

# Compensation of Hospital Employees

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

Calendar Year: <b>2018</b>		Entity Name: <b>Providence St. Joseph Hospital - Chewelah</b>						
(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 Christine Hayman			148,370	0	2,072	15,566	20,665	186,674
2 William Nicholas			132,940	0	147	13,682	20,210	166,979
3 Michelle Wasco			107,252	0	459	4,420	7,166	119,298
4 Jane Branda			98,376	0	2,507	4,886	7,309	113,078
5 Ronald Rehn	X		226,593	24,407	4,548	55,579	10,829	321,956
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