

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES
OFFICE OF THE COMMISSIONER

SEAN PARNELL, GOVERNOR

P.O. BOX 110601
JUNEAU, ALASKA 99811-0601
PHONE: (907) 465-3030
FAX: (907) 465-3068

Certified, Return Receipt Requested

Susan Humphrey-Barnett, Area Operations Administrator
Providence Health and Services Alaska
3200 Providence Drive
P.O. Box 196604
Anchorage, Alaska 99519-6604

Dear Ms. Humphrey-Barnett:

The review of the Providence Health and Services Certificate of Need (CON) application for a long-term nursing care facility to be known as Providence Transitional Care Center is complete. I have determined that the application has met the applicable criteria for approval to the satisfaction of the State of Alaska Department of Health and Social Services.

In accordance with A.S. 18.07.031-111 and 7 AAC 07.001-900 Providence Health and Services is authorized to construct a 36,000 square foot facility with 50 licensed beds which are replacement beds from Providence Extended Care Center.

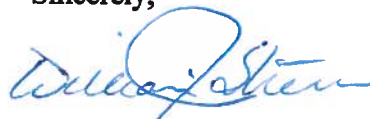
Any construction and changes in bed capacity utilizing shelled space in the Transitional Care Center must go through the Certificate of Need process and be approved by the Department regardless of cost as outlined in AS 18.07.031.

The total cost of the project is \$16,450,000.

The anticipated completion date is January 31, 2013.

Under 7 AAC 07.080, if you are dissatisfied with this decision you are entitled to a hearing if the request for a hearing is received in writing by the department no later than 30 days from the date of this letter.

Sincerely,



William J. Streur
Commissioner

Attachments: Staff review of CON application
Certificate of Need