Sect	tion 1: Costs						
	Hospital Name Portland Adventist Medical Center						
	Hospital System Adventist Health West Reporting Period 1/1/2021-12/31/2021						
	Con						
		Phone Number: 503-251-6346			Email: morganoh@ah.org		
			Reviewed By:				
	Please indicate what type of cost accounting system is being used for this reporting. (Check all that apply and explain.)		Cost accounting Cost to Charge system Ratio		Other (evulsin)		
					Other (explain)		
	Community Benefit Categories	Column A	Column B	Column C	Column D	Column E	
Row	Charity Care and Public Programs	Patient Visits	Total community	Direct offsetting	Net community benefit		
KOW			benefit expense	revenue	expense (B-C)		
1	Charity care at cost	4,859	\$4,409,890	\$0	\$4,409,890		
	Unreimbursed costs of public programs:						
2	Medicaid/Managed Medicaid Plans	51,344	\$86,038,120	\$70,485,280	\$15,552,840		
3	Medicare/Managed Medicare Plans				\$0		
4	Other public programs	50.000	\$0	\$0			
5	Charity Care and Public Programs Total (sum of lines 1 through 4)	56,203	\$90,448,010	\$70,485,280	\$19,962,730		
6	What percentage of Charity Care dollars granted represented a discount of 100% of charges?	34.0%					
	Other Benefits	Encounters	Total community benefit expense	Direct offsetting revenue	Net community benefit expense (B-C)	Description of Activities	
7	Community health improvement services	2,055	\$4,238,624	\$0	\$4,238,624	Community Health Education, Community Based Clinical Services, Utitity Center	
8	Research	n/a			\$0		
	Health professions education	n/a	\$283,600	\$48,151		Nursing Students, School of Nursing	
10	Subsidized health services	n/a	* 40.007		\$0		
11	Cash and in-kind contributions to other community groups	n/a	\$10,307		\$10,307	In-kind donations- equipment donations Cash: PACS, BG Healthcare, Portland Rescue Mission	
	Community building activities	n/a	0404.454		\$0		
	Community benefit operations	n/a	\$194,454 \$4,736,085	#40.454	\$194,454 \$4,678,834	Assigned staff	
14	Other Benefits Totals (sum of lines 7 through 13)	2,055	\$4,726,985	\$48,151	\$4,678,834		
15	Community Benefits Totals (line 5 plus line 14)	58,258	\$95,174,995	\$70,533,431	\$24,641,564		

Please note: If the amount in Column E is equal to or greater than the amount in Column D, leave Columns D, E and F blank.