

12/20/2018

Janis Sigman, Manager Certificate of Need Program Department of Health P.O. Box 47852 Olympia, WA 98504-7852 RECEIVED

DEC 20 2018

CERTIFICATE OF NEED PROGRAM DEPARTMENT OF HEALTH

Via electronic mail

Re: Bristol Hospice Letter of Intent for Hospice Services in the State of Washington

Dear Ms. Sigman:

Bristol Hospice, L.L.C. ("Bristol") is pleased to provide you this Letter of Intent ("LOI") to provide Hospice Services in Snohomish County in the State of Washington. In accordance with WAC 246-310-080 and 246-310-290, the following information is provided:

1. DESCRIPTION OF SERVICES PROPOSED

Bristol Hospice requests Certificate of Need approval to operate a Medicare Certified and Medicaid Eligible Hospice Agency.

2. ESTIMATED COST

The estimated cost is \$10,000.00

3. SERVICE AREA

The Service area will be Snohomish County, Washington.

Please do not hesitate to contact us should any aspect of this proposal require clarification.

Thank you very much.

Sincerely,

Hyrum Kirton
Chief Executive Officer

Bristol Hospice, L.L.C.



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Via electronic mail

Re: Bristol Hospice Letter of Intent for Hospice Services in the State of Washington

Dear Ms. Sigman:

Bristol Hospice, L.L.C. ("Bristol") is pleased to provide you this Letter of Intent ("LOI") to provide Hospice Services in Thurston County in the State of Washington. In accordance with WAC 246-310-080 and 246-310-290, the following information is provided:

1. DESCRIPTION OF SERVICES PROPOSED

Bristol Hospice requests Certificate of Need approval to operate a Medicare Certified and Medicaid Eligible Hospice Agency.

2. ESTIMATED COST

The estimated cost is \$10,000.00

3. SERVICE AREA

The Service area will be Thurston County, Washington.

Please do not hesitate to contact us should any aspect of this proposal require clarification.

Thank you very much.

Singerely

Hyrum Kirton

Chief Executive Officer

Bristol Hospice, L.L.C.