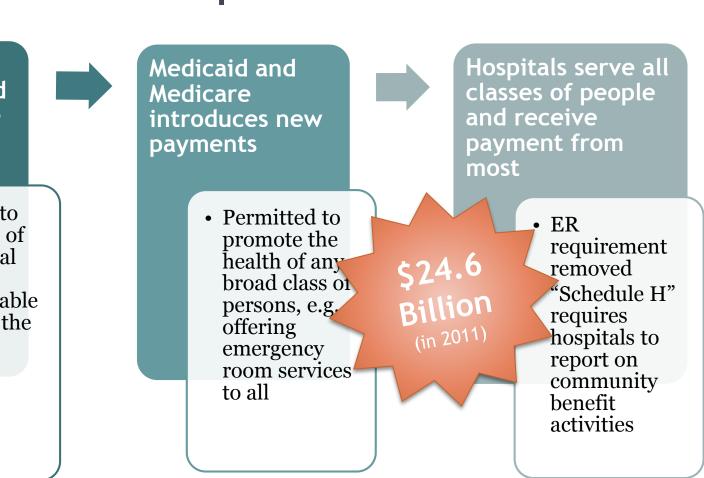
Healthcare in Oregon:

hospital profits, tax exemptions and community obligations

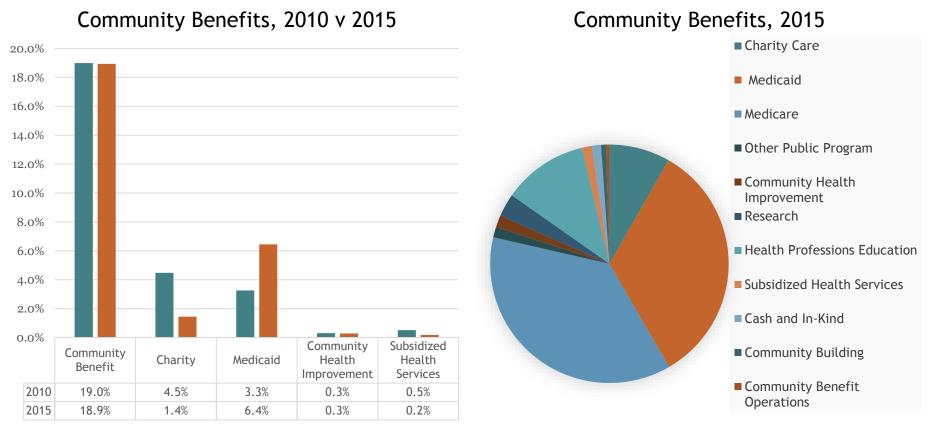
Evolution of hospitals & tax law

Last-resort healthcare and shelter for the poor

> • Operated to the extent of its financial ability for those not able to pay for the services rendered



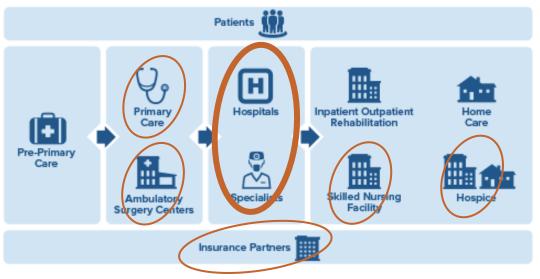
Changing Community Benefits



2010 2015

Health Systems Expanding

- Legacy \rightarrow affiliation with Silverton Hospital
 - \rightarrow purchased interest in PacificSource Health Plan
- Providence \rightarrow merged with St. Joseph's hospital chain
 - \rightarrow affiliated with Medford Medical Clinic
 - \rightarrow strategic alliance with PeaceHealth

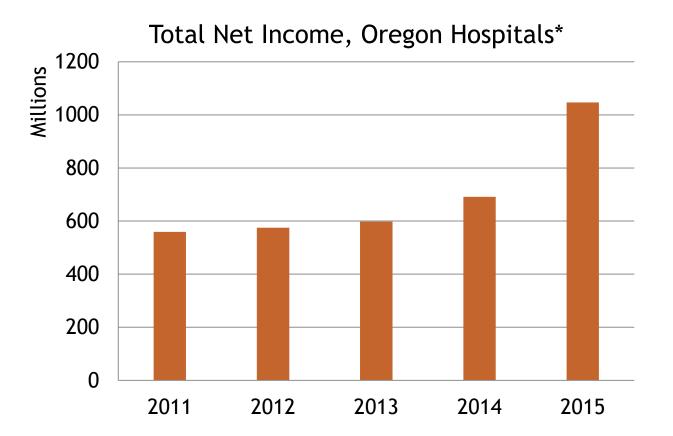


Shifts in power, prices still increasing

Exploring St. Charles' pricier procedures and the exodus of insurance carriers - Bend Bulletin, July 11, 2016

