1301 A Street, Suite 400
Tacoma, WA 98402
Tel: 253-280-9612 | Fax: 253-280-9722
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July 31, 2012

RECEIVED
JUL 31 2012
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 Road SE
Tumwater, WA 98501

Dear Ms. Sigman:

In accordance with WAC 246-310-080, DaVita Inc. hereby submits a letter of intent regarding its intention to apply for a certificate of need for a **36** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **36** 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 ***$2,496,622.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **36** 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 ***$2,712,730.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **36** 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 ***$2,926,542.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

Our Mission: To be the Provider, Partner and Employer of Choice

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A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **36** 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 ***$3,184,900.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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Dear Ms. Sigman:

In accordance with WAC 246-310-080, DaVita Inc. hereby submits a letter of intent regarding its intention to apply for a certificate of need for a **60** station dialysis center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **60** 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 ***$ 4,228,800.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **60** 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 ***$ 4,461,172.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **60** 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 ***$ 4,753,480.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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A Description of the Extent of Services Proposed:

DaVita Inc. intends to establish a **60** 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 ***$ 5,180,332.***

Description of the Service Area:

The service area is ***Clark County.***

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

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1

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