

Staffing and Service Volume

Instructions: Please provide the data requested below in the blue cells. Provide data that captures the most recent 12 month period available. Use the Notes cells to provide information needed to understand the locations, staffing, and volume details of the services provided in Oregon. Please contact hcmo.info@oha.oregon.gov with questions.

Entity Name	Hanger, Inc.
12-month reporting period start date	9/1/2025
12-month reporting period end date	8/31/2026

Staffing

For FTE/employees in Oregon, count only employees working in Oregon. For FTE/employees overall, include all employees, both in and outside of Oregon.

as of 08/31/2026	Clinical FTE (must be a numeric value)	Non-Clinical FTE (must be a numeric value)
FTE in Oregon	36.90	28.25
Overall FTE	2,766.58	4,206.41
Number of employees in Oregon	37.00	29.00
Number of employees overall	2,860.00	4,256.00

Number of unique people served in Oregon

Include all patients served at locations within Oregon. For at-home care or mail-order services, include patients if they reside in Oregon. If service types have not been pre-populated by OHA, please enter the service types that best represent the breadth of specialties and service lines offered by the entity. If some service types are prepopulated but new service lines have been added, please add rows as needed. If a prepopulated service type is no longer offered or is not relevant, please enter '0' in the quantity field for that row and note why no services of this type were rendered during the time period. Examples may include, but are not limited to: inpatient, outpatient, home health, hospice, primary care, physical therapy, mental health, surgery, pharmacy/prescription, insurance coverage, etc.

Date	between 09/01/2025 and 08/31/2026
Type of service (insert rows as needed for additional service types)	Quantity (must be a numeric value)
Total people served in Oregon (across all service types)	7,420

Services rendered to people in Oregon

Include all services rendered to all patients served at locations within Oregon. For at-home care or mail-order services, include services to all patients who reside in Oregon. If a unit of measurement has not been listed by OHA staff, please use the unit(s) that best capture how the entity measures service provision. For example: members, admissions, visits, surgeries, days, patients, prescriptions, beds, exams, etc.

Date		between 09/01/2025 and 08/31/2026
Type of service (Please use same types of service as listed above. Insert rows as needed for additional service types)	Measurement unit	Quantity (must be a numeric value)
Prosthetic	Individual deliveries	1,633
Orthotic	Individual deliveries	7,018

Notes for OHA (optional):

--