



RECEIVED
By Jennifer Kido at 2:29 pm, Nov 24, 2021

Certificate of Need Application
Home Health Agency

LOI21-11PH-HH-Cowlitz

exp: Dec 24, 2021

Certificate of Need applications must be submitted with a fee in accordance with Washington Administrative Code (WAC) 246-310-990.

Application is made for a Certificate of Need in accordance with provisions in Revised Code of Washington (RCW) 70.38 and WA 246-310, rules and regulations adopted by the Washington State Department of Health. I attest that the statements made in this application are correct to the best of my knowledge and belief.

Signature and Title of Responsible Officer

Bryan Stewart, System Vice President

Date: November 23, 2021

Email Address:

bstewart1@PeaceHealth.org

Telephone Number: 503-407-3817

Legal Name of Applicant

PeaceHealth Southwest Medical Center
(PeaceHealth)/PeaceHealth Home Care

Address of Applicant

400 NE Mother Joseph Pl, Vancouver, WA
98664

Provide a brief project description

- New Agency
- Expansion of Existing Agency
- Other:

Estimated capital expenditure: \$0

Identify the county proposed to be served for this project. Note: Each home health application must be submitted for one county only. If an applicant intends to obtain a Certificate of Need to serve more than one county, then an application must be submitted for each county separately.

Cowlitz County