



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

March 14, 2013

CERTIFIED MAIL # 7011 1570 0002 7802 6647

Jason Bosh, Regional Operations Director
DaVita, Inc., North Star, Region 1
1301 A Street, #400
Tacoma, Washington 98402

Re: CN #12-28A2

Dear Mr. Bosh:

Enclosed is Certificate of Need #1501 issued to DaVita, Inc. approving the establishment of an eleven station dialysis center in Renton, within ESRD planning area King #9.

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 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:
Janis Sigman, Manager
Certificate of Need Program
Department of Health
Mail Stop 47852
Olympia, WA 98504-7852

Other Than By Mail
Janis Sigman, Manager
Certificate of Need Program
Department of Health
111 Israel Road SE
Tumwater, WA 98501



Jason Bosh, DaVita, Inc.
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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
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 question, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

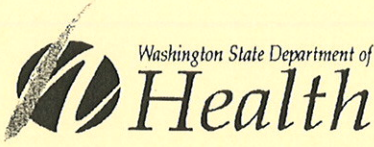
Sincerely,



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

Enclosure

cc: Linda Foss, Department of Health, Investigations and Inspections 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 #1501 is issued to:

Legal Name of Applicant: DaVita, Inc.
Address of Applicant: 1551 Wewatta Street, Denver, Colorado 80202
Type of Service: End Stage Renal Disease Facility
Facility Name: Renton Dialysis Center
Facility Address: 4110-E Northeast 4th Street, Renton, Washington 98059

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION OF FEBRUARY 26, 2013, (App #12-28A2)

Project Description:

This certificate approves the establishment of an eleven-station dialysis facility in Renton, within King County. At project completion, the dialysis facility will be approved to certify and operate eleven stations. Services provided include hemodialysis and peritoneal home training, in-center hemodialysis, shifts beginning after 5:00pm., a permanent bed station, and an isolation station. The eleven dialysis stations operated at the facility are listed below.

Private Isolation Room	1
Permanent Bed Station	1
Home Training Station	1
Other In-Center Stations	8
Total	11

Service Area

King County ESRD Planning Area #9

Conditions

1. DaVita, Inc. agrees with the project description as stated above. DaVita, 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. DaVita Inc. will provide the department with an executed copy of a Patient Transfer Agreement for department review and approval prior to commencement of services consistent with the draft agreement provided within the application.

Approved Capital Expenditure

The approved capital expenditure associated with this project is \$1,702,475. This amount represents the total capital expenditure of \$1,786,383 minus the landlord's project costs of \$83,908.

This Certificate authorizes commencement of the project from March 14, 2013 to March 14, 2015, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: March 14, 2013

Steven Saxe
Director, Health Professions and Facilities

This Certificate is not transferable.