



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

November 20, 2015

CERTIFIED MAIL # 7015 0640 0000 6441 5690

Carol Taylor, Regional Director  
Group Health Cooperative  
201 – 16<sup>th</sup> Avenue East, #D640  
Seattle, Washington 98112

RE: CN15-28

Dear Ms. Taylor:

Enclosed is Certificate of Need #1559 issued to Group Health Cooperative to establish an eleven operating room ambulatory surgery center in Seattle within King 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. 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:

Carol Taylor, Regional Director  
Group Health Cooperative  
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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:  
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,



Steven M. Saxe, FACHE  
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 #1559 is issued to:**

**Legal Name of Applicant:** Group Health Cooperative  
**Address of Applicant:** 201 16<sup>th</sup> Avenue East, D640 Seattle WA, 98112  
**Type of Service:** Ambulatory Surgery Center  
**Facility Name:** Group Health Capitol Hill Ambulatory Surgery Center  
**Facility Address:** 201 16<sup>th</sup> Avenue East, Suite CMB-2 Seattle, WA 98112

**ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED NOVEMBER 16, 2015, (CN App #15-28)**

**PROJECT DESCRIPTION:**

This project approves the other establishment of an eleven operating room ambulatory surgery center in Seattle within King County. The surgery center will be known as the Group Health Capitol Hill Ambulatory Surgery Center. The types of surgeries to be performed at the ambulatory surgery center include general surgery, orthopedics, otolaryngology, ophthalmology, urology, gynecology, plastic surgery, cardiology (cardioversions), anesthesiology, and interventional radiology. The surgery center provides care to patients one year of age and older.

**Service Area**

King and Snohomish Counties as described in the application

**Conditions:**


See page 2

**Approved Capital Expenditure**

The approved capital expenditure associated with this project is \$920,000

**This Certificate authorizes commencement of the project from November 20, 2015 to November 20, 2017, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.**

**Date Certificate Issued:** November 20, 2015

  
Steven Saxe, Director

**This Certificate is not transferable.**

## **Certificate of Need #1559**

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#### **Conditions**

1. Group Health Cooperative agrees with the project description as stated above. Group Health Cooperative further agrees that any change to the project as described in the project description is a new project and requires a new Certificate of Need.
2. Adult elective percutaneous coronary interventions (PCI), as defined in WAC 246-310-705, may not be performed at the Group Health Capitol Hill Ambulatory Surgery Center.
3. Consistent with Revised Code of Washington 70.38.115(3), the Group Health Capitol Hill Ambulatory Surgery Center may not be sold, leased, or have a change in control without first obtaining a Certificate of Need.