Compensation of Hospital Employees

Washington State Department of HEALTH

DOH 346-095 April 2023

Calendar Year: 7/1/2021-6/30/2022
Entity Name: Franciscan Health System

	(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	Russell Woolley	Y	St. Francis and St. Anne	256,615	38,364	505	14,410	43,756	353,650
2	Dino Johnson	Y	St. Anthony	242,630	36,389	474	15,061	35,787	330,341
3	Lois Erickson	Y	St. Clare	238,166	36,485	3,479	15,904	21,665	315,699
4	Jennifer Schomburg	Y	St. Joseph	155,988	30,000	41,843	0	6,310	234,141
5	Ketul Patel			1,306,982	1,791,306	466,883	19,375	11,599	3,596,145
6	Ian Worden			827,408	662,986	79,752	17,275	20,965	1,608,386
7	Thomas Kruse			658,382	195,650	1,932	16,392	31,815	904,171
8	Sharon Royne			436,206	129,135	5,544	17,100	20,965	608,950
9	Dhyan Lal			370,523	177,450	1,868	17,275	37,540	604,656
10									0
11									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

Compensation of Hospital Employees

Washington State Department of HEALTH

DOH 346-095 April 2023

Calendar Year: 7/1/2021-6/30/2022

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
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Add Additional lines as needed

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Compensation of Hospital Employees

DOH 346-095 April 2023

Calendar Year: 7/1/2021-6/30/2022
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
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Add Additional lines as needed

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