



NONPROFIT HOSPITAL ACCOUNTABILITY REPORT

JUNE 2026

SAVE OUR STATES

EXECUTIVE SUMMARY

Healthcare is big business in America, yet many providers operate as tax-exempt “nonprofit” corporations. This is particularly true of the largest hospital systems, which benefit from federal tax exemptions, government grants, and other subsidies, but often spend little on charity care. Instead, these giant corporations pay massive salaries to top executives and pursue other dubious spending priorities.

Taxpayers and policymakers need to know where the money goes, especially when dollars meant for healthcare wind up paying for overseas investments, elite club memberships, art collections, or sexual harassment lawsuit settlements. This is why Save Our States compiled this report, which examines more than a dozen major hospital and health systems. Sunlight is a powerful disinfectant. This report provides actionable information for lawmakers engaged in oversight, but it is relevant to any American who cares about fiscal responsibility, public accountability, and our health.

HOSPITALS AND HEALTH SYSTEMS EXAMINED

This report examines 14 nonprofit hospitals and health systems, focusing on facilities in eight states:

- California: Cedars-Sinai Medical Center; University of California San Francisco Health
- Florida: University of Miami Health System
- Illinois: CommonSpirit Health; Rush University Medical Center
- Michigan: Henry Ford Health
- Minnesota: CentraCare; Mayo Clinic Rochester
- New York: Mount Sinai Health System; NewYork-Presbyterian Hospital System
- Ohio: The Cleveland Clinic
- Virginia: Bon Secours Mercy Health; Sentara Health; UVA Health

PATTERNS OF MISPLACED PRIORITIES

A consistent pattern emerged across the systems reviewed: lavish executive compensation and discretionary spending running alongside layoffs, minimal charity care, and sometimes even patient harm. The following examples illustrate the breadth of the problem.

Henry Ford Health — Bonuses, Layoffs, and a Taxpayer Bailout

In March 2020, at the onset of the COVID-19 pandemic, Henry Ford Health paid bonuses to top executives, then proceeded to lay off thousands of workers and relied on a taxpayer-funded federal bailout to remain solvent. The system's CEO received more than \$7 million in 2024 compensation, a steep jump from \$4.4 million the year prior, while the nonprofit simultaneously spent more than \$12 million on advertising and paid for social club memberships for senior leadership.

NewYork-Presbyterian — \$750M Sexual Abuse Settlement

NewYork-Presbyterian was part of a \$750 million settlement covering hundreds of sexual abuse claims by female patients who were molested during medical treatments. Simultaneously, the hospital system CEO saw compensation surge from \$8.9 million to more than \$23 million, even as the hospital laid off approximately 1,000 employees in 2025 due to "anticipated financial challenges." The system directed low levels of revenue to charity care, reporting less than 0.7% to 1% during this time.

Rush University Medical Center—Housing Allowances and Club Memberships

In 2024, Rush University Medical Center paid its CEO a multi-million-dollar compensation package, while also providing a personal housing allowance. Rush also covered senior leadership's membership dues to numerous Chicago-area social clubs. In the same year, Rush laid off medical center employees due to "financial headwinds."

Cleveland Clinic — Athletic Facility for the Cavaliers

The Cleveland Clinic, a tax-exempt health system, is constructing a 210,000-square-foot "Global Peak Performance Center" with the Cleveland Cavaliers, described as providing Cavaliers players "the most state-of-the-art training resources of any facility in the world." The clinic spent only 1.5% of revenue on charity care while paying its CEO \$6.6 million.

Patients deserve to be the top priority of nonprofit health systems. These institutions receive billions of dollars in taxpayer subsidies, federal grants and program revenue, and tax exemptions each year. That taxpayer investment comes with an obligation. Yet, executives are collecting tens of millions in compensation while workers are laid off, charity care is minimized, patients are sued for medical debt, and spending flows to social club memberships, personal housing allowances, athletic facilities, and extravagant expansions.

Its track records make it clear: **America's nonprofit hospitals need greater accountability, and the American people deserve transparency.**

TAXPAYERS FUND THESE INSTITUTIONS.
PATIENTS TRUST THEM WITH THEIR LIVES.

It's time for full transparency and accountability.

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CEDARS-SINAI MEDICAL CENTER

Patient Care and Fraud

Charity Care

Cedars-Sinai spent only 0.19% of its operating expenses on charity care in 2018. A 2023 U.S. Senate Committee on Health, Education, Labor and Pensions (HELP) investigation identified Cedars-Sinai as one of six major nonprofit health systems nationwide that dedicated less than 1% of its total revenue to charity care despite receiving substantial tax benefits.

Fair Share

According to a report by the Lown Institute, Cedars-Sinai had one of the largest “fair share” deficits in the country in 2020, meaning it received more in tax breaks than it spent on community investments. Cedars-Sinai had a total calculated deficit of -\$126 million. The Lown Institute noted in 2025 that Cedars-Sinai receives \$29 million in property tax exemptions.

Labor Disputes

In 2022, Cedars-Sinai workers voted to authorize an unfair labor practice strike to demand that Cedars-Sinai bargain with them over inadequate staffing, patient and worker safety concerns, and low wages. A nursing assistant said workers are “struggling to support their families on \$17 an hour [while] Cedars-Sinai pays its executives millions,” adding that Cedars “should invest more in their low-wage frontline caregivers and less in highly paid executives that rarely interact with patients.”

Additionally, in 2018, Cedars-Sinai workers held a rally to expose excessive CEO pay, unfair labor practices, efforts to suppress workers’ voices, and allegations of overcharging patients for some services. One clinical partner said, “We want to have a voice in delivering quality care, but the hospital is threatening us for speaking out about understaffing or other patient care concerns. The public needs to know that Cedars-Sinai is letting down patients, workers and the community.”

