



STATE OF WASHINGTON

DEPARTMENT OF HEALTH

PO Box 47852 • Olympia, Washington 98504-7852

July 28, 2015

CERTIFIED MAIL # 7015 0640 0000 6441 5584

Kathline Sullivan, Administrator
Western Washington Medical Group, Inc.
3726 Broadway, #201
Everett, Washington 98201

RE: CN 15-11

Dear Ms. Sullivan:

Enclosed is Certificate of Need #1555 issued to Western Washington Medical Group, Inc. for the establishment of a two operating room ambulatory surgery center. The certificate is not approval for any other local, federal, or state statutes, rules, or regulations. Such a project may also need Department of Health approval for a construction plan and facility licensing or certification, as well as other federal or local jurisdiction permits.

The Certificate of Need is valid for two years. The project must begin during this time. If there is substantial and continuing progress, we may extend the certificate for one six month period. For an extension, you must submit an extension request at least 120 days before the expiration. You cannot begin a project after the expiration date.

This decision may be appealed. The appeal options are listed below.

Appeal Option 1:

Any person with standing may request a public hearing to reconsider this decision. The request must state the specific reasons for reconsideration in accordance with Washington Administrative Code 246-310-560.

A reconsideration request must be received within 28 calendar days from the date of the decision at one of the following addresses:

Mailing Address:
Department of Health
Certificate of Need Program
Mail Stop 47852
Olympia, WA 98504-7852

Physical Address:
Department of Health
Certificate of Need Program
111 Israel Road SE
Tumwater, WA 98501

Appeal Option 2:

Any person with standing 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:

Adjudicative Service Unit
Mail Stop 47879
Olympia, WA 98504-7879

Physical Address:

Adjudicative Service Unit
111 Israel Road SE
Tumwater, WA 98501

We monitor projects until completed or the expiration date, whichever occurs last. We do this with quarterly progress reports. At least 30 days before the report's due date, you will receive a form to complete and return.

If you have any questions, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,



Steven M. Saxe, FACHE
Director, Office of Community Health Systems

Enclosure



This Certificate is granted under the authority of RCW 70.38. Issuance of this Certificate does not constitute approval under any other local, federal or state statute, implementing rules and regulations. Examples where additional approval may be necessary include, but are not limited to, construction plan approval through the Construction Review Unit of the Department of Health, facility licensing/certification through the Department of Social and Health Services or Department of Health, and other federal or local jurisdiction permits.

Certificate of Need #1555 is issued to:

Legal Name of Applicant: Western Washington Medical Group, Inc.
Address of Applicant: 3726 Broadway, Suite 206 Everett, Washington 98201
Type of Service: Ambulatory Surgery Center
Facility Name: Gateway Surgery Center
Facility Address: 3726 Broadway, Suite 206 Everett, Washington 98201

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED July 17, 2015, (CN App #15-11)

PROJECT DESCRIPTION:

This project approves the establishment of a Certificate of Need approved two-operating room ambulatory surgery center at 3726 Broadway Avenue, #206 in Everett, within central Snohomish County. Services to be provided at the ambulatory surgery center include podiatry, orthopedic, urology, general surgery, spinal surgery, Ear, Nose and Throat, plastic surgery, OB/GYN, cardiology, ophthalmology, and pain intervention.

Service Area
Central Snohomish

Conditions:

1. Western Washington Medical Group d/b/a Gateway ASC, LLC agrees with the project description stated above.
2. Washington Medical Group d/b/a Gateway ASC, PLLC will provide charity care in compliance with the charity care policies reviewed and approved by the Department of Health. Western Washington Medical Group d/b/a Gateway ASC, LLC will use reasonable efforts to provide charity care in an amount comparable to or exceeding the regional average amount of charity care provided by hospitals in the Puget Sound Region. Currently, this amount is 2.88% of gross revenue and 6.42% of adjusted revenue. Western Washington Medical Group d/b/a Gateway ASC, LLC will maintain records documenting the amount of charity care it provides and demonstrating compliance with its charity care policies.

Approved Capital Expenditure

The approved capital expenditure associated with this project is \$145,127

This Certificate authorizes commencement of the project from July 28, 2015 to July 28, 2017, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: July 28, 2015


Steven Saxe, Director

This Certificate is not transferable.