

Compensation of Hospital Employees



DOH 346-095 (REV 08/01/2016)

Calendar Year: 2021 Entity Name: Enumclaw Regional Hospital Association									
(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 Renee Espinosa	Y		219,286	30,339	1,842	14,417	18,535	284,419	
2 Ketul Patel			1,306,982	1,791,306	466,883	19,375	11,599	3,596,145	
3 Ian Worden			827,408	662,986	79,752	17,275	20,965	1,608,386	
4 David Butcherite			307,143	88,897	2,807	17,100	23,722	439,669	
5 David Nosacka			218,510	100,000	66,849	0	14,830	400,189	
6 Miriam Chambliss			189,141	42,339	20,096	8,882	27,872	288,330	
7								0	
8								0	
9								0	
10								0	
11								0	
12								0	
13								0	
14								0	
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