Sexual Misconduct

In June 2025, former Cedars-Sinai obstetrician-gynecologist Barry J. Brock surrendered his medical license after nearly 200 women filed lawsuits alleging that Cedars-Sinai knowingly concealed his sexual abuses and misconduct, including medically unjustifiable procedures that resulted in lasting physical complications. Brock allegedly made lewd and unsettling comments to patients; groped their breasts and genitals during exams, sometimes without gloves; ordered medically unjustifiable procedures; and engaged in female genital mutilation by giving women unneeded sutures, among other reported misconduct. Plaintiffs describe a “generations-long history of covering up Brock’s serial sexual exploitation and abuse of female patients” at Cedars-Sinai, where he had practiced medicine since the early 1980s. Plaintiffs claim the hospital “hid negative reports about Brock, despite the fact that many of the reports came directly from Cedars-Sinai’s own employees and staff.” Cedars-Sinai administrators allegedly received “ample and repeated warnings” about his abuse of patients through past lawsuits, as well as complaints to the state medical board and to the health system itself. As of June 2026, litigation is still ongoing.

Billing Issues and False Claims

In 2016, Cedars-Sinai agreed to pay \$872,925 for allegedly violating the Civil Monetary Penalties Law by submitting claims “to Federal health care programs for outpatient and inpatient professional services on behalf of a physician that were not provided as claimed or for which there was insufficient documentation to support the level of professional services claimed.”

In 2013, Cedars-Sinai agreed to pay \$1.4 million to settle allegations that it submitted false claims to Medicare, which is paid by taxpayers, for minimally invasive kyphoplasty procedures. The Justice Department stated, “In many cases, kyphoplasty can be performed safely and effectively as an outpatient procedure without any need for a more costly hospital admission. The settlements... resolve allegations that the settling hospitals frequently billed Medicare for kyphoplasty procedures on a more costly inpatient basis, rather than an outpatient basis, in order to increase their Medicare billings.”

Also in 2013, the U.S. Department of Health and Human Services (HHS) Office of Inspector General found Cedars-Sinai did not fully comply with Medicare billing requirements for 409 of 490 claims from 2008 to 2011, resulting in significant overpayments, totaling \$2.2 million.

Conflicts of Interest

Cedars-Sinai has a troubling but clear track record of apparent conflicts of interest. In fiscal year 2024, the tax-exempt system disclosed tens of millions of dollars in transactions involving interested persons, including:

- More than \$2 million in compensation for family members of executives.
- \$3.2 million in lease payments to an LLC owned by Board Member Mohamed Ahmar.
- Tens of millions in payments to “substantial contributors” to the healthcare system.

LAVISH SPENDING

Compensation

Cedars-Sinai ensures its executives can keep up with Hollywood lifestyles. Its former CEO, Thomas Priselac, received \$8.8 million in total compensation in fiscal year 2024. His pay reflects a surge in compensation, jumping by more than \$3 million from FY2020 to FY2024.

Its CEO is not the only one bringing in a large paycheck. Cedars-Sinai’s top 14 employees received a combined \$44.5 million in total compensation in FY24. The system’s top 15 employees made a combined \$39 million in 2020. Compensation is not the only big expense for executives, though. Cedars-Sinai provided its executives with first-class travel in FY24. In fact, in fiscal year 2024, the nonprofit health system spent \$7.8 million on travel and \$3.5 million on conferences, conventions, and meetings.

Art Collection

Cedars-Sinai’s permanent art collection boasts more than 4,000 pieces. The Los Angeles-based collection includes works by more than 1,200 artists, including world-renowned Andy Warhol, Pablo Picasso, Salvador Dali, Roy Lichtenstein, and Willem de Kooning.

Facilities

Nonprofit Cedars-Sinai, “Hollywood’s Glamor Hospital,” has been described as the “medical world’s most glam facility” and is known for providing care to numerous Hollywood celebrities. The hospital reportedly offers three-room, two-bath luxury maternity suites, which cost close to \$4,000 per day and feature deluxe food

services, hair stylists, manicures and pedicures, and a personal doula. Thanks to its lavish offerings, the hospital boasts births from celebrity moms like Jessica Simpson, Kourtney Kardashian, Kate Hudson, and Victoria Beckham.

Overseas

In May 2026, Cedars-Sinai opened a new flagship outpatient clinic in London as part of its “international expansion.” The clinic provides “high-quality primary care, executive health and concierge medicine” in a luxuriously converted Edwardian townhouse.

Advertisements and Partnerships

In Fiscal Year 2024, nonprofit health system Cedars-Sinai spent an astounding \$23.9 million on advertising and promotion. In addition to extravagant marketing expenses, the tax-exempt system proudly touts partnerships with the Los Angeles Rams, the 2028 Olympic Games, FIFA, and Angel City FC.

FEDERAL FUNDING

Government Grants

Cedars-Sinai reports receiving nearly \$156 million in government grants in Fiscal Year 2024. This came in the same year that Cedars-Sinai spent more than \$23 million on advertising (outlined above).

Final Word: Despite the long list of glamorous expenses above, from massive advertising budgets and extravagant executive pay to an expansive art collection, Cedars-Sinai **spent just 0.19% of its operating expenses on charity care in 2018.**

UNIVERSITY OF CALIFORNIA SAN FRANCISCO HEALTH

Patient Care and Fraud

Overcharging Patients

Despite its nonprofit status inferring community good, the San Francisco Standard published a July 2023 investigation that described patients facing repeated “facility fee” overcharges and opaque billing at UCSF Health.

