STATE OF WASHINGTON

DEPARTMENT OF HEALTH

Olympia, Washington 98504

June 11, 2014

Marcia Peterson, Director of Strategy
Swedish Medical Center
747 Broadway
Seattle, Washington 98122

DOR #14-06-Amended

Dear Ms. Peterson:

We have completed our review of your supplemental information and documentation regarding the pediatric level of care for Swedish Medical Center's First Hill campus based on the February 2013 level of care guidelines. Below is the Certificate of Need Program's amended conclusion.

INFORMATION CONSIDERED

- Revised Code of Washington (RCW) 70.38
- Washington Administrative Code (WAC) 246-310
- Washington State Perinatal and Neonatal Level of Care Guidelines, February 2013
- Swedish Medical Center's First Hill campus August 16, 2013, Determination of Reviewability (DOR) request
- Swedish Medical Center's First Hill campus supplemental information received on December 20, 2013
- Swedish Medical Center's First Hill campus supplemental information received during our April 14, 2014, meeting
- Certificate of Need Program meeting notes from November 12, 2013, meeting with representative from Swedish Medical Center's First Hill campus
- Certificate of Need Program meeting notes from March 11, 2014, meeting with representative from Swedish Medical Center's First Hill campus
- Data provided by Craig Jackson, MD received on October 31, 2013, November 8, 2013, December 2, 2013, January 23, 2014
- Data provided by Bat-Sheva Stein received on October 25, 2013, and February 10, 2013
- American Academy of Pediatrics *Policy State Levels of Care Criteria*
- Certificate of Need historical files for Swedish Medical Center's First Hill campus

CONCLUSION

Based on the totality of information considered, Swedish Medical Center's First Hill campus is recognized as a level IV provider as described in the February 2013 level of care guidelines. The department further recognizes that Swedish Medical Center's First Hill campus has 30 level III neonatal intensive care beds at the hospital and all 30 beds would be available for level IV use. Please note that any increase in level IV pediatric beds beyond 30 requires prior Certificate of Need review and approval.

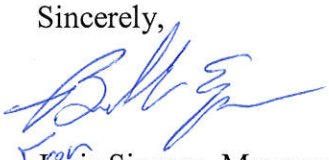
APPEAL OPTION

This decision may be appealed. You 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:	Other Than By Mail
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

Please call me directly at (360) 236-2955 if you have any questions or you would like to meet to discuss this determination.

Sincerely,



Janis Sigman, Manager
Certificate of Need Program
Community Health Systems

cc: Department of Health, Investigations and Inspections Office
Lisa Crockett, Providence Health System
Bat-Sheva Stein, Department of Health
Craig Jackson, MD