

Compensation of Hospital Employees



DOH 346-095 (REV 08/01/2016)

Calendar Year: 2021		Entity Name: KADLEC REGIONAL 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 ASLAM KALEEL	X		401,778	90,525	12,068	115,751	27,095	647,217	
2 RONALD SCHWARTZ			495,830	33,929	45,429	31,696	25,072	631,957	
3 DANY GHANNAM			421,219	79,078	41,144	44,385	24,942	610,767	
4 KEVIN PIEPER			393,235	59,224	40,524	11,563	26,800	531,346	
5 RICHARD MEADOWS			331,386	87,696	25,844	24,362	19,317	488,605	
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