Patient Privacy

In June 2022, UCSF Health was named as a defendant alongside Meta Inc. and its associated companies, including Facebook, in a class action lawsuit over alleged “unlawful collection and sharing” of patients’ personal “health data without consent.”

Fair Share

UCSF Medical Center was ranked among the three worst U.S. nonprofit hospitals on “fair share” spending by the Lown Institute, with a deficit of \$208 million on 2018 IRS data. These findings mean UCSF received more in tax breaks than what it put toward community investments.

LAVISH SPENDING

Executive Compensation

UCSF Health CEO Suresh Gunasekaran was hired at a \$1.85 million annual base salary in January 2022. In 2024, his salary ballooned up to \$2.4 million through a generous incentive package approved by the University of California Board of Regents.

Construction Projects

In April 2024, UCSF celebrated the construction of the \$4.3 billion UCSF Health Helen Diller Hospital, a 15-story state-of-the-art facility. The hospital is set to open in 2030 and will increase UCSF Health’s capacity by 37%.

Sports Partnerships

In February 2025, UCSF Health was named the official health care partner for the San Francisco Giants. Through the 10-year partnership, UCSF Health will provide care to the team's major and minor league players, staff, Oracle Park visitors, and the surrounding community. UCSF Health's physicians and orthopedic specialists will be on-site during games, with additional services at the UCSF Health Ballpark Clinic at Oracle Park.

UCSF has also led the medical staff for collegiate sports teams, including the University of San Francisco, City College of San Francisco, Academy of Art University, and Cal Bears.

Layoffs

UCSF Health announced it would be laying off 200 employees systemwide in 2025, citing "serious financial challenges." Union representatives wrote, "We were already short-staffed, and layoffs mean our patients will face delays in necessary care from their providers... As a \$10.2 billion public hospital system, UCSF Health has the resources and the obligation to retain crucial staff."

FEDERAL FUNDING

NIH Funding

Federal funding to UCSF Health is routed through the university itself. In 2025, the university touted securing \$824 million from the National Institutes of Health alone.

Final Word: UCSF Health not only has a track record of overcharging its patients but has been named in the top three nonprofit hospitals nationwide **to generate more in tax breaks than it gives back to its community.**

UNIVERSITY OF MIAMI

Patient Care and Fraud

Predatory Billing and Charity Care

In a national review of the largest one hundred hospitals (measured by revenue), Axios gave the University of Miami Health System poor grades for both billing quality and charity care (they received the worst of five rating levels for charity care).

Fraudulent Billing

According to the Department of Justice, the University of Miami system allegedly violated the False Claims Act through three different practices: improper billing, ordering unnecessary lab tests, and submitting inflated claims. These practices, as noted by the DOJ, contribute to rising healthcare costs overall. In 2021, the system agreed to pay \$22 million to settle the claims.

Closed Facilities

As announced in September 2025, the HHS decertified and shutdown the University of Miami's organ procurement organization following "an investigation uncovered years of unsafe practices, poor training, chronic underperformance, understaffing, and paperwork errors." In one 2024 case, a mistake led to a donated heart being declined for a patient. In others, the agency reportedly sent the wrong organ to hospitals.

Care Failures

In November 2025, Michael Davis had his heart surgery canceled "last-minute" after a UHealth surgeon overbooked multiple patients, "as is his custom." Davis, a Marine Corps veteran, had not eaten for about 30 hours and was waiting at the hospital for eight hours before the cancellation. In 2024, the same surgeon was implicated with two other surgeons in a \$15 million civil settlement stemming from allegations that they illegally billed Medicare by claiming they were performing multiple heart procedures simultaneously.

LAVISH SPENDING

Compensation

Despite numerous patient care failures, UHealth offers extraordinary compensation for executives. The former CEO of UHealth, Joseph Echevarria, was paid more than \$6.7 million in fiscal year 2025. This was a significant increase over his already extravagant compensation for fiscal year 2024, when he made more than \$4.2 million.

The then-UHealth Chief Operating Officer (COO) made more than \$4.2 million in fiscal year 2025. UHealth executives also enjoyed first-class travel in the same fiscal year.

Foreign Expansions

In 2025, the University of Miami Health System celebrated its “first international expansion” with a new “state-of-the-art facility” in Abu Dhabi. The system faced criticism for taking taxpayer dollars while funding lavish, international expansions.

FEDERAL FUNDING

Government Grants

In its most recent available nonprofit filing (2025), the University of Miami reports more than \$700 million in direct government grants. In all, the nonprofit system reported more than \$4 billion in revenue from its hospitals, clinics, and medical professional practices.

Final Word: While UHealth executives receive multimillion-dollar paydays, the University of Miami Health System received “poor grades” for patient billing practices and its organ transplant center is being shut down by HHS due to **“unsafe practices,” “chronic underperformance,”** and **“poor training,”** with **one mistake even leading to the rejection of what would have been a life-saving heart donation.**

COMMONSPIRIT

Patient Care and Fraud

Patient Privacy

CommonSpirit Health was sued over an October 2022 cyberattack that cost the company \$160 million and exposed the personal data of more than 623,700 patients.

Nurse Salaries

After the cyberattack in October 2022, the hospital network shut down a portion of its technology systems at many of its hospitals across the country, including patient and operational systems. After the shutdown ended, nurses working around the country complained that CommonSpirit's timekeeping system began incorrectly calculating wage hours and keeping track of paid time off. Payments to around 2,000 nurses and other staff members were affected for "several pay periods" by the cyberattack. In April 2023, a group of nurses in Oregon sued CommonSpirit Health for allegedly not being paid their full salaries.

Charity Care

In 2025, CommonSpirit's charity care was 1.7% of its total expenses, while the system prioritized executive compensation for the leadership of the nonprofit system.

