

Oregon Hospital Financial Report (FR-3)

Fiscal Year - 2021

Section 1: Hospital Identification and Contact Information

Hospital Name	Lower Umpqua Hospital District
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	CEO
CFO's Name	John Chivers
Name of Person completing this form	John Chivers
Title	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	\$6,966,237
Outpatient	\$34,196,570
LTC ICF/SNF	\$362,560
Clinic	\$5,369,392
Other Patient revenue (please identify below)	
-	
-	
Gross Hospital Patient Revenue	\$46,894,759

Section 3: Deductions from Gross Patient Revenue

Contractuals	
Medicare	\$12,907,150
Medicaid	\$4,019,963
Other Contractuals	\$4,440,713
Uncompensated Care	
Bad Debt	\$724,751
Charity Care	\$149,740
Total Deductions from Patient Revenue	\$22,242,317

Section 4: Net Patient Revenue

Net Patient Revenue	\$24,652,442
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Section 5: Net Income

Net Patient Revenue	\$24,652,442
Other Operating Revenue	\$1,973,237
Total Operating Revenue	\$26,625,679
Total Operating Expense	\$32,099,134
Operating Income	-\$5,473,455
Net Nonoperating Revenue (Expense)	\$8,283,236
Net Income	\$2,809,781

Section 6: Property, Plant & Equipment

Property, Plant & Equipment	\$19,418,934
Accumulated Depreciation	\$14,332,197
Net Property, Plant & Equipment	\$5,086,737

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

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