

STATE OF WASHINGTON DEPARTMENT OF HEALTH Olympia, Washington 98504

November 13, 2015

CERTIFIED MAIL # 7015 0640 0000 6441 5676

Diane Patterson, VP/CCO Yakima Valley Memorial Hospital 2811 Tieton Dr Yakima, Washington 98902

RE: CN16-01

Dear Ms. Patterson:

Enclosed is Certificate of Need #1350EA issued to Yakima Valley Memorial Hospital Association dba Memorial Home Care Services to amend Certificate of Need #1350E. 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.

This amended Certificate of Need is valid through September 30, 2017, and as identified in condition #3, any remaining bed authorization not licensed by that date shall be forfeited.

It recently came to the attention of the department that there was an error in the address listed in project description of the evaluation released on November 9. This error has been corrected. The corrected page is enclosed.

This decision may be appealed. The appeal options are listed below.

Appeal Option 1:

Any person with standing may request a public hearing to reconsider this decision. The request must state the specific reasons for reconsideration in accordance with Washington Administrative Code 246-310-560.

A reconsideration request must be received within 28 calendar days from the date of the decision at one of the following addresses:

Diane Patterson, VP/CCO Yakima Valley Memorial Hospital November 13, 2015 Page 2

> Mailing Address: Department of Health Certificate of Need Program Mail Stop 47852 Olympia, WA 98504-7852

<u>Physical Address</u>: Department of Health Certificate of Need Program 111 Israel Road SE Tumwater, WA 98501

Appeal Option 2:

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:

<u>Mailing Address:</u> Adjudicative Service Unit Mail Stop 47879 Olympia, WA 98504-7879 <u>Physical Address</u> Adjudicative Service Unit 111 Israel Road SE Tumwater, WA 98501

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 questions, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,

Steven M. Saxe, FACHE Director, Office of 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 #1350EA is issued to:

Legal Name of Applicant:	Yakima Valley Memorial Hospital Association dba Memorial Home Care Services
Address of Applicant:	302 South 10 th Avenue, Yakima, WA 98902
Type of Service:	Hospice Care Center
Facility Name:	Cottage in the Meadow
Facility Address:	1208 South 48 th Avenue, Yakima, WA 98908

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED NOVEMBER 9, 2015, (CN App #16-01)

PROJECT DESCRIPTION:

Memorial Home Care Services is approved to add 8 beds to the existing 12-bed Medicare and Medicaid certified hospice care center, Cottage in the Meadow. The existing 12-bed hospice care center has been in operation since 2012 and is located at 1208 South 48th Avenue in the city of Yakima, within Yakima County. The 8 beds associated with this amendment application shall be licensed by September 30, 2017.

Service Area

Yakima County

Conditions: See page 2

Approved Capital Expenditure

The approved capital expenditure for this project is \$8,835,407, which includes all construction, equipment, and associated fees and taxes for both phase one and two of the project. The department acknowledges that \$6,613,579 has already been expended by Memorial Home Care Services under phase one. Phase two costs are expected to be \$2,221,828.

This Amended Certificate of Need is valid through September 30, 2017, and as identified in condition #3, any remaining bed authorization not licensed by that date shall be forfeited.

Date Certificate Issued: November 13, 2015

Steven Saxe, Director

This Certificate is not transferable.

Certificate of Need #1350EA

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Conditions

- (1) Yakima Valley Memorial Hospital Association dba Memorial Home Care Services agrees with the project description as stated above. Memorial Home Care Services further agrees that any change to the project as described in the project description is a new project and requires a new Certificate of Need.
- (2) To ensure the project is not delayed for lack of funds raised through charitable donations:
 - a. If 50% of the funds have not been raised by October 31, 2016 identified as the construction contract award date Yakima Valley Memorial Hospital Association shall provide the bridge loan to Memorial Home Care Services for the remaining funds to complete the project. OR,
 - b. If 50% of the funds have been raised by the October 31 deadline, but 100% of the project funds have not been raised by December 31, 2016 the date represented in the amendment application Yakima Valley Memorial Hospital Association shall provide the bridge loan to Memorial Home Care Services for the remaining funds to complete the project.
- (3) Any remaining bed authorization not licensed by September 30, 2017 shall be forfeited.

- Licensing and/or survey data provide by the Department of Health's Investigations and Inspections Office
- Profession compliance data provided by the Nursing Quality Assurance Commission, Medical Quality Assurance Commission, and Health Systems Quality Assurance Office of Customer Service.
- Data obtained from the Memorial Home Care Services and Yakima Valley Memorial Hospital Association websites
- Data obtained from the Washington State Employment Security Department website
- Information obtained from the Center for Medicare and Medicaid Services website (<u>http://www.medicare.gov</u>)
- Washington State Secretary of State website at <u>www.sos.wa.gov</u>
- Washington State Department of Revenue website at <u>www.dor.wa.gov</u>
- Certificate of Need historical files

CONCLUSION

For the reasons stated in this evaluation, the application submitted by Memorial Home Care Services proposing to amend Certificate of Need #1350E for increase in costs and removal of the condition that phase two must be completed by December 31, 2015 is consistent with applicable criteria of the Certificate of Need Program, provided that Memorial Home Care Services agrees to the following in its entirety.

Project Description

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