



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

November 16, 2012

CERTIFIED MAIL #7011 1570 0002 7809 5438

Gina Drummond, CEO
Hospice of Spokane
121 South Arthur St.
Spokane, Washington 99210

Dear Ms. Drummond:

Enclosed is Certificate of Need #1493 issued to Hospice of Spokane for the establishment of a new 12-bed hospice care center Spokane within Spokane 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. Any affected 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

Other Than By Mail
Department of Health
Adjudicative Service Unit
111 Israel Road SE
Tumwater, WA 98501

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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 question, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,

A handwritten signature in black ink, appearing to read "Steven M. Saxe". The signature is fluid and cursive, with a large, sweeping initial "S".

Steven M. Saxe, FACHE
Director, Health Professions and Facilities

Enclosure

cc: Linda Foss, Department of Health, Investigations and Inspections Office
Karen Stricklett, Department of Health, Customer Service Office



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 #1493 is issued to:

Legal Name of Applicant: Hospice of Spokane
Address of Applicant: 121 South Arthur Street, Spokane, Washington 99210
Type of Service: Hospice Care Center
Facility Name: Hospice House #2
Facility Address: 102 West Rhodes, Spokane, Washington 99208

ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION OF OCTOBER 29, 2012, (App #12-17).

Project Description:

This certificate approves the construction of a 12-bed hospice care center located in the city of Spokane. Hospice of Spokane will be Medicare and Medicaid certified. Services to be provided include, but not limited to, General Inpatient Care (GIP), Inpatient Respite, and Routine Home Care.

Service Area
Spokane County

Conditions

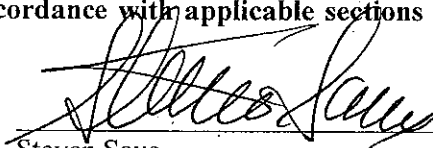
1. Hospice of Spokane agrees with the project description stated above. Hospice of Spokane further agrees that any change to the project as described in the project description above is a new project that requires a new Certificate of Need.
2. Hospice of Spokane's hospice care center shall be available to all residents of Spokane County as space is available.

Approved Capital Expenditure

The approved capital expenditure associated with this project is \$5,138,924.

This Certificate authorizes commencement of the project from November 16, 2012, to November 16 2014, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

Date Certificate Issued: November 16, 2012


Steven Saxe
Director, Health Professions and Facilities

This Certificate is not transferable.