

# Oregon Hospital Financial Report (FR-3)

## Fiscal Year Ended June 30, 2020

### Section 1: Hospital Identification and Contact Information

Hospital Name	LOWER UMPQUA HOSPITAL
Hospital System (Samaritan, Providence, None, etc.)	
Administrator's Address	600 RANCH ROAD
City	REEDSPORT
County	DOUGLAS
State	OREGON
Zip Code	97467
Administrator's Phone	
Administrator's E-mail	
Administrator's Name	PAUL CONNOLLY
Administrator's Title	INTERIM CEO
CFO's Name	KELLEY GENTRY
Name of Person completing this form	KELLEY GENTRY
Title	INTERIM CFO
E-mail Address for Person completing this form	
Direct Phone for Person completing this form	
Address (if different than Hospital)	
City (if different than Hospital)	
Zip Code (if different than Hospital)	

All Data should be based on the Audited Financial Information

Section 2: Gross Patient Revenue	
Inpatient	\$6,318,776
Outpatient	\$34,893,376
LTC ICF/SNF	
Clinic	\$5,199,840
Other Patient revenue (please identify below)	
- Swing Bed	\$763,848
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<b>Gross Hospital Patient Revenue</b>	<b>\$47,175,840</b>

Section 3: Deductions from Gross Patient Revenue	
<b>Contractuals</b>	
Medicare	\$12,912,867
Medicaid	\$4,788,647
Other Contractuals	\$3,977,214
<b>Uncompensated Care</b>	
Bad Debt	\$1,369,297
Charity Care	\$236,888
<b>Total Deductions from Patient Revenue</b>	<b>\$23,284,913</b>

Section 4: Net Patient Revenue	
<b>Net Patient Revenue</b>	<b>\$23,890,927</b>

Section 5: Net Income	
Net Patient Revenue	\$23,890,927
Other Operating Revenue	\$1,976,775
<b>Total Operating Revenue</b>	<b>\$25,867,702</b>
<b>Total Operating Expense</b>	<b>\$29,198,545</b>
<b>Operating Income</b>	<b>-\$3,330,843</b>
<b>Net Nonoperating Revenue (Expense)</b>	<b>\$3,305,892</b>
<b>Net Income</b>	<b>-\$24,951</b>

Section 6: Property, Plant & Equipment	
<b>Property, Plant &amp; Equipment</b>	<b>\$18,355,573</b>
<b>Accumulated Depreciation</b>	<b>\$13,501,157</b>
<b>Net Property, Plant &amp; Equipment</b>	<b>\$4,854,416</b>

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

[hdd.admin@dhsosha.state.or.us](mailto:hdd.admin@dhsosha.state.or.us)

Or send hard copy to:

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