



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

October 27, 2022

Kai Morimoto, MD, Owner
Kai Morimoto, MD, PLLC
12615 East Mission Avenue, #105
Spokane Valley, WA 99216

Sent via email: ann@kmplasticsurgery.com

RE: Determination of Reviewability #23-02 – Department’s Decision

Dr. Morimoto:

The Department of Health has completed its review of the determination of reviewability request submitted by Kai Morimoto, MD, PLLC. The request proposes exemption from Certificate of Need review for the relocation of an existing clinical practice and establishment of an ambulatory surgery center (ASC) in Spokane, within Spokane County.

BACKGROUND AND FACTS

The following information was considered during the review process, and is recorded here for historical purposes:

- Kai Morimoto, MD, PLLC is a Washington professional limited liability company with the Unified Business Identifier [UBI] 603 346 238.
- Kai Morimoto, MD, PLLC is currently owned and governed by one member, Kai Morimoto, MD.¹
- Kai Morimoto, MD, PLLC will own and operate both the clinical practice and surgery center at the following location: 324 South Sherman Street in Spokane [99202], within Spokane County.
- The use of the ASC will be limited to member or employee-physicians of Kai Morimoto, MD, PLLC. Revenues or visits used to determine primary purpose have been limited to those members.
- Clinical and surgical services to be provided at Kai Morimoto, MD, PLLC will be limited to plastic surgery.

¹ Operating Agreement of Kai Morimoto MD, PLLC and Washington Secretary of State [website](#),

- The surgery center will have one operating room.²

RELEVANT CRITERIA

The department reviews requests for compliance with the following:

- Applicable sections of both [Revised Code of Washington 70.38](#) and [Washington Administrative Code 246-310](#); and
- The [Washington State Department of Health's Interpretive Statement CN 01-18](#)³

THE PRIMARY PURPOSE OF THE FACILITY

- The anticipated revenue from surgical services provided at the surgery center will be approximately 88% of the total revenue generated by the facility.
- The anticipated patient visits for surgical services provided at the surgery center will be approximately 16.2% of the total patient visits to the facility.

CONCLUSION

Based on the totality of information in the request for determination of reviewability and resulting research, the department concludes that the operation of Kai Morimoto, MD, PLLC, to be located at 324 South Sherman Street, in Spokane, [99202], within Spokane County does not require a Certificate of Need at this time.

CHANGES THAT MAY AFFECT THIS DECISION

A facility can make changes that may impact the primary purpose of the facility. Such as, if the revenues or patient visits related to surgical services begin to regularly exceed half of the facility's operations. Changes, including but not limited to the following, will likely either prompt Certificate of Need review or necessitate a new determination of reviewability:

- A change of ownership;
- Operational changes;
- Expansion of services;
- The addition of operating rooms;
- A change in location; or
- If the physicians or the use of the facility changes which results in different total revenues or visits.

APPEAL OPTION

This decision may be appealed. You or any 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.

² For certificate of need purposes, operating and procedure rooms are both defined as operating rooms.

³ Approved by the Washington State Secretary of Health, John Wiesman, DrPH, MPH, effective January 19, 2018

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Mailing Address:
Department of Health
Adjudicative Service Unit
Mail Stop 47879
Olympia, WA 98504-7879

Physical Address
Department of Health
Adjudicative Service Unit
111 Israel Road SE
Tumwater, WA 98501

If you have any questions or would like to arrange for a meeting to discuss this determination, please call (360) 236-2955.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric Hernandez", written over a horizontal line.

Eric Hernandez, Program Manager
Certificate of Need
Office of Community Health Systems