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SEP - 8 2014

CERTIFICATE OF NEED PROGRAM  
DEPARTMENT OF HEALTH

September 4, 2014

Ms. Janis Sigman  
Manager, Facilities Certification Program  
Washington State Department of Health  
PO Box 47852  
Olympia WA 98504

**RE: Letter of Intent**

Dear Ms. Sigman:

On May 2, 2014, we sent to you our original letter of intent, which is attached.

We wish to modify our letter of intent as follows:

Pursuant to WAC 246-310-080, Wenatchee Valley Hospital plans to request certificate of need approval to expand its Level I Rehabilitation Unit.

1. Description of Proposed Service

Transfer 3 acute care beds from our current license of 14 acute care beds, to our currently recognized 6 Level II rehabilitation beds, for a total of 9 Level II rehabilitation beds and 11 acute care beds.

2. Estimated Cost of the Project

Estimated capital expenditures are \$24,932.

3. Identification of the Service Area

The service area is Chelan, Douglas, Grant and Okanogan counties.

Thank you for your attention to this matter. If you have any questions, please do not hesitate to call me directly at (509) 665-6011 or email me at [rick.canning@cwhs.com](mailto:rick.canning@cwhs.com).

Sincerely,

A handwritten signature in blue ink that reads 'Rick Canning'.

Rick Canning  
EVP-Inpatient/Hospital Services  
Confluence Health  
820 North Chelan Avenue  
Chelan, WA 98801



Wenatchee Valley Hospital & Clinics  
820 N. Chelan Ave.  
Wenatchee, WA 98801  
509 663 8711  
confluencehealth.org

May 2, 2014

Ms. Janis Sigman  
Manager, Facilities Certification Program  
Washington State Department of Health  
PO Box 47852  
Olympia WA 98504

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MAY 08 2014

CERTIFICATE OF NEED PROGRAM  
DEPARTMENT OF HEALTH

**RE: Letter of Intent**

Dear Ms. Sigman:

Pursuant to WAC 246-310-080, Wenatchee Valley Hospital plans to request certificate of need approval to expand its Level I Rehabilitation Unit.

1. Description of Proposed Service

Add three additional Level I rehabilitation beds to the currently-recognized 6 Level I rehabilitation beds. In addition, we request these additional beds be considered incremental to our existing license of acute care beds. When approved, Wenatchee Valley Medical Center would have 23 acute care, licensed beds, including 9 Level I rehabilitation beds.

2. Estimated Cost of the Project

Estimated capital expenditures are \$145,462.

3. Identification of the Service Area

The service area is Chelan, Douglas, Grant and Okanogan counties.

Thank you for your attention to this matter. If you have any questions, please do not hesitate to call me directly at (509) 664-4868, extension 5363 or at [skoos@wvmedical.com](mailto:skoos@wvmedical.com)

Sincerely,

Shaun Koos  
Chief Operating Officer  
Confluence Health  
820 North Chelan Avenue  
Chelan WA 98801

# Washington State Department of Health

This organization

## **Wenatchee Valley Hospital and Clinics**

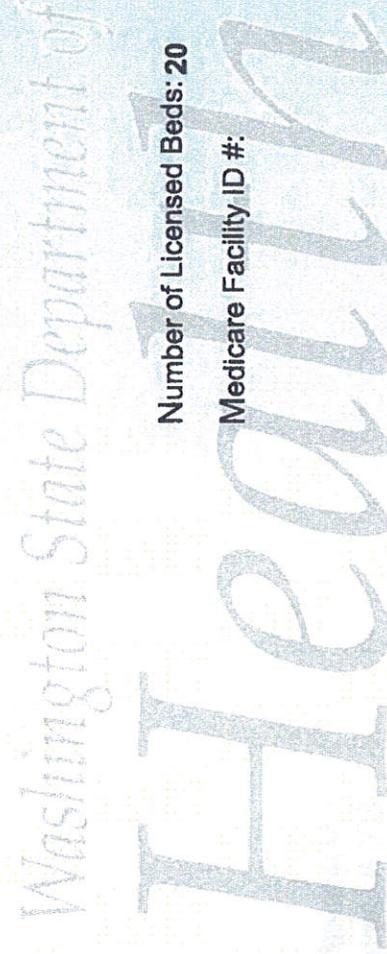
**is authorized by RCW 70.41 to have a  
Hospital Acute Care License**

Operated by: **Wenatchee Valley Hospital**

Located at: **820 N Cheilan Ave  
Wenatchee, WA 98801-2028**

Number of Licensed Beds: **20**

Medicare Facility ID #:



A handwritten signature in black ink, appearing to read "John W. Williams".

Secretary

Credential Number  
**HAC.FS.60424211**

Status	Effective Date	Expiration Date
<b>ACTIVE</b>	<b>11/25/2013</b>	<b>12/31/2016</b>

THIS LICENSE IS NON-TRANSFERABLE