



RECEIVED

Janis Sigman, Program Manager
Certificate of Need Program
Washington State Department of Health
111 Israel Road SE
Tumwater, WA 98501

MAY 0 1 2019

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Re: Letter of Intent: Expansion of FKC Columbia Basin Dialysis Facility in Benton ESRD Planning Area

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Qualicenters Inland Northwest, LLC intends to file a certificate of need to expand its existing kidney dialysis center, d.b.a Fresenius Kidney Care Columbia Basin ("FKC Columbia Basin"). In accordance with WAC 246-310-080, the following information is provided:

1. Description of the services proposed:

A 4-station expansion of the existing facility d.b.a. FKC Columbia Basin in the Benton County ESRD Dialysis Planning Area.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$246,289.

3. Description of the Service Area:

The service area is the Benton County ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care



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MAY 0 1 2019

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Re: Letter of Intent: Expansion of FKC Aberdeen Dialysis Facility in Grays Harbor ESRD Planning Area

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Renal Care Group Northwest, Inc. intends to file a certificate of need to expand its existing kidney dialysis center, d.b.a Fresenius Kidney Care Aberdeen ("FKC Aberdeen"). In accordance with WAC 246-310-080, the following information is provided:

1. Description of the services proposed:

A 5-station expansion of the existing facility d.b.a. FKC Aberdeen in the Grays Harbor County ESRD Dialysis Planning Area.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$245,573.

3. Description of the Service Area:

The service area is the Grays Harbor County ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care





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CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Re: Letter of Intent: Expansion of FKC Aberdeen Dialysis Facility in Grays Harbor ESRD Planning Area

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Renal Care Group Northwest, Inc. intends to file a certificate of need to expand its existing kidney dialysis center, d.b.a Fresenius Kidney Care Aberdeen ("FKC Aberdeen"). In accordance with WAC 246-310-080, the following information is provided:

1. <u>Description of the services proposed:</u>

A 5-station expansion of the existing facility d.b.a. FKC Aberdeen in the Grays Harbor County ESRD Dialysis Planning Area.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$312,548.

3. Description of the Service Area:

The service area is the Grays Harbor County ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care





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CERTIFICATE OF NEED PROGRAM DEPARTMENT OF HEALTH

Janis Sigman, Program Manager Certificate of Need Program Washington State Department of Health 111 Israel Road SE Tumwater, WA 98501

Re: Letter of Intent: Establishment of FKC Green River Dialysis Facility in King Ten ESRD Planning Area

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Renal Care Group Northwest, Inc. intends to file a certificate of need to establish a new kidney dialysis center, d.b.a Fresenius Kidney Care Green River ("FKC Green River"). In accordance with WAC 246-310-080, the following information is provided:

1. Description of the services proposed:

Establishment of a new 11-station dialysis station facility, d.b.a. FKC Green River in the King Ten ESRD Dialysis Planning Area. FKC Green River will also include an additional one (1) isolation station.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$2,449,606.

3. Description of the Service Area:

The service area is the King Ten ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care





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CERTIFICATE OF NEED PROGRAM DEPARTMENT OF HEALTH

Janis Sigman, Program Manager
Certificate of Need Program
Washington State Department of Health
111 Israel Road SE
Tumwater, WA 98501

Re: Letter of Intent: Establishment of FKC Green River Dialysis Facility in King Ten ESRD Planning Area

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Renal Care Group Northwest, Inc. intends to file a certificate of need to establish a new kidney dialysis center, d.b.a Fresenius Kidney Care Green River ("FKC Green River"). In accordance with WAC 246-310-080, the following information is provided:

1. Description of the services proposed:

Establishment of a new 11-station dialysis station facility, d.b.a. FKC Green River in the King Ten ESRD Dialysis Planning Area. FKC Green River will also include an additional one (1) isolation station.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$3,117,680.

