For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.
Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title |  | (B) Breakdown of W-2 and/or 1099-MISC compensation |  |  | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns(B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | (i) Base compensation | (ii) Bonus \& incentive compensation | iii) Othe reportable compensation |  |  |  |  |
| KATHRYN CORREIA | (i) | 0. | 0. | 0. | 0. | 0. | 0 | 0. |
| 1 President \& CEO | (ii) | 1,354,597. | 468,527. | 5,050. | 22,730. | 39,402. | 1,890,306. | 87,021. |
| ANNA L. LOOMIS | (i) | 0. | 0 . | 0. | 0 . | 0. | 0. | 0. |
| 2 CFO \& TREASURER | (ii) | 698, $3 \overline{77}$. | 249,915. | $-3,2 \overline{6} 0$. | 14,250. | 32, 3 32. | 991,614. | 26,293. |
| BRYCE R. HELGERSON | (i) |  | ---- ${ }^{-}$ | - - $-\frac{0}{5}$. | - - - ${ }^{0}$. | -- 0 - | --ニ- $-\frac{0}{8}$. | - - - 0 - |
| 3 SR. VP. CHIEF INTEGRATION OFFICER | (ii) | $5 \overline{6} \overline{6}, \overline{1} \overline{3} \overline{3}$. | 147, 785. | $2 \overline{4}, \overline{7} \overline{6} 5$. | $8 \overline{8}, 14 \overline{3}$. | 15, 95 2. | $8 \overline{4} \overline{2}, 8 \overline{1} \overline{8}$. | 13, 437. |
| TRENT S. GREEN | (i) | 0. | $\underline{0}$ | 0. | $\underline{0}$. | 0. | --- ${ }^{0}$. | 0. |
| 4 SR. VP. CHIEF OPERATING OFFICER | (ii) | $7 \overline{8} 0, \overline{2} 20$. | $206,375$. | -3, 095. | 40,574. | 37, 907. | $\overline{1}, 062,581$. | 18,765. |
| LEWIS L. LOW, MD | (i) | 0. | 0 . | 0. | 0 . | 0. | 0 . | 0. |
| 5 SR. VP. CHIEF MEDICAL OFFICER | (ii) | $4 \overline{7} \overline{5}, 903$. | 181,297. | 89, 720. | $4 \overline{5}, 862$. | 23, 300 . | $81 \overline{6}, 082$. | $46,391$. |
| JON J. HERSEN | (i) | 385,511. | 66,058. | -2,098. | 27,606. | 32, 430. | 509,507. | 0. |
| 6 WA CHIEF ADMINISTRATIVE OFFICER | (ii) | 0 - | - 0 . | 0. | - 0 | 0. | - 0 | 0. |
|  | (i) |  |  |  |  |  |  |  |
| 7 | (ii) |  |  |  |  |  |  |  |
|  | (i) |  |  |  |  |  |  |  |
| 8 | (ii) |  |  |  |  |  |  |  |
|  | (i) |  |  |  |  |  |  |  |
| 9 | (ii) |  |  |  |  |  |  | -------- |
|  | (i) |  |  |  |  |  |  |  |
| 10 | (ii) |  |  |  |  |  |  |  |
|  | (i) |  |  |  |  |  |  | - |
| 11 | (ii) |  |  |  |  |  |  |  |
|  | (i) |  | ------ | - - - |  |  |  | - - - - - |
| 12 | (ii) |  |  | --- |  |  |  | ----- |
|  | (i) |  |  |  |  |  |  |  |
| 13 | (ii) |  |  |  |  |  |  |  |
|  | (i) |  |  | - - - - - |  | - | - | - - - - |
| 14 | (ii) |  |  |  |  |  |  | ---- |
|  | (i) |  |  |  |  |  |  | - |
| 15 | (ii) |  |  |  |  |  |  | -- |
|  | (i) |  |  |  |  |  |  |  |
| 16 | (ii) |  |  |  |  |  |  |  |
| BAA |  |  | TEEA4102L 09/25 |  |  |  | Schedule | J (Form 990) 2020 |

