

## Oregon Hospital Financial Report (FR-3) Fiscal Year - 2023

### Section 1: Hospital Identification and Contact Information

Hospital Name	Salem Health
Hospital System (Samaritan, Providence, None, etc.)	Salem Health Hospitals & Clinics
Administrator's Address	890 Oak St SE
City	Salem
County	Marion
State	Oregon
Zip Code	97301
Administrator's Phone	
Administrator's E-mail	
Administrator's Name	Cheryl Nester Wolfe
Administrator's Title	Chief Executive 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)	
City (if different than Hospital)	
Zip Code (if different than Hospital)	

**All Data should be based on the Audited Financial Information**

<b>Section 2: Gross Patient Revenue</b>	
Inpatient	\$1,351,989,008
Outpatient	\$1,005,402,336
LTC ICF/SNF	
Clinic	\$159,189,704
Other Patient revenue (please identify below)	
-	
-	
<b>Gross Hospital Patient Revenue</b>	<b>\$2,516,581,048</b>

<b>Section 3: Deductions from Gross Patient Revenue</b>	
<b>Contractuals</b>	
Medicare	\$914,986,440
Medicaid	\$345,622,846
Other Contractuals	\$242,451,617
<b>Uncompensated Care</b>	
Bad Debt	\$18,542,350
Charity Care	\$46,181,185
<b>Total Deductions from Patient Revenue</b>	<b>\$1,567,784,438</b>

<b>Section 4: Net Patient Revenue</b>	
<b>Net Patient Revenue</b>	<b>\$948,796,610</b>

<b>Section 5: Net Income</b>	
Net Patient Revenue	\$948,796,610
Other Operating Revenue	\$42,661,673
<b>Total Operating Revenue</b>	<b>\$991,458,283</b>
<b>Total Operating Expense</b>	<b>\$1,063,867,339</b>
<b>Operating Income</b>	<b>-\$72,409,056</b>
<b>Net Nonoperating Revenue (Expense)</b>	<b>-\$8,091,725</b>
<b>Net Income</b>	<b>-\$80,500,781</b>

<b>Section 6: Property, Plant &amp; Equipment</b>	
<b>Property, Plant &amp; Equipment</b>	<b>\$436,971,152</b>
<b>Accumulated Depreciation</b>	<b>\$295,525,213</b>
<b>Net Property, Plant &amp; Equipment</b>	<b>\$141,445,939</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