

Oregon Hospital Financial Report (FR-3)

Fiscal Year 2016

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	\$377,358,564
Outpatient	\$280,854,654
LTC ICF/SNF	
Clinic	\$99,227,198
Other Patient revenue (please identify below)	
- Home Health	\$7,381,654
-	
Gross Hospital Patient Revenue	\$764,822,070

Section 3: Deductions from Gross Patient Revenue	
Contractuals	
Medicare	\$230,523,780
Medicaid	\$76,621,725
Other Contractuals	\$62,251,245
Uncompensated Care	
Bad Debt	\$4,013,261
Charity Care	\$9,265,709
Total Deductions from Patient Revenue	\$382,675,720

Section 4: Net Patient Revenue	
Net Patient Revenue	\$382,146,350

Section 5: Net Income	
Net Patient Revenue	\$382,146,350
Other Operating Revenue	\$15,752,541
Total Operating Revenue	\$397,898,891
Total Operating Expense	\$408,077,455
Operating Income	-\$10,178,563
Net Nonoperating Revenue (Expense)	\$936,255
Net Income	-\$9,242,308

Section 6: Property, Plant & Equipment	
Property, Plant & Equipment	\$224,859,886
Accumulated Depreciation	-\$130,376,623
Net Property, Plant & Equipment	\$94,483,262

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

OHA.HealthAnalyticsDataSubs@state.or.us

Or send hard copy to:

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