

November 30, 2018

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Janis Sigman, Manager
Certificate of Need Program
Washington State Department of Health
PO Box 47852
Olympia, Washington 98504-7852

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CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Dear Ms. Sigman,

This letter is to notify the Department of Health that Clallam County Public Hospital District No. 2, dba Olympic Medical Center, intends to seek Certificate of Need approval to establish a Medicare-certified hospice agency to serve residents of Clallam County, Washington.

Upon receipt of a Certificate of Need, Olympic Medical Center will provide Medicare and Medicaid hospice services to terminally-ill residents of Clallam County, Washington. Our current estimate of capital costs is \$150,000.

Would you please provide us with all criteria and standards by which you will evaluate our application? If I can answer any questions or if you need further information, please contact me.

Sincerely,



Eric Lewis
Chief Executive Officer
elewis@olympicmedical.org
(360) 417-7705