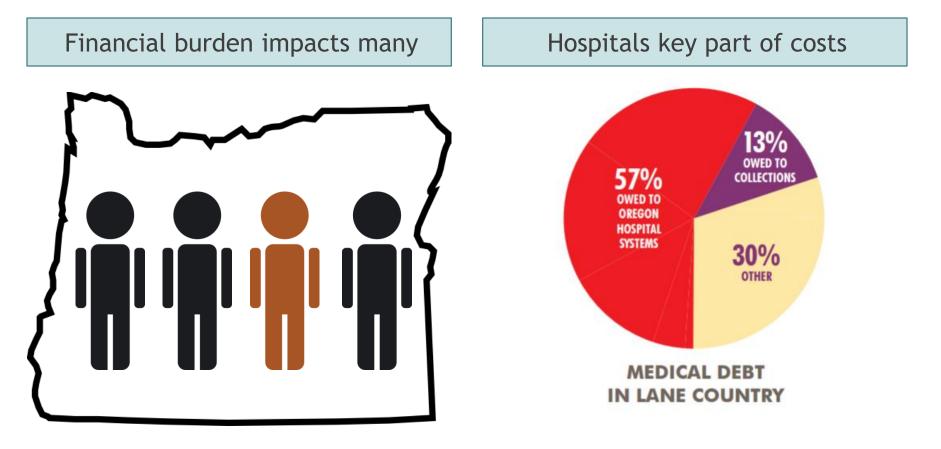
"... The hospital's high prices, driven perhaps by a lack of regional competition, might have played a role in the carriers' departures... In 2017, Deschutes County residents will have the fewest choices of any county in the state..."

Hospital profits up



* Excludes Shriner's and Kaiser Westside Hospitals who did not report for all years.

Repeal or replace: healthcare necessary regardless



Workers can't afford healthcare

- Nationally, share of employees enrolled in highdeductible plans has doubled over past 5 years.
- Healthcare workers report:
 - Avoiding or delaying care
 - Getting sent to collections
 - Seeking OHP coverage
- Number of healthcare workers on OHP up 49%

Value of exemptions in Oregon

• Hospitals, Addiction and Other Medical non profit organizations account for 64% of the total revenue loss

Estimated Revenue Loss & Number of Hospitals, by Charity/Community Benefit as Percentage of Reported Net Patient Revenue, FY 2015-16									
Charity	Number Revenue		Cumulative Loss		Community	Number	Revenue	Cumulative Loss	
Care	Hospitals	Loss	and Percentage		Benefit	Hospitals	Loss	and Percentage	
LT 0.5%	5	\$8.6	\$8.6	12%	LT 5%	6	\$8.6	\$8.6	12%
0.5-1.0%	8	\$20.8	\$29.4	40%	5-10%	6	\$4.8	\$13.4	18%
1.0-1.5%	11	\$18.0	\$47.4	65%	10-15%	8	\$7.7	\$21.1	29%
1.5-2.0%	6	\$19.9	\$67.3	92%	15-20%	11	\$31.0	\$52.1	72%
2.0-2.5%	4	\$2.6	\$69.9	96%	20-25%	7	\$18.9	\$71.0	98%
2.5-3.0%	3	\$1.7	\$71.6	98%	25-30%	2	\$0.8	\$71.8	99%
3.0-3.5%	4	\$1.1	\$72.7	100%	30-35%	1	\$1.0	\$72.8	100%
All	41	\$72.8			All	41	\$72.8		

Exhibit 5-6a

Source: Reported charity care, community benefit and net patient revenue sourced from OHA 2015 Hospital Community Benefits Data Reports.

Reform for the era ahead

- Care will continue to be expensive
- Need to update definition of community benefit
 - Exclude Medicare
- Need to create clear rules and expectations