

August 25, 2011

CERTIFIED MAIL # 7009 2250 0001 8668 6163

David D. Natali, Group Facility Administrator DaVita, Inc. 1301 A Street, #400 Tacoma, Washington 98402

RE: CN11-10

Dear Mr. Natali:

Enclosed is Certificate of Need #1449 issued to DaVita, Inc. to add three dialysis stations at DaVita's Tacoma Dialysis Center in Pierce County Planning area #4.

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

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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 #1449 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:

DaVita Tacoma Dialysis Center

Facility Address:

3401 S. 19th Street, Tacoma, WA 98405

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED AUGUST 9, 2011, (CN App #11-10)

Project Description:

DaVita Tacoma Dialysis Center is approved to certify and operate thirteen dialysis stations. Services provided at DaVita Tacoma Dialysis Center include home dialysis, hemodialysis, peritoneal dialysis, shifts after 5:00 p.m., and training/support for dialysis patients. The 13-station DaVita Tacoma Dialysis Center would include a permanent bed station and an isolation station. The thirteen dialysis station breakdown at the facility are listed below:

Total	13
Other In-Center Stations	10
Home Training Station	1
Permanent Bed Station	1
Private Isolation Room	1

Service Area

Pierce County Planning Area #4

Condition:

1. Approved project description as described above.

Approved Capital Expenditure

The approved capital expenditure associated with this project is \$45.575.

This Certificate authorizes commencement of the project from <u>August 25, 2011</u> to <u>August 25, 2013</u>, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: August 25, 2011

Steven Saxe

Director, Health Professions and Facilities

This Certificate is not transferable.