



July 31, 2014

Janis Sigman, Manager  
Certificate of Need Program  
Department of Health  
P.O. Box 47852  
Olympia WA 98504-7852

**R E C E I V E D**  
JUL 31 2014

CERTIFICATE OF NEED PROGRAM  
DEPARTMENT OF HEALTH

**RE: Letter of Intent**

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Renal Care Group Northwest, INC ("RCGNW"); parent company-Fresenius Medical Holdings, Inc, hereby submits this letter of intent to establish a new facility in Pierce 4 Dialysis Planning Area. In conformance with the requirements of WAC, the following information is provided:

1. Description of the Services Proposed:

RCGNW proposes to establish a new 9-station dialysis facility. This facility will offer all modalities of dialysis services.

2. Estimated Cost of the Proposed Project:

The estimated capital expenditure for this project is \$2,065,462.

3. Description of the Service Area:

The facility will provide services in the Pierce 4 Dialysis Planning Area.

Please feel free to contact me if there are questions. I can be reached at 360.338.4115 or [ann.sullivan@fmc-na.com](mailto:ann.sullivan@fmc-na.com)

Yours truly,

Ann Sullivan  
Area Manager-Washington Capital  
Fresenius Medical Care



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RE: Letter of Intent

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Renal Care Group Northwest, INC ("RCGNW"); parent company-Fresenius Medical Holdings, Inc, hereby submits this letter of intent to establish a new facility in Pierce 4 Dialysis Planning Area. In conformance with the requirements of WAC, the following information is provided:

1. Description of the Services Proposed:

RCGNW proposes to establish a new 9-station dialysis facility. This facility will offer all modalities of dialysis services.

2. Estimated Cost of the Proposed Project:

The estimated capital expenditure for this project is \$3,937,100.

3. Description of the Service Area:

The facility will provide services in the Pierce 4 Dialysis Planning Area.

Please feel free to contact me if there are questions. I can be reached at 360.338.4115 or [ann.sullivan@fmc-na.com](mailto:ann.sullivan@fmc-na.com)

Yours truly,

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**RE: Letter of Intent**

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Renal Care Group Northwest, INC ("RCGNW"); parent company-Fresenius Medical Holdings, Inc, hereby submits this letter of intent to establish a new facility in Lewis County Dialysis Planning Area. In conformance with the requirements of WAC, the following information is provided:

1. Description of the Services Proposed:

RCGNW proposes to establish a new 6-station dialysis facility. This facility will offer all modalities of dialysis services.

2. Estimated Cost of the Proposed Project:

The estimated capital expenditure for this project is \$3,378,462.

3. Description of the Service Area:

The facility will provide services in the Lewis County Dialysis Planning Area.

Please feel free to contact me if there are questions. I can be reached at 360.338.4115 or [ann.sullivan@fmc-na.com](mailto:ann.sullivan@fmc-na.com)

Yours truly,

Ann Sullivan  
Area Manager-Washington Capital  
Fresenius Medical Care



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**RECEIVED**  
JUL 31 2014  
CERTIFICATE OF NEED PROGRAM  
DEPARTMENT OF HEALTH

**RE: Letter of Intent**

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Qualicenters Inland Northwest, LLC ("Qualicenters"); parent company-Fresenius Medical Holdings ("FMC"), Inc, hereby submits this letter of intent to operate four incremental dialysis stations in addition to the certificate of need approved 12-station center in the Lewis County Dialysis Planning Area. It should be noted that FMC has separately requested a Determination of Non-Reviewability ("DNR") for relocation of the existing FMC Chehalis dialysis center, which is certificate of need approved for 12-stations. This letter of intent requests approval for four additional stations at that relocated center.

In conformance with the requirements of WAC, the following information is provided:

1. Description of the Services Proposed:

Qualicenters proposes to establish and operate four additional stations in addition to its existing certificate of need approved 12-station center, FMC Chehalis. This facility will offer all modalities of dialysis services.

2. Estimated Cost of the Proposed Project:

The estimated incremental capital expenditure for this for station addition is \$443,202, and FMC's share is \$48,860. As stated above, FMC has separately requested a DNR to relocate the existing 12-station center. These incremental capital costs are direct and apportioned costs for the four additional, requested stations.

3. Description of the Service Area:

The facility will provide services in the Lewis County Dialysis Planning Area.

Please feel free to contact me if there are questions. I can be reached at 360.338.4115 or [ann.sullivan@fmc-na.com](mailto:ann.sullivan@fmc-na.com)

Yours truly,



Ann Sullivan  
Area Manager-Washington Capital  
Fresenius Medical Care