

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES
DIVISION OF PUBLIC HEALTH
SECTION OF HEALTH PLANNING & SYSTEMS DEVELOPMENT

SARAH PALIN, GOVERNOR

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August 12, 2008

Certified, Return Receipt Requested

Katherine Gottlieb, MBA
President/CEO
Southcentral Foundation
4501 Diplomacy Drive
Anchorage, Alaska 99508

Dear Ms. Gottlieb:

We have received the Southcentral Foundation letter providing notification of the change in location and scope of the project and the intent to submit a modified Certificate of Need application. We look forward to receiving the document and will be prepared to review it when it arrives. There are several "housekeeping" items that need to be completed prior to receipt of the application as follows:

- The Request for Modification of a Certificate of Need document that was submitted does not have an original signature. Please sign a copy and return;
- The Progress Report Form that was submitted does not have an original signature. Please sign a copy and return; and
- Provide an estimate of the increase in cost, if any related to the modification. (In this case, the original CON was approved for \$6,637,084, which was the cost of the portion of the facility that was for Level V services. Since the number of Level V beds is being increased to 44 beds, it is expected that the cost for the a additional 32 beds will increase the cost that is reviewed under the CON process).

You may call me at 465-3001 or send an email to dpierce@alaska.gov if you have any questions.

Sincerely,

David Pierce, MPH
Certificate of Need Coordinator