SFY 2011
Revised
Non-Rural Indigent DSH Payments

P1 Provider #	HOSPITAL NAME	SFY2011 Revised Payment Amount
1091537	DEACONESS MEDICAL CENTER	176,064
1020255	GOOD SAMARITAN HOSPITAL	375,440
2001272	HOLY FAMILY HOSPITAL	474,849
1023415	KADLEC MEDICAL CENTER	564,757
1019958	LEGACY EMANUEL HOSPITAL	88,313
1016776	LEGACY SALMON CREEK	527,013
1045863	LOURDES MEDICAL CENTER	84,714
1043667	MARY BRIDGE CHILDREN'S HOSPITAL	36,957
1045312	NORTHWEST HOSPITAL	253,340
1014373	OREGON HEALTH & SCIENCE UNIVERSITY	28,877
1020765	OVERLAKE HOSPITAL MEDICAL CENTER	264,416
1008988	PROVIDENCE CENTRALIA HOSPITAL	433,414
2001252	PROVIDENCE EVERETT MEDICAL CENTER	1,250,330
1006145	PROVIDENCE HOOD RIVER MEMORIAL HOSPITAL	1,904
1008184	PROVIDENCE ST. PETER HOSPITAL	738,461
1003209	SOUTHWEST WASHINGTON MEDICAL CENTER	1,366,658
1002155	ST. FRANCIS HOSPITAL	268,452
1001696	ST. JOHN MEDICAL CENTER	808,427
1016360	ST. JOSEPH HOSPITAL - BELLINGHAM	565,724
1005342	ST. JOSEPH MEDICAL CENTER - LEWISTON	4,791
1022936	ST. JOSEPH MEDICAL CENTER - TACOMA	648,087
2000780	ST. MARY MEDICAL CENTER	250,427
1043671	SWEDISH MEDICAL CENTER	1,017,435
1043908	TACOMA GENERAL ALLENMORE HOSPITAL	663,416
2000798	VALLEY HOSPITAL AND MEDICAL CENTER - SPOKANE	63,010
1018337	WALLA WALLA GENERAL HOSPITAL	85,509
1042669	YAKIMA VALLEY MEMORIAL HOSPITAL	465,215
		11,506,000