

Oregon Hospital Financial Report (FR-3) 2015

Section 1: Hospital Identification and Contact Information

Hospital Name	Good Samaritan Hospital Corvallis, dba Good Samaritan Regional Medical Center
Hospital System (Samaritan, Providence, None, etc.)	Samaritan Health Services
Administrator's Address	3600 NW Samaritan Drive
City	Corvallis
County	Benton
State	Oregon
Zip Code	97330
Administrator's Phone	██████████
Administrator's E-mail	██████████
Administrator's Name	Becky Pape
Administrator's Title	VP/CEO, Good Samaritan Regional Medical Center
CFO's Name	Dan Smith
Name of Person completing this form	Aaron Crittenden
Title	Finance Reporting Analyst
E-mail Address for Person completing this form	██████████
Direct Phone for Person completing this form	██████████
Address (if different than Hospital)	PO Box 3000
City (if different than Hospital)	Corvallis, OR
Zip Code (if different than Hospital)	97339-3000

All Data should be based on the Audited Financial Information

Section 2: Gross Patient Revenue	
Inpatient	\$371,872,169
Outpatient	\$234,557,576
LTC ICF/SNF	
Clinic	\$94,646,452
Other Patient revenue (please identify below)	
- Home Health	\$7,422,736
-	
Gross Hospital Patient Revenue	\$708,498,934

Section 3: Deductions from Gross Patient Revenue	
Contractuals	
Medicare	\$219,687,050
Medicaid	\$66,626,003
Other Contractuals	\$55,301,311
Uncompensated Care	
Bad Debt	\$893,135
Charity Care	\$9,454,892
Total Deductions from Patient Revenue	\$351,962,391

Section 4: Net Patient Revenue	
Net Patient Revenue	\$356,536,543

Section 5: Net Income	
Net Patient Revenue	\$356,536,543
Other Operating Revenue	\$14,064,524
Total Operating Revenue	\$370,601,067
Total Operating Expense	\$362,168,699
Operating Income	\$8,432,368
Net Nonoperating Revenue (Expense)	\$1,361,685
Net Income	\$9,794,053

Section 6: Property, Plant & Equipment	
Property, Plant & Equipment	\$220,705,140
Accumulated Depreciation	-\$122,377,805
Net Property, Plant & Equipment	\$98,327,335

After completing, please return this form and a copy of the hospital's audited financial statement to:

ohpr.datasubs@state.or.us

Or send hard copy to:

Oregon Health Authority
Office of Health Analytics
500 Summer St. NE, E-64
Salem, OR 97301