

Compensation of Hospital Employees



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

Calendar Year: 2021 Entity Name: Harrison 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 David Schultz			693,350	574,122	118,606	16,523	28,739	1,431,340
2 Mike Fitzgerald			292,346	458,298	30,338	17,100	10,290	808,372
3 David Weiss			379,005	69,509	3,572	17,236	3,238	472,560
4 David Nosacka			218,510	100,000	66,849	0	14,830	400,189
5 Chad Melton	Y		143,978	30,000	128,853	0	5,707	308,538
6								0
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