

# Oregon Hospital Financial Report (FR-3)

## Fiscal Year - 2023

### Section 1: Hospital Identification and Contact Information

Hospital Name	Salem Health West Valley
Hospital System (Samaritan, Providence, None, etc.)	Salem Health Hospitals & Clinics
Administrator's Address	525 SE Washington St
City	Dallas
County	Polk
State	Oregon
Zip Code	97338
Administrator's Phone	
Administrator's E-mail	
Administrator's Name	Joshua Franke
Administrator's Title	Chief Project Officer
CFO's Name	James Parr
Name of Person completing this form	
Title	
E-mail Address for Person completing this form	
Direct Phone for Person completing this form	
Address (if different than Hospital)	890 Oak St SE
City (if different than Hospital)	Salem
Zip Code (if different than Hospital)	97301

All Data should be based on the Audited Financial Information

Section 2: Gross Patient Revenue	
Inpatient	\$757,914
Outpatient	\$113,438,570
LTC ICF/SNF	\$21,371,549
Clinic	\$4,421,326
Other Patient revenue (please identify below)	
-	
-	
<b>Gross Hospital Patient Revenue</b>	<b>\$139,989,359</b>

Section 3: Deductions from Gross Patient Revenue	
<b>Contractuals</b>	
Medicare	\$30,600,850
Medicaid	\$18,051,242
Other Contractuals	\$7,255,741
<b>Uncompensated Care</b>	
Bad Debt	\$1,850,591
Charity Care	\$3,630,633
<b>Total Deductions from Patient Revenue</b>	<b>\$61,389,057</b>

Section 4: Net Patient Revenue	
<b>Net Patient Revenue</b>	<b>\$78,600,302</b>

Section 5: Net Income	
Net Patient Revenue	\$78,600,302
Other Operating Revenue	\$584,177
<b>Total Operating Revenue</b>	<b>\$79,184,479</b>
<b>Total Operating Expense</b>	<b>\$59,012,014</b>
<b>Operating Income</b>	<b>\$20,172,465</b>
<b>Net Nonoperating Revenue (Expense)</b>	<b>\$0</b>
<b>Net Income</b>	<b>\$20,172,465</b>

Section 6: Property, Plant & Equipment	
<b>Property, Plant &amp; Equipment</b>	<b>\$24,848,876</b>
<b>Accumulated Depreciation</b>	<b>\$5,486,117</b>
<b>Net Property, Plant &amp; Equipment</b>	<b>\$19,362,759</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