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JUL 31 2014

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

July 31, 2014

Janis Sigman, Manager
Certificate of Need Program
Office of Certification and Enforcement
State of Washington Department of Health
111 Israel Rd SE
Tumwater, WA 98501

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need for a **6** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$852,146**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
A wholly owned subsidiary of DaVita HealthCare Partners, Inc.



July 31, 2014

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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$1,104,187**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$1,352,274**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$1,592,145**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$1,832,761**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$2,522,043**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$2,804,184**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$3,042,372**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$3,297,738**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **6** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$3,542,142**.

Description of the Service Area:

The service area is **Lewis County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

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Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need to add 4 station dialysis to the **DaVita Olympia Dialysis Center**. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to operate the additional 4 dialysis stations at the **DaVita Olympia Dialysis Center**, located at **335 Cooper Point Road NW, Olympia, WA 98502**. DaVita will provide and support hemodialysis, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 67,500**.

Description of the Service Area:

The service area is **Thurston County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need for an **4** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to establish a **4** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 795,797**.

Description of the Service Area:

The service area is ***Thurston County***.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
A wholly owned subsidiary of DaVita HealthCare Partners, Inc.



North Star Division
32275 32nd Avenue South
Federal Way, WA 98001
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **4** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 956,790**.

Description of the Service Area:

The service area is **Thurston County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **4** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,146,718**.

Description of the Service Area:

The service area is **Thurston County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **4** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,370,780**.

Description of the Service Area:

The service area is **Thurston County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **4** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,635,110**.

Description of the Service Area:

The service area is **Thurston County**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need for an **14** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to establish a **14** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,858,602**.

Description of the Service Area:

The service area is **King County Subservice Area Nine (9)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **14** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 2,062,734**.

Description of the Service Area:

The service area is **King County Subservice Area Nine (9)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need to add **9** station dialysis to the **DaVita Tacoma Dialysis Center**. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to operate the additional **9** dialysis stations at the **DaVita Tacoma Dialysis Center**, located at **3401 S. 19th Street, Tacoma, WA 98405**. DaVita will provide and support hemodialysis, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 146,360**.

Description of the Service Area:

The service area is **Pierce County Subservice Area Four (4)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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Our Mission: To be the Provider, Partner and Employer of Choice



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A Description of the Extent of Services Proposed:

DaVita intends to operate the additional **9** dialysis stations at the **DaVita Tacoma Dialysis Center**, located at **3401 S. 19th Street, Tacoma, WA 98405**. DaVita will provide and support hemodialysis, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 102,260**.

Description of the Service Area:

The service area is **Pierce County Subservice Area Four (4)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need for a **9** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to establish a **9** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,124,772**.

Description of the Service Area:

The service area is ***Pierce County Subservice Area Four (4)***.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **9** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,322,206**.

Description of the Service Area:

The service area is ***Pierce County Subservice Area Four (4)***.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **9** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,522,687**.

Description of the Service Area:

The service area is ***Pierce County Subservice Area Four (4)***.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
A wholly owned subsidiary of DaVita HealthCare Partners, Inc.



North Star Division
32275 32nd Avenue South
Federal Way, WA 98001
Tel: 253-733-4853 | Fax: 855-600-3243
www.davita.com

July 31, 2014

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JUL 31 2014

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Janis Sigman, Manager
Certificate of Need Program
Office of Certification and Enforcement
State of Washington Department of Health
111 Israel Rd SE
Tumwater, WA 98501

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need for a **9** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to establish a **9** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 1,806,294**.

Description of the Service Area:

The service area is ***Pierce County Subservice Area Four (4)***.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **9** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 2,049,810**.

Description of the Service Area:

The service area is ***Pierce County Subservice Area Four (4)***.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **9** station dialysis facility that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 2,418,010**.

Description of the Service Area:

The service area is **Pierce County Subservice Area Four (4)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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Dear Ms. Sigman:

In accordance with WAC 246-310-080, Total Renal Care, Inc., a wholly owned subsidiary of DaVita Healthcare Partners, Inc. (hereafter DaVita), hereby submits a letter of intent regarding its intention to apply for a certificate of need for an **18** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita intends to establish a **18** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 2,131,188**.

Description of the Service Area:

The service area is **King County Subservice Area One (1)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **18** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 2,381,196**.

Description of the Service Area:

The service area is **King County Subservice Area One (I)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
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A Description of the Extent of Services Proposed:

DaVita intends to establish a **18** station dialysis facility that will provide and support in-center, peritoneal dialysis and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 2,586,294**.

Description of the Service Area:

The service area is **King County Subservice Area One (I)**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Regional Operations Director, North Star, Region 1
Total Renal Care, Inc.
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