovation Facility County Location: Spokane
Renovation Facility Number of Beds: 162
Capital Expenditure of Project: \$13,900,000

Project Description

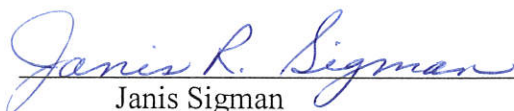
This Renovation Authorization approves the renovation of Providence St. Joseph Care Center, a 162-bed Medicare and Medicaid certified nursing home at its current site in Spokane County. The estimated cost of the project is \$13,900,000.

Conditions:

1. Approval of the project description as stated above. Providence Health & Services-Washington further agrees that any change to the project as described in the project description is a new project that requires a new Renovation Authorization.
2. The renovated nursing home will continue to participate in both the Medicare and Medicaid programs.

This Renovation Authorization is effective from June 8, 2016, through June 8, 2018, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Issued: June 8, 2016


Janis Sigman
Manager, Certificate of Need Program
Community Health Systems

This Renovation Authorization is not transferable.