Compensation of Hospital Employees



Calendar Year:	2020		4-1				·	
Entity Name: Grays Harbor Community Hospital (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
¹ Jensen, Tom	CEO	Grays Harbor	361,951		14,804	11,400	38,669	426,825
² Foley, Niall	CFO	Grays Harbor	207,684		8,247	5,192	38,669	259,792
³ Brandt, Melanie	CNO	Grays Harbor	172,367		3,767	6,895	14,754	197,782
⁴ Feller, Julie	Exec Dir HR	Grays Harbor	149,293		6,583	15,886	35,486	207,248
⁵ Tschimperle, Elizabeth	Exec Dir HMG	Grays Harbor	129,278		610	5,223	19,976	155,088
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