

# STATE OF WASHINGTON DEPARTMENT OF HEALTH

June 23, 2016

CERTIFIED MAIL # 7009 0960 0000 5564 6478

Lora Stamper, RN, MHA
Director of Clinical Operations
Seattle Reproductive Medicine
1505 Westlake Ave North, Suite 400
Seattle, Washington 98109

CN: 16-10

Dear Ms. Stamper:

Enclosed is Certificate of Need #1579 issued to Seattle Reproductive Surgery Center, LLC approving the establishment of a three operating room ambulatory surgery center consisting of one general operating room and two procedure rooms.

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

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# 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, 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 #1579 is issued to:

Legal Name of

Applicant:

Seattle Reproductive Medicine, Inc., PS

Address of Applicant:

1505 Westlake Ave North, Suite 400

Type of Service:

Ambulatory Surgery Center

Facility Name:

Seattle Reproductive Surgery Center, LLC

Facility Address:

1505 Westlake Ave North, Suite 400

# ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED JUNE 17, 2016 (CN App #16-10)

## **Project Description**

This certificate approves the establishment of a three operating room ambulatory surgical center consisting of one general operating room and two procedure rooms. Services to be provided are limited to outpatient reproductive and fertility services and fertility related urology surgical services.

#### Service Area

Central King Planning Area

#### **Conditions**

Conditions identified on page two

#### Approved Capital Expenditure

The approved estimated capital expenditure for this project is \$0

This Certificate authorizes commencement of the project from <u>June 23, 2016</u> to <u>June 23, 2018</u> unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: June 23, 2016

Bart Eggen, Acting Director

Office of Community Health Systems

This Certificate is not transferable

## Certificate of Need #1579 Page 2

### Conditions

- 1. Seattle Reproductive Medicine, Inc. agrees with the project description as stated above. Seattle Reproductive Medicine, Inc. 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. Seattle Reproductive Medicine, Inc. will provide charity care in compliance with the charity care policy provided reviewed. Seattle Reproductive Medicine, Inc. will use reasonable efforts to provide charity care at Redmond Ambulatory Surgery Center, LLC in an amount comparable to or exceeding the average amount of charity care provided by the hospitals in the King County Central Region. Currently, this amount is 1.64% of total revenue. Seattle Reproductive Medicine, Inc. will maintain records documenting the amount of charity care it provides and demonstrating compliance with its charity care policies.