



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

October 4, 2016

CERTIFIED MAIL #7008 1830 0002 8022 0809

Kelly Callahan, President
Careage
4411 Point Fosdick Drive, #203
Gig Harbor, Washington 98335

RE: DOR #17-03

Dear Mr. Callahan:

Enclosed is Replacement Authorization (RA) #088 issued to Mission Healthcare at Bellevue, JV approving the partial replacement of Mission Healthcare at Bellevue to a new site within Renton, within King County. At project completion, the new facility in Renton will have a maximum of 60 skilled nursing beds as noted on the certificate.

Replacement Authorization #088 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 appeal option is listed below.

Appeal Option:

You or 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:
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

Kelly Callahan, President
Careage
DOR #17-03
October 4, 2016
Page 2 of 2

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 #088 is issued to:

Existing Licensee: Mission Healthcare at Bellevue, JV
Current Facility Name: Mission Healthcare at Bellevue
Current Facility Address: 2424 – 156th Avenue Northeast
 Bellevue, Washington 98007
Current County Location: King
Current Number of Licensed Beds: 129 licensed and zero banked

Replacement Facility Information

Replacement Facility Licensee: Mission Healthcare at Bellevue, JV
Replacement Facility Name: Not Yet Named
Replacement Facility Address: 17420 – 106th Place Southeast
 Renton, Washington 98055
Replacement Facility County Location: King
Replacement Facility Number of Beds: 60
Capital Expenditure of Project: \$20,690,000

Project Description

This Replacement Authorization approves the replacement of 60 of the 129 licensed and Medicare and Medicaid certified beds at Mission Healthcare at Bellevue to a new site in Renton. The table below shows the number of licensed beds at each site after project completion.

New Replacement Facility [No name yet]	
Address	# of Licensed Beds
17420 – 106 th Place Southeast Renton, Washington 98055	60

Mission Healthcare at Bellevue	
Address	# of Licensed Beds
2424 – 156 th Avenue Northeast Bellevue, Washington 98007	69

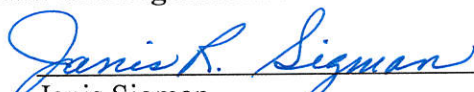
Service Area
King County

Conditions

1. Approval of the project description as stated above. Mission Healthcare at Bellevue, JV further agrees that any change to the project as described in the project description is a new project that requires a new Replacement Authorization.
2. Mission Healthcare at Bellevue will continue to participate in both the Medicare and Medicaid programs.
3. The new replacement nursing home will participate in both the Medicare and Medicaid programs.

This Replacement Authorization authorizes commencement of the project from October 4, 2016, through October 4, 2018, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Issued: October 4, 2016


 Janis Sigman
 Manager, Certificate of Need Program
 Community Health Systems

This Replacement Authorization is not transferable.