

# Oregon Hospital Financial Report (FR-3)

## Fiscal Year 2021

### Section 1: Hospital Identification and Contact Information

Hospital Name	Curry Health District
Hospital System (Samaritan, Providence, None, etc.)	none
Administrator's Address	94220 4th Street
City	Gold Beach
County	Curry
State	OR
Zip Code	97444
Administrator's Phone	[REDACTED]
Administrator's E-mail	[REDACTED]
Administrator's Name	Virginia Williams
Administrator's Title	CEO
CFO's Name	Cameron Marlowe
Name of Person completing this form	Kylie McCloskey
Title	Controller
E-mail Address for Person completing this form	[REDACTED]
Direct Phone for Person completing this form	[REDACTED]
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	\$8,100,666
Outpatient	\$77,912,354
LTC ICF/SNF	\$0
Clinic	\$10,764,694
Other Patient revenue (please identify below)	\$0
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<b>Gross Hospital Patient Revenue</b>	<b>\$96,777,714</b>

**Section 3: Deductions from Gross Patient Revenue**

**Contractuals**

Medicare	\$21,368,510
Medicaid	\$6,154,644
Other Contractuals	\$13,411,934

**Uncompensated Care**

Bad Debt	\$1,687,482
Charity Care	\$421,743
<b>Total Deductions from Patient Revenue</b>	<b>\$43,044,313</b>

**Section 4: Net Patient Revenue**

<b>Net Patient Revenue</b>	<b>\$53,733,401</b>
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**Section 5: Net Income**

Net Patient Revenue	\$53,733,401
Other Operating Revenue	\$228,742
<b>Total Operating Revenue</b>	<b>\$53,962,143</b>
<b>Total Operating Expense</b>	<b>\$48,404,370</b>
<b>Operating Income</b>	<b>\$5,557,773</b>
<b>Net Nonoperating Revenue (Expense)</b>	<b>\$9,317,971</b>
<b>Net Income</b>	<b>\$14,875,744</b>

**Section 6: Property, Plant & Equipment**

<b>Property, Plant &amp; Equipment</b>	<b>\$62,203,869</b>
<b>Accumulated Depreciation</b>	<b>\$23,884,942</b>
<b>Net Property, Plant &amp; Equipment</b>	<b>\$38,318,927</b>

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

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

Or send hard copy to:

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