

December 12, 2013

CERTIFIED MAIL #7011 1570 0002 7802 6340

Elaine Couture, Chief Executive Officer Sacred Heart Medical Center and Children's Hospital 101 West 8th Avenue Spokane, Washington 99204

Dear Ms. Couture:

We have completed review of Sacred Heart Medical Center and Children's Hospital request for a six-month extension to Certificate of Need #1422R. Enclosed is Certificate of Need 1422RE.

Certificate of Need #1422RE extends the expiration date beginning February 8, 2014 to August 8, 2014. 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, Director 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 #1422RE is issued to:

Legal Name of Applicant:

Providence Sacred Heart Medical Center and Children's Hospital

Address of Applicant:

101 Eighth Avenue, Spokane, Washington 99204

Type of Service:

Acute Care services

Facility Name:

Providence Sacred Heart Medical Center and Children's Hospital

Facility Address:

101 Eighth Avenue, Spokane, Washington 99204

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORDS AND THE STIPULATION & AGREED ORDER SIGNED FEBRUARY 3, 2012

(CN App #09-09 and Agreed Order 11-2-02725-7)

Description/Services To Be Provided:

This certificate approves the addition of 75 acute care beds to Sacred Heart Medical Center and Children's Hospital. The 75 beds are to be re-located from Holy Family Hospital to Sacred Heart Medical Center and Children's Hospital. At project completion, the licensed bed capacity at Holy Family Hospital will be reduced from 272 to 197 (188 medical/surgical and 9 intermediate care nursery level II bassinets).

Sacred Heart Medical Center and Children's Hospital Approved Bed Totals

Med/Surg. Beds (511+75)	586
Psychiatric Beds	72
ICN level II Bassinettes	21
NICU level III bassinettes	40
Total Acute Care Beds	719

Service Area

Spokane County

Approved Capital Expenditure

The approved capital expenditure is \$54,013,224

This Extended Certificate of Need is effective from <u>February 8, 2014</u>, to <u>August 8, 2014</u>, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Extended Certificate Issued: December 12, 2013

Steven Saxe, Director Community Health Systems

This Certificate is not transferable.