

# Oregon Hospital Financial Report (FR-3)

## Fiscal Year - 2024

### Section 1: Hospital Identification and Contact Information

Hospital Name	St Charles - Redmond Campus
Hospital System (Samaritan, Providence, None, etc.)	St Charles Health System, Inc.
Administrator's Address	2500 NE Neff Rd
City	Bend
County	Deschutes
State	Oregon
Zip Code	97701
Administrator's Phone	
Administrator's E-mail	
Administrator's Name	David Golda
Administrator's Title	VP Hospital Administrator
CFO's Name	Matt Swafford
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	\$105,299,539
Outpatient	\$269,298,113
LTC ICF/SNF	
Clinic	
Other Patient revenue (please identify below)	
-	
-	
<b>Gross Hospital Patient Revenue</b>	<b>\$374,597,652</b>

<b>Section 3: Deductions from Gross Patient Revenue</b>	
<b>Contractuals</b>	
Medicare	\$163,747,584
Medicaid	\$66,108,215
Other Contractuals	\$50,161,814
<b>Uncompensated Care</b>	
Bad Debt	\$0
Charity Care	\$8,863,083
<b>Total Deductions from Patient Revenue</b>	<b>\$288,880,696</b>

<b>Section 4: Net Patient Revenue</b>	
<b>Net Patient Revenue</b>	<b>\$85,716,956</b>

<b>Section 5: Net Income</b>	
Net Patient Revenue	\$85,716,956
Other Operating Revenue	\$20,307,490
<b>Total Operating Revenue</b>	<b>\$106,024,446</b>
<b>Total Operating Expense</b>	<b>\$124,872,821</b>
<b>Operating Income</b>	<b>-\$18,848,375</b>
<b>Net Nonoperating Revenue (Expense)</b>	<b>\$4,357,007</b>
<b>Net Income</b>	<b>-\$14,491,368</b>

<b>Section 6: Property, Plant &amp; Equipment</b>	
<b>Property, Plant &amp; Equipment</b>	<b>\$104,518,906</b>
<b>Accumulated Depreciation</b>	<b>\$62,983,512</b>
<b>Net Property, Plant &amp; Equipment</b>	<b>\$41,535,394</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