



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

June 16, 2011

CERTIFIED MAIL # 7008 1300 0000 7203 0009

Tracy Kasnic, Vice President, Patient Care Services
Central Washington Hospital
1201 South Miller Street, Box 1887
Wenatchee, Washington 98807

Dear Ms. Kasnic:

Enclosed is Certificate of Need #1445 issued to Central Washington Hospital approving an eight station dialysis facility in East Wenatchee, within Douglas County. At project completion, Douglas County Dialysis Unit will have eight approved stations as noted on the certificate.

With issuance of Certificate of Need #1445, Certificate of Need #1431 issued on November 5, 2010, to Central Washington Hospital is void. Please return Certificate of Need #1431 to the department in the enclosed, self addressed envelope.

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. 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 Clerk Office
310 Israel Road SE, Building 6
Tumwater, WA 98501



Tracy Kasnic, Central Washington Hospital
Certificate of Need App #10-09
June 16, 2011
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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 question, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,



For Steven M. Saxe, FACHE
Director, Health Professions and Facilities

Enclosure

cc: Linda Foss, Department of Health, Investigations and Inspections Office
Karen Stricklett, Department of Health, Customer Service Office



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 #1445 is issued to:

Legal Name of Applicant: Central Washington Hospital
Address of Applicant: 1201 South Miller Street Wenatchee, Washington 98807
Type of Service: End Stage Renal Disease Facility
Facility Name: CWH Douglas County Dialysis Unit
Facility Address: 795 Grant Road, East Wenatchee, Washington 98802

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND INITIAL EVALUATION DATED OCTOBER 21, 2010 (CN App #10-09) AND RECONSIDERATION EVALUATION DATED MAY 17, 2011

Description/Services To Be Provided:

Establish an 8-station facility providing the following services: peritoneal dialysis, training/support for peritoneal and hemodialysis patients, and an evening shift beginning after 5 pm. At project completion, CWH-Douglas County Dialysis Center would be approved to certify and operate a total of eight dialysis stations. The stations are listed below.

Private Isolation Room	1
Permanent Bed Station	1
Home Training Station	1
Other In-Center Stations	5
Total	8

Service Area

Douglas County Planning Area

Term

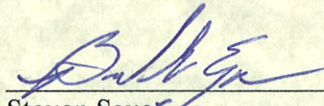
Prior to providing services at Douglas County Dialysis Unit, Central Washington Hospital will provide an executed copy of the Medical Director Agreement for the department's review and approval. The executed agreement must identify the name and professional license number of the proposed medical director and any temporary substitute medical directors as referenced in the draft agreement. The costs and terms provided in the executed agreement must be consistent with the costs and terms identified in the draft agreement.

Approved Capital Expenditure

The approved capital expenditure associated with this project is \$1,451,612.

This Certificate authorizes commencement of the project from June 16, 2011 to June 16, 2013, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: June 16, 2011



Steven Saxe
Director, Health Professions and Facilities

This Certificate is not transferable.