

January 19, 2011

CERTIFIED MAIL # 7008 1320 0000 7202 9485

Jean Stevens Regional Vice President Inland Northwest Renal Care Group, LLC 2121 SW Broadway, Suite 111 Portland, OR 97201

Dear Ms. Stevens:

Thank you for your January 11, 2011, letter agreeing to the term associated with our approval of Inland Northwest Renal Care Group, LLC application proposing to add 4 stations to the Fresenius Medical Care Leah Layne Dialysis Center located in Othello, Adams County. Enclosed is Certificate of Need #1438.

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.

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 Department of Health, Construction Review Services





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 #1438 is issued to:

Legal Name of Applicant:

Inland Northwest Renal Care Group, LLC

Address of Applicant:

2121 SW Broadway, Suite 111, Portland, Oregon 97201

Type of Service:

End Stage Renal Disease Facility

Facility Name:

Fresenius Medical Care Leah Layne Dialysis Center

Facility Address:

530 South 1st Avenue, Othello, Washington 99344

# ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORDS AND EVALUATION December 28, 2010 (CN App #10-18)

## Description/Services To Be Provided:

Add four stations to the existing facility. At project completion, Fresenius Medical Care Leah Layne Dialysis Center is approved to certify and operate a total of eight stations. The stations are listed below.

**Approved Stations** 

Private Isolation Room	1
Permanente Bed Station	1
Home Training Station	1
Other In-Center Stations	5
Total	8

### Service Area

Adams County

#### Term

Inland Northwest Renal Care Group must provide a signed copy of the updated or amended Medical Director's agreement reflecting any re-negotiated fees for the Othello facility.

# **Approved Capital Expenditure**

The approved capital expenditure is \$136,415 and is broken down as follows.

Item	Cost
Building Construction	\$50,000
Fixed & Moveable Equipment	\$75,500
Sales Tax & Fees	\$10,915
Total Estimated Capital Costs	\$136,415

This Certificate authorizes commencement of the project from <u>January 19, 2011</u> to <u>January 19, 2013</u>, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: January 19, 2011

Steven Saxe

Director, Health Professions and Facilities

This Certificate is not transferable.