3. Description of the Service Area:

The service area is the King Ten ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care





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Tumwater, WA 98501

MAY 0 1 2019

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Re: Letter of Intent: Establishment of FKC Pierce Dialysis Facility in Pierce Two ESRD Planning Area

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Renal Care Group Northwest, Inc. intends to file a certificate of need to establish a new kidney dialysis center, d.b.a Fresenius Kidney Care Pierce ("FKC Pierce"). In accordance with WAC 246-310-080, the following information is provided:

1. Description of the services proposed:

Establishment of a new 7-station dialysis station facility, d.b.a. FKC Pierce in the Pierce Two ESRD Dialysis Planning Area. FKC Pierce will also include an additional one (1) isolation station.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$5,110,838.

3. Description of the Service Area:

The service area is the Pierce Two ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care



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111 Israel Road SE Tumwater, WA 98501

CERTIFICATE OF NEED PROGRAM DEPARTMENT OF HEALTH

Re: Letter of Intent: Establishment of FKC Pierce Dialysis Facility in Pierce Two ESRD **Planning Area**

Dear Ms. Sigman:

Pursuant to Washington Administrative Code ("WAC") 246-310-806, for Nonspecial Circumstance Cycle 1, Renal Care Group Northwest, Inc. intends to file a certificate of need to establish a new kidney dialysis center, d.b.a Fresenius Kidney Care Pierce ("FKC Pierce"). In accordance with WAC 246-310-080, the following information is provided:

1. <u>Description of the services proposed:</u>

Establishment of a new 7-station dialysis station facility, d.b.a. FKC Pierce in the Pierce Two ESRD Dialysis Planning Area. FKC Pierce will also include an additional one (1) isolation station.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditures are \$6,504,703.

Description of the Service Area:

The service area is the Pierce Two ESRD Dialysis Planning Area.

Please feel free to contact me if there are any questions on this letter of intent. I can be reached at 503.507.4967 or Casey.Stowell@fmc-na.com.

Sincerely,

Casey Stowell

Regional Vice President - Pacific Northwest

Fresenius Medical Care





Luca Chiastra, Regional Vice President 5251 DTC Parkway, Suite 500, Greenwood Village, CO 80111 T +1 720 236 2769 | F +1 720 941 6675

May 1, 2019

Ms. Janis Sigman. Manager Certificate of Need Program Washington Department of Health 111 Israel Road SE Tumwater, WA 98501 RECEIVED

MAY 0 1 2019

CERTIFICATE OF NEED PROGRAM DEPARTMENT OF HEALTH

RE: Letter of Intent—Six Station Expansion, FMC Moses Lake Dialysis Center

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Inland Northwest Renal Care Group ("IN-RCG"); parent company-Fresenius Medical Holdings, Inc, hereby submits this letter of intent to expand its existing Moses Lake Dialysis Center in the Grant County Dialysis Planning Area. In conformance with the requirements of WAC, the following information is provided:

1. Description of the Services Proposed:

IN-RCG proposes to add 6 stations to the certificate-of-need approved FMC Moses Lake Dialysis Center, located at 847 E. Broadway Ave., Moses Lake, WA 98337. This facility will continue to offer in-center hemodialysis, home dialysis training, isolation capability and a dedicated bed station.

2. Estimated Cost of the Proposed Project:

The total estimated capital expenditure for this project is \$262,541. In the interest of transparency, it should be noted that of this total, \$91,800 for dialysis stations has already been expended as back-up equipment. Further, \$74,741 in capital expenses incurred as a result of the Center's relocation in 2014 were not included in the Department's determination of non-reviewability (DOR #14-24, May 30, 2014), where the relocation was approved. Thus, these \$74,741 in costs are included here as a project capital expense. This request would include \$96,000 in new, incremental costs for facility water treatment expansion.

3. Description of the Service Area:

The facility will provide services in the Grant County Dialysis Planning Area.

Please let me know if there are any questions regarding this request of the Department or if there are other questions you may have. I can be reached at 720-236-2769 or luca.chiastra@fmc-na.com. Thank you in advance for you timely assistance in this matter.

Yours Truly,

Luca Chiastra

Regional Vice President Fresenius Kidney Care

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