**Hospital Employees Compensation**

In accordance with RCW 43.70.052(3)(a), hospitals which do not operate on a for-profit basis must annually submit employee compensation information to the Department of Health (DOH).

**Forms:**

Hospitals shall submit names and compensation information using DOH Form 346-095 Compensation of Hospital Employees. If the five highest compensated employees do not include the lead administrator for the hospital, please also submit compensation information for the lead administrator.

[DOH Form 346-095 Compensation of Hospital Employees](https://www.doh.wa.gov/Portals/1/Documents/2300/HospPatientData/346-095_CompensationofHospitalEmployees.xlsx)

Nonprofit hospitals may submit IRS form 990 schedule J to the department to meet requirements of this law. Compensation information for the lead administrator for the hospital must be included and clearly indicated on the schedule.

In addition, if a hospital licensed under RCW 70.41 is also part of a health care system, the hospital can meet requirements of this law by submitting IRS form 990 schedule J for the health system. Compensation information for the lead administrator for the hospital must be included and clearly indicated on the schedule.

[IRS form 990 schedule J](http://www.irs.gov/pub/irs-pdf/i990sj.pdf)

Please submit compensation information either by mail or email:

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)

**Due dates:**

Due dates depend on the format used to submit hospital compensation information. Nonprofit hospitals may use either format.

If a **nonprofit** hospital reports compensation information to the department by submitting IRS form 990 schedule J with compensation information for the lead administrator included and clearly indicated on the schedule, this report is due within 135 days following the end of each hospital's **fiscal** year.

**Or**

If a hospital submits the names and compensation of the five highest compensated employees of the hospital who do not have any direct patient responsibilities using DOH Form 346-095-- Compensation of Hospital Employees, the report is due within 135 days following the end of each hospital's **calendar** year.

**Definitions:**

Hospitals shall use the following definitions to complete the DOH Form 346-095 Compensation of Hospital Employees:

|  |  |
| --- | --- |
| **Required Item** | **Definition** |
| Reporting Period | Calendar year the report covers. |
| Entity | Name of hospital or health system reporting compensation information. |
| 1. Employee Name | Full name of the five highest compensated employees who do not have direct patient care responsibilities. |
| Lead administrator | Clearly indicate compensation information for the Lead Administrator of the hospital |
| Hospital Name | Name of the hospital where the employee works. |
| (B i) Base Compensation | Please refer to IRS 990 for definition: <http://www.irs.gov/pub/irs-pdf/i990sj.pdf> |
| (B ii) Bonus and Incentive Compensation | Please refer to IRS 990 for definition: <http://www.irs.gov/pub/irs-pdf/i990sj.pdf> |
| (B iii) Other Reportable Compensation | Please refer to IRS 990 for definition: <http://www.irs.gov/pub/irs-pdf/i990sj.pdf> |
| (C) Retirement and Deferred Compensation | Please refer to IRS 990 for definition: <http://www.irs.gov/pub/irs-pdf/i990sj.pdf> |
| (D) Non-Taxable Benefits | Please refer to IRS 990 for definition: <http://www.irs.gov/pub/irs-pdf/i990sj.pdf> |
| (E) Total Compensation | Sum of all compensation categories |

IRS Schedule 990 Schedule J Instructions

<http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

**For more information:**

The DOH Hospital Employee Compensation web page has additional information at this link: <http://www.doh.wa.gov/DataandStatisticalReports/HealthcareinWashington/HospitalandPatientData/HospitalFinancialData/HospitalEmployeeCompensation.aspx>

[Frequently Asked Questions about Hospital compensation reporting](https://www.doh.wa.gov/Portals/1/Documents/2300/HospPatientData/DOHForm346-095FrequentlyAskedQuestions.docx)

[Example of DOH Form 346-095 filled in with sample information](https://www.doh.wa.gov/Portals/1/Documents/2300/HospPatientData/DOHForm346-095Example.xlsx)