A 2023 U.S. Senate Committee on Health, Education, Labor and Pensions (HELP) analysis revealed that CommonSpirit spent only 1.5% of revenue on charity care while paying its combined CEOs \$32 million.

LAVISH SPENDING

Compensation

In fiscal year 2024, CommonSpirit Health CEOs were paid a combined \$36.5 million in total compensation. Its outgoing CEO Lloyd Dean was paid \$20.9 million in compensation, with more than \$200,000 in additional pay from related organizations. Its new CEO Wright Lassiter III netted more than \$14 million in compensation, with more than \$1.3 million in additional income from other sources.

According to the Lown Institute, CommonSpirit Health ranked second for highest-paid nonprofit system CEOs for fiscal year 2021. CommonSpirit Health came under fire for former CEO Lloyd H. Dean's \$35.5 million compensation package for fiscal year 2022.

REVENUE

According to CommonSpirit Health's financial statements covering its 2025 fiscal year, the system brought in about \$39.1 billion in operating revenues versus \$39.8 billion in operating expenses, good for an operating loss of \$687 million. This loss was offset by \$1.8 billion in nonoperating income, primarily coming through investments.

While CommonSpirit technically operated at a loss, the majority of its expenses were made up of salaries and purchased services, and only a fraction (1.7% as explained above) was spent on providing charity care. CommonSpirit actually wrote off more expenses due to depreciation and amortization of existing assets (\$1.4 billion) than it provided in charity care (\$680 million, at cost).

CommonSpirit Health ended its 2025 fiscal year with an astounding \$57.2 billion in net assets, despite its supposed losses and general nonprofit status.

FEDERAL FUNDING

340(b) Prescription Drug Pricing Program

More than 115 CommonSpirit Health hospitals, clinics, and infusion centers participate in the 340(b) program, which allows eligible hospitals to purchase outpatient drugs at discounted prices while receiving full reimbursement from insurers.

Pandemic Funding

CommonSpirit reported receiving \$645 million and \$41 million in pandemic relief funding provided by FEMA in its 2025 and 2024 fiscal years, respectively. In the same years, it claimed \$240 million and \$34 million in Employee Retention Credits (ERC), a pandemic-era tax credit designed for businesses that retained employees during COVID-19 lockdowns or experienced revenue declines.

Final Word: CommonSpirit offers one of the most lucrative CEO compensation packages for nonprofit health systems in the country while its leadership has simultaneously **failed to protect patient privacy, exposed the personal data** of more than 600,000 patients, and **failed to pay nurses' full salaries.**

RUSH UNIVERSITY MEDICAL CENTER

Patient Care and Fraud

Billing Errors

In 2017, the HHS Office of Inspector General claimed Medicare overpaid Rush by \$10.2 million after discovering billing errors in dozens of claims. Auditors concluded the errors occurred “primarily because the Hospital did not have adequate controls to prevent the incorrect billing of Medicare claims.”

Layoffs

In February 2024, while Rush was paying huge compensation packages to executives, Rush laid off employees citing financial pressures. Rush declined to say how many workers were laid off.

LAVISH SPENDING

Compensation

In 2024, Rush’s President and CEO Omar Lateef received more than \$3.6 million in compensation. In the same year, Rush paid Lateef a personal housing allowance and membership dues for the exclusive Economic Club of Chicago, Commercial Club, Chicago United, and the Chicago Club. Rush Chief Development Officer Murray Ancell also received a membership at the University Club.

The 2024 compensation expenditures continue a track record of lavish executive compensation. In 2022, Rush paid 10 employees seven-figure salaries, including almost \$2.9 million to Lateef.

Overseas Investments

According to Rush's tax records, the hospital system held more than \$167.8 million in overseas investments and partnerships in fiscal year 2024. These investments were primarily focused in Central America, the Caribbean, and Europe.

Advertisements and Partnerships

Rush maintains a practice group called Midwest Orthopaedics at Rush (MOR), which serves as team physicians for professional sports franchises like the Chicago Bulls, Chicago White Sox, Chicago Fire, and others. In 2023, Rush announced a "multiyear partnership agreement" with the Chicago White Sox, becoming the team's first-ever "official health care partner." Rather than using its generous federal benefits to give back to the community directly, Rush has contributed tens of thousands to various charity programs run by those same sports franchises.

FEDERAL FUNDING

Federal Programs

Rush auditors detail that the hospital system spent more than \$194 million in federal awards through dozens of various programs in fiscal year 2025. This followed reports of lavish compensation packages for executives and astounding overseas investments (outlined above).

Final Word: While the nonprofit Rush University Medical Center was paying for its CEO's multi-million-dollar compensation package, personal housing allowance, and various glitzy social club memberships, **they proceeded to lay off medical center employees "in response to financial headwinds."**

HENRY FORD

Patient Care and Fraud

Nonprofit Henry Ford reported providing only 1.1% of total expenses to charity care in 2024, following a similarly low level of charity care (1.0%) in 2023.

LAVISH SPENDING

Executive Compensation

Henry Ford is another nonprofit offering multi-million-dollar compensation packages for executives. In 2024, Henry Ford CEO Robert Riney made more than \$7 million in reportable compensation, which is a steep increase from his \$4.4 million compensation at Henry Ford in 2023. Also in 2024, its Chief Financial Officer (CFO) made more than \$3.3 million, the Chief Information Officer (CIO) received a lucrative \$1.7 million, and the Executive Vice President (EVP) / Chief of Marketing was paid more than \$1.2 million.

In addition to lavish executive salaries in 2024, Henry Ford also covered first-class or charter flights for senior leadership, as well as membership fees for social clubs.

