

Franciscan Health System

R E C E I V E D

JAN 31 2013

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

January 30, 2013

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

Dear Ms. Sigman:

Please accept this Letter of Intent for Franciscan Health System (FHS) to add 6 stations in the Pierce Four Dialysis Planning Area. In accordance with WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed:

FHS proposes to add 6 stations to the existing dialysis unit at St. Joseph Medical Center in the Pierce Four Dialysis Planning Area.

2. Estimated Cost of the Proposed Project:

The capital expenditure is estimated at \$20,000.

3. Description of the Service Area:

Per WAC 246-310-280, the service area is the Pierce Four Dialysis Planning Area.

Thank you for your support in this matter.

Sincerely,



Richard Petrich,
Vice President, Planning and Business Development

1717 South J Street P.O. Box 2197 Tacoma, WA 98401-2197
Phone 253.426.4101 www.FHShealth.org

A mission to heal, a promise to care.

Franciscan Health System

† CATHOLIC HEALTH
INITIATIVES®

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Department of Health
P.O. Box 47852
Olympia, WA 98504-7852

Dear Ms. Sigman:

Please accept this Letter of Intent for Franciscan Health System (FHS) to add 4 stations in the Pierce Four Dialysis Planning Area. In accordance with WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed:

FHS proposes to add 4 stations to the existing dialysis unit at St. Joseph Medical Center in the Pierce Four Dialysis Planning Area.

2. Estimated Cost of the Proposed Project:

The capital expenditure is estimated at \$20,000.

3. Description of the Service Area:

Per WAC 246-310-280, the service area is the Pierce Four Dialysis Planning Area.

Thank you for your support in this matter.

Sincerely,



Richard Petrich,
Vice President, Planning and Business Development

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Olympia, WA 98504-7852

Dear Ms. Sigman:

Please accept this Letter of Intent for Franciscan Health System (FHS) to add 4 stations in the Pierce Four Dialysis Planning Area. In accordance with WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed:

Franciscan Health System proposes to add 4 stations to Franciscan Dialysis Center Eastside for a total of 16 stations.

2. Estimated Cost of the Proposed Project:

The capital expenditure is estimated at \$17,000.

3. Description of the Service Area:

Per WAC 246-310-280, the service area is the Pierce Four Dialysis Planning Area.

Thank you for your support in this matter.

Sincerely,



Richard Petrich,
Vice President, Planning and Business Development

Franciscan Health System

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Olympia, WA 98504-7852

Dear Ms. Sigman:

Please accept this Letter of Intent for Franciscan Health System (FHS) to add 4 stations in the Pierce Four Dialysis Planning Area. In accordance with WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed:

Franciscan Health System proposes to add 4 stations to Franciscan Dialysis Center Eastside for a total of 16 stations.

2. Estimated Cost of the Proposed Project:

The capital expenditure is estimated at \$25,000.

3. Description of the Service Area:

Per WAC 246-310-280, the service area is the Pierce Four Dialysis Planning Area.

Thank you for your support in this matter.

Sincerely,



Richard Petrich,
Vice President, Planning and Business Development

Franciscan Health System

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

Dear Ms. Sigman:

Please accept this Letter of Intent for Franciscan Health System (FHS) to add 4 stations to its newly opened facility, Franciscan Dialysis Center Eastside, located in the Pierce Four Dialysis Planning Area. In accordance with WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed:

Franciscan Health System proposes to add 4 stations to Franciscan Dialysis Center Eastside for a total of 16 stations.

2. Estimated Cost of the Proposed Project:

The capital expenditure is estimated at \$20,000.

3. Description of the Service Area:

Per WAC 246-310-280, the service area is the Pierce Four Dialysis Planning Area.

Thank you for your support in this matter.

Sincerely,



Richard Petrich,
Vice President, Planning and Business Development