

Compensation of Hospital Employees



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

Calendar Year: 2020		Entity Name: EvergreenHealth Monroe						
(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 Lisa LaPlante	Yes	EvergreenHealth-Monroe	255,783	0	0	38,689	16,237	310,709
2 John Green		EvergreenHealth-Monroe	201,564	0	0	10,043	12,210	223,817
3 John Gepford		EvergreenHealth-Monroe	145,039	0	0	11,425	10,472	166,936
4 Malachi Lones		EvergreenHealth-Monroe	132,835	15,000	0	9,180	14,376	171,391
5 Fawn Hutton		EvergreenHealth-Monroe	134,072	0	0	6,602	13,496	154,170
6 Renee Jensen		EvergreenHealth-Monroe	0	0	225,720	0	0	225,720
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