Extravagant Facilities

Henry Ford holds naming rights to the \$90 million Henry Ford Detroit Pistons Performance Center, which opened in 2019. The 185,000-square-foot facility, touted as the largest in the NBA, houses a "state-of-the-art training center and corporate headquarters." When announced, the facility was lauded as a "huge win" for the Pistons franchise to maximize the team's performance. The huge financial investment includes a broadcast studio, private chefs, lounge, and "views of the city."

Henry Ford Health is also working on a \$3 billion expansion project in downtown Detroit, expected to open in 2027, with the Detroit Pistons. The nonprofit health system is building a new campus, which accounts for \$2.2 billion of the \$3 billion project. The project is expected to request "more than \$1 million in tax abatements."

Advertising

In 2024 alone, nonprofit Henry Ford spent more than \$12 million on advertising. That year, Henry Ford capitalized on Detroit hosting the NFL Draft through a star-studded advertising campaign. They debuted a new TV ad featuring narration from the Detroit Lions head coach, airing it first during the highly-sought-after ad time for the NFL Draft. The campaign also stretched across the city through draft-themed billboards.

Layoffs

In March 2020, marking the start of the COVID-19 pandemic, Henry Ford Health paid bonuses to top executives. Henry Ford Health then proceeded to lay off thousands of workers and relied on a taxpayer-funded federal bailout.

FEDERAL FUNDING

340(b) Prescription Drug Pricing Program

In a 2022 report, the Wall Street Journal noted that Henry Ford Hospital had 467 sites registered for 340(b) drug discounts located outside its home neighborhood, with 92% of them in census tracts with higher rates of private insurance than the parent hospital.

Government Grants

Henry Ford reports receiving more than \$28.7 million in government grants in 2024. These taxpayer dollars came in the same year that they spent \$12 million on advertising (as outlined above).

Final Word: Nonprofit Henry Ford places an emphasis on **executive compensation and flashy facilities, while giving lower priority to charity care.** The nonprofit prioritized bonuses for executives and a \$90 million NBA facility prior to staff layoffs and a federal bailout at the onset of the COVID-19 pandemic.

CENTRACARE

Patient Care and Fraud

Charity Care

In 2026, KFF Health News and the Star Tribune reported that CentraCare's flagship hospital spent less than 0.25% of operating expenses on charity care.

Patients On Trial

Revealed in the same 2026 KFF Health News investigation, CentraCare sued a patient over unpaid medical debt after allegedly determining she earned too much to qualify for financial assistance. The patient told reporters that CentraCare denied financial aid despite her earning approximately \$41,000 annually while facing more than \$8,000 in medical bills related to cervical cancer treatment.

Malpractice

In 2022, a federal jury awarded more than \$111 million in damages in a malpractice case involving treatment at CentraCare affiliated St. Cloud Hospital. CBS Minnesota reported that the 19-year-old patient suffered "permanent" and "disabling" leg damage following surgery and discharge from the hospital. Despite "severe and difficult-to-control pain," the patient was discharged the same night.

LAVISH SPENDING

Compensation

CentraCare CEO Kenneth Holmen received \$1.6 million in compensation for the fiscal year ending June 2024. In the same year, it spent \$1 million on travel, and \$1.5 million on conferences, conventions, and meetings.

Advertising

In 2024, CentraCare reported spending \$673,000 on advertising and promotion.

Layoffs

In August 2025, CentraCare announced it was cutting 535 employees amid "significant external pressures," including rising costs.

FEDERAL FUNDING

Government Grants

CentraCare reports receiving nearly \$2 million in government grants during its 2024 fiscal year. In the same year, it paid its CEO \$1.6 million (as outlined above).

Final Word: From 2020 through 2024, CentraCare’s flagship hospital **spent less than 0.25% of operating expenses on charity care**, significantly less than the state average. The hospital also maintained a far lower maximum salary threshold for patients to qualify for charity care, ensuring fewer would be eligible. In 2026, the system came under fire for suing low-income patients despite efforts to pay medical bills.

MAYO CLINIC ROCHESTER

Patient Care and Fraud

Charity Care

In 2021, Mayo Clinic contributed only 0.34% of its functional expenses to charity care, which is significantly lower than the national average. In 2025, Minnesota Attorney General Keith Ellison announced a settlement with Mayo Clinic over charity care and medical debt collection practices. Ellison alleged that Mayo Clinic’s policies created barriers to charity care. A 2025 report by AG Ellison revealed that Mayo Clinic’s charity care spending declined from approximately \$114.2 million in 2019 (equal to 1.3% of operating expenses) to only 0.78% of operating expenses by 2022, falling each year between 2020 and 2022.

Medical Debt

The same 2025 report from Ellison asserted that Mayo Clinic filed approximately 1,929 medical debt lawsuits between 2019 and 2022 and garnished more than \$2.5 million in wages from its patients. The report alleged that Mayo Clinic’s practices resulted in “aggressive debt collection practices” against patients who may have qualified for assistance.

LAVISH SPENDING

Compensation

Mayo Clinic CEO Gianrico Farrugia's \$3.72 million salary in 2022 was about 41 times the salary of the average registered nurse working at Mayo Clinic. From 2022 to 2023, compensation for Mayo Clinic's top executives grew by between 16% and 27%, topped by Farrugia, who earned \$4.3 million.

Extravagant Facilities

In 2023, Mayo Clinic announced a \$5 billion project that "reimagines Mayo Clinic's downtown Rochester campus and introduces new facilities with a combination of innovative care concepts and digital technologies."

FEDERAL FUNDING

Government Grants

Mayo Clinic reported receiving more than \$389 million in government grants in 2024. This followed a downward trend in charity care spending and undertaking a new \$5 billion expansion (outlined above).

