## Compensation of Hospital Employees



Calendar Year: Entity Name:	2021 MULTICARE HEALTH SYSTEM (includes 9 hospitals & numerous clinics and medical o	ffices etc.)				5011422	70270110 207 (11	(EV 06/01/2012)
,	MOLTICARE HEALTH STSTEM (Includes 9 hospitals & humerous clinics and medical o	inces, etc.)	(B) Breakdown of W-2 and/or 1099 MISC Compensation					
(A)Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation	(C) Retirement and Deferred Compensation	(D)Non- Taxable Benefits	(E) Total
<sup>1</sup> WILLIAM ROBERTSOI	PRESIDENT & CEO		1,537,900	468,393	7,992	683,475	24,515	2,722,275
<sup>2</sup> JAMES MCMANUS	SENIOR VICE PRESIDENT & CFO		706,426	149,692	7,991	11,600	18,403	894,113
<sup>3</sup> FLORENCE CHANG	EXECUTIVE VICE PRESIDENT & COO & CHIEF EXEC - SOUTH SOUND REGION	GOOD SAMARITAN, AUBURN MEDICAL CENTER, COVINGTON	1,175,938	307,858	483,025	510,193	20,627	2,497,643
<sup>4</sup> JEFF POLTAWSKY	PRESIDENT, MARY BRIDGE & PEDS NETWORK	MARY BRIDGE CHILDRENS HOSPITAL AND PEDIATRIC NETWORK	437,770	93,844	67,890	11,600	24,811	635,915
5 CHRISTI McCARREN	SENIOR VICE PRESIDENT - RETAIL HEALTH & COMMUNITY BASE		454,694	99,481	70,828	17,400	20,104	662,506
6 DAVID CARLSON	SENIOR VICE PRESIDENT - PROVIDER ENTERPRISE & CPO		716,566	156,480	116,695	11,600	31,512	1,032,854
7 DAVID O'BRIEN	SENIOR VICE PRESIDENT/CHIEF EXEC - INLAND NW REGION	MULTICARE DEACONESS, MULTICARE VALLEY & ROCKWOOD CLINICS	605,469	152,493	98,412	11,600	19,736	887,710
								<u> </u>

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 <a href="http://www.irs.gov/pub/irs-pdf/i990sj.pdf">http://www.irs.gov/pub/irs-pdf/i990sj.pdf</a>

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

Center for Health Statistics/Hospital and Patient Data Section

MS: 4781

Olympia, WA 98504-7814 Fax: (360) 753-4135 email: hos@doh.wa.gov