



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

June 16, 2011

CERTIFIED MAIL # 7008 1300 0000 7202 9997

Andrew Gilbert, Regional Operations Coordinator  
DaVita, Inc. – North Star, Regions 1&5  
1301 A Street, #400  
Tacoma, Washington 98402

Dear Mr. Gilbert:

Enclosed is Certificate of Need #1444 issued to DaVita, Inc. approving an eight station dialysis facility in East Wenatchee, within Douglas County. At project completion, East Wenatchee Dialysis Center will have eight approved stations as noted on the certificate.

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. Any affected 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

Other Than By Mail  
Adjudicative Clerk Office  
310 Israel Road SE, Building 6  
Tumwater, WA 98501



Andrew Gilbert, DaVita, Inc.  
Certificate of Need App #10-08  
June 16, 2011  
Page 2 of 2

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 question, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,



Steven M. Saxe, FACHE  
Director, Health Professions and Facilities

Enclosure

cc: Linda Foss, Department of Health, Investigations and Inspections Office  
Karen Stricklett, Department of Health, Customer Service Office



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 #1444 is issued to:**

**Legal Name of Applicant:** DaVita, Inc.  
**Address of Applicant:** 601 Hawaii Street, El Segundo, California 90245  
**Type of Service:** End Stage Renal Disease Facility  
**Facility Name:** East Wenatchee Dialysis Center  
**Facility Address:** 295 Third Street Northeast, East Wenatchee, Washington 98802

**ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND INITIAL EVALUATION DATED OCTOBER 21, 2010 (CN App #10-08) AND RECONSIDERATION EVALUATION DATED MAY 17, 2011**

**Description/Services To Be Provided:**

Establish an 8-station facility providing the following services: peritoneal dialysis, training/support for peritoneal and hemodialysis patients, and an evening shift beginning after 5 pm. At project completion, DaVita-East Wenatchee Dialysis Center would be approved to certify and operate a total of eight dialysis stations. The stations are listed below.

Private Isolation Room	1
Permanent Bed Station	1
Home Training Station	1
Other In-Center Stations	5
<b>Total</b>	<b>8</b>

**Service Area**

Douglas County Planning Area

**Term**

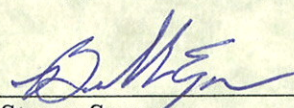
Prior to providing services at East Wenatchee Dialysis Center, DaVita, Inc. will provide an executed copy of the Patient Transfer Agreement with a local hospital for the department's review and approval. The terms provided in the executed agreement must be consistent with the terms identified in the draft agreement.

**Approved Capital Expenditure**

The approved capital expenditure associated with this project is \$2,003,222.

**This Certificate authorizes commencement of the project from June 16, 2011 to June 16, 2013, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.**

**Date Certificate Issued:** June 16, 2011

  
Steven Saxe  
Director, Health Professions and Facilities

**This Certificate is not transferable.**