Final Word: As recently as 2022, tax-exempt **Mayo Clinic paid its CEO \$3.72 million**, which is nearly 41 times the salary of the average registered nurse employed by Mayo Clinic. High executive compensation at Mayo Clinic is paired with declining charity care, with spending decreasing from 1.3% in 2019 to only 0.78% in 2022.

MOUNT SINAI HEALTH SYSTEM

Patient Care and Fraud

Charity Care

While Mount Sinai's charity care spending is largely obfuscated from the public, in 2020, Mount Sinai South Nassau, its Long Island facility, reported spending only 0.4% of revenue on financial assistance. According to a Wall Street Journal report in 2022, the facility only forgave bills for patients whose income did not

exceed the federal poverty level (\$13,590 / individual). The facility's leadership reportedly planned to review the policy following media inquiries.

Privacy Issues

In 2025, Mount Sinai agreed to a \$5.3 million settlement over allegations of sharing patient data without patient consent. For three years (2020-2023), the health system's patient portal and website allegedly had embedded tracking tools sending patient data to Meta and Facebook. This followed St. Luke's-Roosevelt Hospital Center Inc., which is part of the Mount Sinai system, paying \$387,200 in 2017 to settle potential HIPAA violations centered on "careless handling" of its patients' medical data.

Federal Rules

The Mount Sinai system has a history of reported noncompliance with federal hospital price transparency rules. Numerous Mount Sinai facilities in New York have been listed as "noncompliant" with the federal rules in patient advocate reports.

Fraud

Mount Sinai has been accused of defrauding Medicare and Medicaid on multiple occasions. In 2018, Mount Sinai settled a whistleblower lawsuit that alleged its radiology department engaged in widespread Medicare and Medicaid fraud. In 2017, an audit from the Federal Office of Inspector General (OIG) found that Mount Sinai overcharged Medicare by nearly \$42 million in 2012 and 2013.

LAVISH SPENDING

Compensation

A constant in Mount Sinai's annual priorities is exorbitant compensation for executives. The nonprofit's executive compensation packages are measured in the millions. In 2024, its CEO made \$5.4 million in total compensation. The previous CEO made nearly \$7.2 million the year prior. This followed compensation totaling more than \$5.6 million for its CEO in 2019.

These high compensation packages make its total spending especially notable. In 2024, Mount Sinai spent more than 97% of its revenue, with more than \$2 billion (44%) on "salaries, other compensation, employee benefits."

Advertising

The health system boasts large advertising budgets, including \$10,642,248 in 2024 alone. In 2021, they launched a huge “new brand identity” campaign to present a “bold, unfiltered, and emotional view,” debuting in The New York Times. In the year that ad campaign launched, Mt. Sinai spent \$16,734,936 on advertising and promotion.

Credit Rating

Mount Sinai’s lavish spending continued despite fiscal issues across the system so severe that Moody’s downgraded its credit rating by two levels and revised its outlook from positive to negative in 2024. Moody’s linked the downgrade to less cash on hand and a “confluence of unexpected events and significant ongoing operating challenges.”

FEDERAL FUNDING

340(b) Prescription Drug Pricing Program

In 2024, the nonprofit system brought in more than \$4.6 billion in revenue, with \$571,176,444 from its participation in the federal 340(b) drug pricing program, accounting for 12.3% of Mount Sinai’s total revenue. Mount Sinai’s 340(b) pharmacy receivables were reported to be \$75,300,000 in 2024. In 2023, Mount Sinai received \$189,559,663 in total revenue from 340(b). It’s worth noting that New York 340(b) hospitals earn 2.8x more in 340(b) profits than is spent on charity care.

The urban, Manhattan-based Mount Sinai West, which is part of the Mount Sinai Health System, is listed as a “rural” hospital, allowing the facility to benefit from funds intended to help systems serving rural communities, and is a registered participant in the 340(b) program.

Government Grants

In 2024, Mount Sinai reported receiving \$106,979,396 in government grants. In 2026, Mount Sinai’s Icahn School of Medicine ranked 11th among institutions that receive funding from the National Institutes of Health (NIH), receiving \$501.7 million in grant funding.

Revenue

The tax-exempt system experienced exponential growth from 2017 to 2024, during which Mount Sinai's revenue grew 64%, from \$2.8 billion to more than \$4.6 billion.

Final Word: In 2024, Moody's downgraded Mount Sinai's credit rating by two levels and revised its outlook from positive to negative due to less cash on hand and significant operating challenges; meanwhile, **its CEO made more than \$5.4 million** and Mt. Sinai spent \$10.6 million on advertising that year.

NEWYORK-PRESBYTERIAN HOSPITAL SYSTEM

Patient Care and Fraud

Charity Care

Despite these taxpayer-subsidized advantages, only 1% of NewYork-Presbyterian's operating costs are directed toward charity care.

In a 2023-released report by the U.S. Senate Committee on Health, Education, Labor and Pensions (HELP), NewYork-Presbyterian spent less than 0.7% of revenue on charity care while its CEO's compensation surpassed \$10.9 million in the same year.

Dual Designation

The Manhattan-based hospital system has positioned itself to benefit from multiple federal classifications, including a dual designation to access funds intended to help rural communities.

Anticompetitive Practices

The U.S. Department of Justice recently took legal action against the hospital system for alleged anticompetitive practices that "increase healthcare costs" for patients.

Sexual Misconduct

NewYork-Presbyterian was also part of a \$750 million settlement for hundreds of sexual abuse claims by female patients who were molested during medical treatments.

LAVISH SPENDING

Compensation

Tax records for the nonprofit show that former CEO Steven Corwin's compensation surged from approximately \$8.9 million to more than \$23 million in a short two-year period.

