

# Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV 08/01/2012)

Calendar Year: 2016 Entity Name: Virginia Mason Medical Center								
(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non-Taxable Benefits	(E) Total
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation			
1 Gary Kaplan	Yes	Virginia Mason	1,066,494	441,298	10,055,147	111,126	43,184	11,717,248
2 Suzanne Anderson	No	Virginia Mason	572,548	179,514	20,580	92,096	31,997	896,734
3 Sarah Patterson	No	Virginia Mason	382,210	181,134	18,993	102,728	30,580	715,644
4 Lynne Chafetz	No	Virginia Mason	419,850	142,705	20,580	87,596	9,923	680,653
5 Charleen Tachibana	No	Virginia Mason	414,220	109,177	21,960	74,696	13,467	633,520
6 William Poppy	No	Virginia Mason	359,193	99,535	64,068	21,302	32,485	576,583
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8								0
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15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Community Health Systems/Hospital Financial and Charity Care Section

MS: 47853

Olympia, WA 98504-7853

email: [hos@doh.wa.gov](mailto:hos@doh.wa.gov)