STATE OF WASHINGTON

DEPARTMENT OF HEALTH

Olympia, Washington 98504

BEGINNING OF REVIEW NOTICE
Certificate of Need Application

Description of Proposal: Establish a 16-bed hospice care center in Snohomish County.

Estimated Cost: $5,027,135

Applicant: Providence Health & Services –Washington, d/b/a/ Providence Hospice and Home Care of Snohomish County

Public Hearing: No public hearing will be held unless requested. To request a hearing, the request must be in writing and include the name, address, and signature of the person making the request. Deadline for requesting a hearing is 5:00 p.m. on Friday, April 18, 2014. Faxed requests will not be accepted.

If a public hearing is scheduled, the hearing notice will be published in The [Everett] Herald at least 15 days before the date of the hearing.

Public Comment Period: If no public hearing is held, written comments must be received by the CON Program by 5:00 pm, Thursday, May 8, 2014. Faxed comments will not be accepted.

Send public hearing request or written comments to:

Mailing Address	**Other Than By Mail**
Department of Health	Department of Health
Certificate of Need Program	Certificate of Need Program
Mail Stop 47852	111 Israel Road SE
Olympia, WA 98504-7852	Tumwater, WA 98501

Anticipated Decision Date: July 7, 2014

If you have any questions or would like additional information, please call Peter Agabi with the CON Program at (360) 236-2959. For additional information or details, log into the CON website: www.doh.wa.gov/hsqa/FSL/certneed/.