# STATE OF WASHINGTON DEPARTMENT OF HEALTH

Olympia, Washington 98504

April 4, 2016

CERTIFIED MAIL # 7009 0960 0000 5565 0666

Hannah Lahrson, Practice Administrator Seattle Orthopedic Center 2409 N. 45<sup>th</sup> St Seattle, WA 98101

RE: Certificate of Need Application #16-05

### Dear Ms. Lahrson:

Enclosed is Certificate of Need #1570 issued to Proliance Surgeons Inc., P.S. dba Seattle Orthopedic Center to establish a 2-operating room multispecialty ambulatory surgery center in Seattle within North King County. 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. 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:

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

Physical Address:
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:

Mailing Address: Adjudicative Service Unit Mail Stop 47879 Olympia, WA 98504-7879 Physical Address
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,

Bart Eggen

Acting Director, 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 #1570 is issued to:

**Legal Name of Applicant:** 

Proliance Surgeons Inc., P.S. dba Seattle Orthopedic Center

Address of Applicant:

2409 North 45th Street Seattle, WA 98101

Type of Service:

**Ambulatory Surgery Center** 

**Facility Name:** 

Seattle Orthopedic Center

2409 North 45th Street

Facility Address:

Seattle, WA 98101

## ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED MARCH 23, 2016, (CN App #16-05)

### **PROJECT DESCRIPTION:**

This certificate approves the establishment of a two-operating room ambulatory surgery center in Seattle, within North King County. The surgery center would serve patients ages 12 years and older who require orthopedic, ENT, eye, endocrine, digestive, GYN, neurosurgery, plastic, urologic, vascular, and general surgery that can be appropriately performed in an outpatient setting.

Service Area

North King County

**Conditions:** 

See attached

**Approved Capital Expenditure** 

There is no capital expenditure associated with this project

This Certificate authorizes commencement of the project from <u>April 4, 2016</u> to <u>April 4, 2018</u>, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: April 4, 2016

Bart Eggen, Acting Director

Community Health Systems

This Certificate is not transferable.

## Certificate of Need #1570

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## **Conditions**

- 1. Proliance Surgeons, Inc., P.S. dba Seattle Orthopedic Center agrees with the project description as stated above. Proliance Surgeons, Inc., P.S. dba Seattle Orthopedic Center further agrees that any change to the project as described in the project description is a new project that requires a new Certificate of Need.
- 2. Before commencement of the project, Proliance Surgeons, Inc., PS dba Seattle Orthopedic Center must provide to the department, for review and approval, a final copy of the Admission Policy for Seattle Orthopedic Center. The policy must include the required non-discrimination policy, and must identify the admitting process and appropriate candidates for outpatient surgery.
- 3. The approved Admission Policy must be posted on the surgery center webpage in the same location that the surgery center's other patient forms are located.
- 4. Before commencement of the project, Proliance Surgeons, Inc., PS dba Seattle Orthopedic Center must provide to the department, for review and approval, a final copy of the Charity Care Policy for Seattle Orthopedic Center. This policy must be facility-specific and shall include the procedure for notifying patients of charity care. It must also include the process one must use to obtain charity care.
- 5. The approved Charity Care Policy must be posted on the surgery center webpage in the same location that the surgery center's other patient forms are located.
- 6. Proliance Surgeons Inc., P.S. dba Seattle Orthopedic Center must maintain Medicare and Medicaid certification.
- 7. Proliance Surgeons Inc., P.S. dba Seattle Orthopedic Center will provide charity care in compliance with the charity care policies reviewed and approved by the Department of Health. Seattle Orthopedic Center will use reasonable efforts to provide charity care in an amount comparable to or exceeding the regional average amount of charity care provided by affected hospitals in North King County. Currently, this amount is 2.20% of gross revenue and 4.09% of adjusted revenue. Seattle Orthopedic Center will maintain records documenting the amount of charity care it provides and demonstrating compliance with its charity care policies.
- 8. Proliance Surgeons Inc., P.S. will ensure that charity care information related to the ASC is accessible to patients by referencing it on the Patient Financial Responsibility information that is available via the web, in person, or any other means.