



STATE OF WASHINGTON  
**DEPARTMENT OF HEALTH**  
*Olympia, Washington 98504*

September 11, 2020

Jamie Brown, Vice President of Home Services  
EmpRes Healthcare/Eden Health  
4601 NE 77<sup>th</sup> Avenue, Suite #300  
Vancouver, WA 98662

*Sent via email: [jbrown3@eden-health.com](mailto:jbrown3@eden-health.com)*

**RE: CN Application #20-05**

Dear Ms. Brown:

Attached is Certificate of Need #1857 issued to EmpRes Healthcare Group, Inc. The certificate approves the establishment of Medicare and Medicaid-certified home health services for the residents of Clark County, within Washington State.

The certificate is not an 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:

Jamie Brown, Vice President of Home Services  
EmpRes Healthcare/Eden Health  
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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:

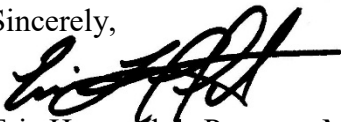
Mailing Address:  
Department of Health  
Adjudicative Service Unit  
Mail Stop 47879  
Olympia, WA 98504-7879

Physical Address  
Department of Health  
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 the Certificate of Need Program at (360) 236-2955.

Sincerely,



Eric Hernandez, Program Manager  
Certificate of Need  
Office of Community Health Systems

Attachment

CC: Bob McGuirk, [rmconsulting1@qwestoffice.net](mailto:rmconsulting1@qwestoffice.net)



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 #1857 is issued to:**

**Applicant’s Legal Name:** EmpRes Healthcare Group, Inc.  
**Applicant’s Address:** 4601 NE 77<sup>th</sup> Avenue, Suite 300  
Vancouver, Washington 98662  
**Facility Type** Home Health  
**Project Type** Home Health  
**Facility Name:** Eden Home Health of Clark County, LLC  
**Facility Address:** 8401 NE 8<sup>th</sup> Way,  
Vancouver, Washington 98664

**ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT’S RECORD AND EVALUATION DATED SEPTEMBER 11, 2020 (CN APP # 20-05 )**

**Project Description**

This Certificate of Need approves EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC to establish a Medicare and Medicaid-certified home health agency in Vancouver to serve the residents of Clark County, Washington. Home health services provided directly by the new agency include: skilled nursing, physical therapy, occupational therapy, speech therapy, certified home health aide services, medical social work services, and telemedicine.

**Service Area**  
Clark County

**Conditions**

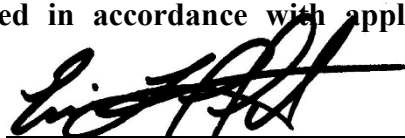
1. Approval of the project description as stated above. EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC further agrees that any change to the project as described in the project description is a new project that requires a new Certificate of Need.
2. EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC shall finance the project using the financing as described in the application.
3. EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC will maintain Medicare and Medicaid certification regardless of ownership.
4. Prior to providing Medicare and Medicaid certified home health services in Clark County, EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC will provide a listing of key staff to the Certificate of Need Program. The listing of key staff shall include each staff person’s name and professional license number.
5. Prior to providing Medicare and Medicaid certified home health services in Clark County, EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC will provide the Certificate of Need Program with an updated copy of the charity care policy which is on Eden or EmpRes letterhead.
6. Prior to providing Medicare and Medicaid home health services in Clark County, EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC shall provide the Certificate of Need Program with a copy of the signed and executed medical director agreement. The executed agreement shall be consistent with the draft agreement provided to the department on April 24, 2020.
7. Prior to providing Medicare and Medicaid certified home health services in Clark County, EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC shall provide the Certificate of Need Program with a copy of the signed and executed lease agreement. The executed agreement shall be consistent with the draft agreement provided in the application.
8. EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC shall provide the Certificate of Need Program with a copy of the forms it is sending the fiscal intermediary, National Government Services.
9. The service area for this Medicare and Medicaid-certified home health agency is Clark County. EmpRes Healthcare Group, Inc. dba Eden Home Health of Clark County, LLC must provide home health services to the entire county for which this Certificate of Need is granted.

**Approved Capital Expenditure**

The approved capital expenditure for the establishment of the Clark County home health agency is \$38,000.

**This Certificate authorizes commencement of the project from September 11, 2020 to September 11, 2022 unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.**

**Date Certificate Issued: September 11, 2020**

  
Eric Hernandez, Program Manager  
Community Health Systems

**This Certificate is not transferable**