

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

DIVISION OF HEALTH CARE SERVICES
HEALTH PLANNING AND SYSTEMS DEVELOPMENT

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April 13, 2010

Certified, Return Receipt Requested #7007 0710 0000 1695 2111

Eric Coulter, M.D.
3601 C Street
Suite 1134
Anchorage, Alaska 99503

Dear Dr. Coulter:

Thank you for your letter of April 2, 2010, and subsequent cost estimates requesting a determination on whether a certificate of need (CON) is required for the development of a one suite ambulatory surgery center at 235 East 8th Avenue in Anchorage, in a building you recently purchased.

I have determined that a CON is not required under 7 AAC 07.031 based on the following information:

1. A certified cost estimate for the project was provided by Rohde and Associates estimating the cost of the building for the center (2,475 square feet) at \$238,517 and \$58,500 in architect's fees.
2. Renovation costs for the center were estimated at \$574,750.
3. Costs estimated for equipment provided by Surgery Center Services are estimated at \$218,693.
4. Other office equipment to be purchased is estimated at \$5,800.
5. The total cost estimate of \$1,096,260 is below the current threshold that requires submission of a CON application under AS 18.07.031.

If plans or cost estimates change regarding renovation, equipment, or other purchases and if they are anticipated to be more than the current CON threshold (\$1,300,000), this office must be notified as a Certificate of Need may be required.

If you are dissatisfied with this determination you may request reconsideration under 7 AAC 07.033, or may appeal the decision under 7 AAC 07.080. An appeal or request for determination must be postmarked no later than 30 days after publication of the public notice.

Sincerely,



Karen Lawfer
Certificate of Need Coordinator