Layoffs

Following a significant increase in pay for its CEO, NewYork-Presbyterian reportedly laid off approximately 1,000 employees in 2025 due to "anticipated financial challenges."

FEDERAL FUNDING

340(b) Prescription Drug Pricing Program

The tax-exempt corporation has benefited from a dramatic spike in revenue, reportedly as high as 880%, from the federal 340(b) prescription drug pricing program.

Government Grants

NewYork-Presbyterian reported receiving more than \$30.3 million in government grants in 2024. In the same year, they paid its CEO \$23 million (outlined above).

Final Word: The huge urban hospital system has filed a dual designation to qualify for taxpayer dollars intended for rural providers and benefits from federal programs, **while paying its CEO tens of millions annually.**

THE CLEVELAND CLINIC

Patient Care and Lawsuits

Charity Care

While paying its CEO \$6.6 million, a 2023 Senate Committee on Health, Education, Labor and Pensions (HELP) analysis found that Cleveland Clinic spent only 1.5% of revenue on charity care for vulnerable patients.

Overcharging Patients

The nonprofit system has a track record of overcharging and suing its own patients for medical debt. As of 2024, several Cleveland Clinic facilities were noncompliant with federal hospital price transparency rules.

LAVISH SPENDING

Compensation

The tax-exempt hospital system pays multimillion-dollar executive compensation packages. In 2024, its President and CEO's total compensation was more than \$7.6 million. In the same year, its EVP and CFO made more than \$3.1 million and its Chief Legal Officer made more than \$2.2 million.

Compensation in 2024 was not an outlier. In 2023, Cleveland Clinic paid 22 of its executives seven figures and another 30 employees made more than \$500,000.

Advertising

Cleveland Clinic has a history of spending on flashy Super Bowl ads, securing those expensive media buys in 2012, 2018, and 2019.

Art Collection

Cleveland Clinic's website proudly proclaims, "Hospital or art museum? Here, it's both." Their collection features "nearly 7,000" pieces of art, from paintings and photographs to sculptures and murals, throughout its numerous facilities. The main campus boasts a dedicated art gallery with themed exhibits.

Athletic Facility

The nonprofit hospital system is opening “a first-of-its-kind sports performance center and training facility” with the Cleveland Cavaliers. The 210,000-square-foot facility, which is part of a \$3.5 billion development, is expected to open in 2027. Cleveland Clinic’s athletic center is expected to provide “Cavaliers players and prospective players the most state-of-the-art training resources of any facility in the world.”

Foreign Investments

Tax-exempt Cleveland Clinic has significant foreign interests. They are operating and hospitals in the U.K., Canada, and U.A.E., and simultaneously investing abroad.

Labor Disputes

Despite their fixation on luxury spending, Cleveland Clinic has come under fire for claims that its nurses are underpaid.

FEDERAL FUNDING

340(b) Prescription Drug Pricing Program

Cleveland Clinic has come under scrutiny for receiving nearly \$1 billion from the 340(b) program but not passing on the lower prices to low-income patients, according to a 2025 U.S. Senate Committee on Health, Education, Labor and Pensions (HELP) report. The report found the hospital using revenue from its 340(b) program on “capital improvement projects and community benefit programs” without accounting for “specific expenses 340B revenue goes towards.”

Government Grants

Cleveland Clinic reported receiving more than \$197 million in government grants during 2024. In the same year, many of its facilities were not in compliance with federal price transparency rules (outlined above).

Final Word: Cleveland Clinic receives hundreds of millions of dollars in benefits a year from the federal 340(b) program **without passing those savings on to patients;** meanwhile, the tax-exempt system reportedly spent only 1.5% on charity care during that same period.

BON SECOURS MERCY HEALTH

Patient Care and Fraud

Eliminating Care

According to a U.S. Senate Health, Education, Labor, Pensions Committee (HELP) letter, in the same year that Bon Secours eliminated critical Richmond Community Hospital services, the hospital “generated profits in excess of \$40 million.”

LAVISH SPENDING

Compensation

In 2024, Bon Secours Mercy Health’s John Starcher received more than \$12.8 million in compensation as the nonprofit system’s CEO. In the same year, its Chief Operating Officer (COO) made more than \$2.3 million and its Chief Digital Officer (CDO) was paid nearly \$2.4 million. The tax-exempt health system seemingly spared no expense for its executives, providing first-class or charter travel, travel for companions, and health club fees. Bon Secours spent nearly \$29,000,000 on travel in 2024.

Foreign Investments

The tax-exempt nonprofit has an astounding level of foreign investments, boasting more than \$561 million in foreign investments in 2024.

REVENUE

Bon Secours Mercy Health’s Richmond Community Hospital generated “as much as \$100 million a year” in profits, the highest margin of any hospital in Virginia at the time. Meanwhile, a former Richmond Community emergency physician asserted that Bon Secours was “basically laundering money through this poor hospital to its wealthy outposts.”

FEDERAL FUNDING

340(b) Prescription Drug Pricing Program

A U.S. Senate Health, Education, Labor, Pensions Committee (HELP) report revealed that Bon Secours generated “hundreds of millions of dollars in 340B revenue, but do not pass 340B discounts directly to their patients.” The report found that Bon Secours’ Richmond Community Hospital “invested \$25.4 million for capital improvements to its medical facilities” from 2022 through 2023. Additionally, the report found that “from 2019 through 2023, BSMH invested \$18.3 million in community benefit programs.” focused on issues unrelated to patient care, like housing and education. The Senate committee found that Richmond Community Hospital generated more than \$276 million in 340(b) savings and revenue from September 2018 to September 2023.

