



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
PO Box 47852•Olympia, Washington 98504-7852

August 18, 2017

CERTIFIED MAIL # 7014 2120 0002 7589 9346

Brian W. Grimm
Perkins Coie LLP
1201 Third Avenue, Suite 4900
Seattle, WA 98001

RE: Certificate of Need Application #17-17

Dear Mr. Grimm:

Enclosed is Certificate of Need #1611 issued to DaVita HealthCare Partners, Inc., approving the establishment of a six station kidney dialysis facility in the city of Wapato within Yakima County ESRD planning area.

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

Physical Address:
Department of Health
Certificate of Need Program
111 Israel Road SE
Tumwater, WA 98501

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:

<u>Mailing Address:</u>	<u>Physical Address</u>
Department of Health	Department of Health
Adjudicative Service Unit	Adjudicative Service Unit
Mail Stop 47879	111 Israel Road SE
Olympia, WA 98504-7879	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,



Steve Bowman, PhD, MHA
Director, Office of Community Health Systems

Enclosure



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 #1611 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 Dialysis Facility
Facility Name: DaVita Wapato Dialysis Center
Facility Address: 502 W. 1ST Street, Wapato, Washington 98951

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED AUGUST 7, 2017 (CN App #17-17)

Project Description

This certificate approves the construction of a new six station dialysis center in the city of Wapato within Yakima County ESRD planning area. At project completion, the dialysis center is approved to certify and operate six dialysis stations. Services to be provided at DaVita Wapato Dialysis Center include in-center hemodialysis, training and support for peritoneal dialysis, emergency backup for other dialysis, hemodialysis treatment shifts beginning after 5:00 p.m., a permanent bed station, and a dedicated isolation/private room. A breakdown of the approved three stations is shown below:

DaVita Wapato Dialysis Center

Private Isolation Room	1
Permanent Bed Station	1
Other In-Center Stations	4
Total	6

Service Area
Yakima County

Conditions
Conditions Identified on Page Two

Approved Capital Expenditure

The total cost of this project is \$1,929,681. Of this amount, \$1,819,681 is DaVita Healthcare Partners, Inc. approved cost. The remaining \$110,000 is the amount the landlord will incur.

This Certificate authorizes commencement of the project from August 18, 2017 to August 18, 2019 unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: August 18, 2017

Steve Bowman, PhD, MHA
Director, Office of Community Health Systems

This Certificate is not transferable

Certificate of Need #1611

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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. Prior to providing services, DaVita Healthcare Partners, Inc. will provide an executed copy of the medical director agreement for the department's review and approval. The executed medical director agreement must be consistent with the draft provided in the application.
3. Prior to commencement DaVita Healthcare Partners, Inc. will provide an executed copy of the lease agreement for the department's review and approval. The executed lease agreement must be consistent with the draft provided in the application.
4. Prior to providing services at DaVita Wapato Dialysis Center, DaVita Healthcare Partners, Inc. will provide an executed copy of the patient transfer agreement for the department's review and approval. The executed patient transfer agreement must be consistent with the draft provided in the application.