## Compensation of Hospital Employees



Calendar Year: 2021 **Entity Name:** Kaiser Foundation Health Plan of Washington (B) Breakdown of W-2 and/or 1099 MISC Compensation (C) Retirement and (A)Employee Name (who (D)Nondoes not have direct patient Indicate if Lead Hospital if (i) Base (ii) Bonus & Incentive (iii) Other Reportable Deferred Taxable care responsibilities) Administrator applicable Compensation Compensation Compensation **Benefits** (E) Total Compensation Χ Central John Blenkinsopp 229,784 17,906 5,447 17,098 2,166 272,401 Susan Mullaney 739,499 759,222 43.443 769,099 26,373 2,337,636 Karen Schartman 528.902 451.776 239.261 258,496 18.344 1,496,779 4 Janet O'Hollaren 511,539 284,485 161,234 379,713 23,463 1,360,434 Kelly Stanford 337,156 257,097 77,513 126,682 24,117 822,565 6 Joseph Smith 337,976 215,100 39,918 201,457 27,903 822,354 7 0 8 0 9 0 10 0 11 0 12 0 13 0 14 0 15 0

Add Additional lines as needed

Notes: Compensation reported in rows 2-6 above reflect balances reported on the most recently filed Form 990, Schedule J. The lead administrator was not reported on the most recently filed Form 990, Schedule J so current W-2 information is reported based on Form 990 filing instructions.

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <a href="http://www.irs.gov/pub/irs-pdf/i990sj.pdf">http://www.irs.gov/pub/irs-pdf/i990sj.pdf</a>

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