

# Compensation of Hospital Employees



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

Calendar Year:		2020						
Entity Name:		Douglas, Grant, Lincoln & Okanagan Counties Hosp. Dist. #6 dba Coulee 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 Ramona Hicks	Yes		165,006	50		11,998	8,724	185,779
2 Kelly Hughes	No		144,732	50		8,100	20,756	173,638
3 Marlene Elliott	No		123,568	50		5,802	11,630	141,049
4 Kraig Fuller	No		78,520	50	24,355	7,088	15,597	125,610
5 Heather McCleary	No		100,625	50		5,034	0	105,709
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](mailto:hos@doh.wa.gov)