Government Grants

Bon Secours Mercy Health reported receiving more than \$78.6 million in government grants during 2024. In the same year, they reported paying its CEO more than \$12 million (outlined above).

Final Word: A U.S. Senate report found that Bon Secours Mercy Health benefited from “hundreds of millions of dollars in 340B revenue,” yet **those savings were not passed on to patients.**

SENTARA (NORFOLK)

Patient Care and Fraud

Medical Debt

A recent academic report found that Sentara filed the most medical debt lawsuits against patients relative to its share of Virginia hospital beds of any system studied in the state over a 15-year period (2010 through 2024).

Price Variation

The report also revealed that Sentara “charged insured patients prices that varied by as much as 77 times for common medical procedures, differences based not on medical complications but on health insurance alone.”

Inflated Premiums

A whistleblower lawsuit against Sentara alleges the nonprofit system improperly inflated health insurance premiums under its health plans division while being the only insurer that was offering coverage for ACA enrollees in the region at the time. The case alleges that Sentara raised premiums “significantly” across 2018 and 2019.

LAVISH SPENDING

Compensation

In fiscal year 2021, Sentara was scrutinized for paying its CEO the highest amount of compensation of any nonprofit health system CEO, making an astounding \$33.2 million. As of 2024, Sentara still prioritized lucrative executive compensation, paying ten executives seven figures each, including its CEO who made more than \$6 million. In the same year, it also provided executives with first-class or charter travel, as well as personal housing allowances.

Layoffs

Following years of lavish executive compensation, Sentara announced it was eliminating hundreds of staff positions in October 2025.

FEDERAL FUNDING

Federal Programs

Sentara auditors detail that the hospital system spent more than \$5.9 million in federal awards through dozens of various programs in 2024.

Final Word: In case multimillion-dollar compensation packages are not enough, Sentara also provides housing allowances and luxurious travel options for executives. Simultaneously, the nonprofit was found to be suing its own patients and **unfairly charging them as much as 77 times for the same procedures** depending on a patient’s health plan.

UVA HEALTH

Patient Care and Fraud

Patient Safety

In September 2024, a group of faculty members from the UVA Physicians Group sent the Board of Visitors a letter of no confidence about UVA’s CEO and the Dean of the School of Medicine. The letter alleged that the two oversaw compromised patient safety, a culture of fear and retaliation against staff, excessive spending on C-suite executives, and a lack of transparency on financial issues. The outlined issues were described as “urgent matters of patient safety and public concern.” Both individuals resigned in 2025.

Fraudulent Billing

An October 2025 federal lawsuit by two patients’ widows and four UVA physicians alleges that former CEO Dr. Craig Kent and a “Kent Enterprise” engaged in fraudulent billing practices and falsification of medical records to maximize revenue and rankings, contributing to two patient deaths. Lawyers representing the plaintiffs accused Kent and his team of a “hostile takeover of a revered medical system by a cadre of individuals determined to maximize revenues and rankings.”

Medical Debt

A 2019 investigation showed UVA Health had filed 36,000 lawsuits against patients, seeking more than \$106 million in total for unpaid medical bills over six years. The investigation noted that UVA Health has the “most restrictive eligibility guidelines for patient financial assistance of any major hospital system in Virginia.” A follow-up report detailed how UVA Health relies on thousands of property liens to collect old bills from patients.

LAVISH SPENDING

Compensation

Despite a troubled track record for the health system’s leadership, UVA Health CEO Mitchell Rosner is paid an annual salary of more than \$1.6 million. In fact, across the entire University of Virginia system, Rosner is the highest-paid employee for fiscal year 2026.

Sports Branding Partnerships

In 2019, UVA Health System entered into a seven-year athletics partnership with James Madison University (JMU) valued at \$3.5 million, described by JMU as the largest corporate financial agreement in JMU Athletics history at the time. The agreement included UVA Health branding on the basketball court and naming rights for the facility's sports medicine area. The partnership also included marketing and promotional benefits during football and basketball seasons. Additionally, UVA Health was the Official Healthcare Partner of the 2024 Solheim Cup professional women's golf tournament.

International Presence

UVA Health's Center for Telehealth maintains long-running collaborations in Guatemala, Uganda, the Democratic Republic of the Congo, Kenya, South Africa, and India focused on telemedicine, medical education, and healthcare capacity building. In 2024, UVA Health announced a partnership with the UK-based Swinfen Charitable Trust, an international telemedicine organization operating in 93 countries.

FEDERAL FUNDING

NIH Funding

UVA Health receives government grants through the wider university system. While exact figures are unavailable, the system projected a major increase in its research budget in 2025 due to growth in its National Institutes of Health funding.

Final Word: Former UVA Health leadership has been sued by patients' widows over fraudulent billing, falsification of medical records, and practices contributing to patient deaths. This is compounded by reports of **UVA suing its own patients for medical debt** and putting liens on patients' property.

CONCLUSION

America's largest nonprofit hospital systems benefit from huge federal tax exemptions as well as massive direct and indirect subsidies, but this report shows these entities often spend little on charity care. In fact, these giant healthcare corporations appear to prioritize spending on luxurious facilities, travel, and executive compensation while they rake in billions in federal benefits. Meanwhile, patient care, safety, privacy, and trust have been compromised.

Save Our States compiled these findings as a resource for lawmakers and officials with oversight responsibilities for these tax-exempt systems. It is critical that lawmakers know how subsidies and benefits are used and hold those accountable who take advantage of taxpayers but fail to prioritize the very patients they exist to serve. It is our hope that the findings here will provide information needed to scrutinize spending and deliver accountability across nonprofit hospital systems, as American taxpayers and patients expect and deserve.