

Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV 08/01/2012)

Calendar Year: 2012 Entity Name: Group Health Cooperative								
(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 Jane Hutcheson	X		156,649	0	3,892	97,600	15,882	274,023
2 Scott Armstrong			946,108	0	163,797	201,900	28,444	1,340,249
3 Robert O'Brien Jr			655,223	0	12,208	23,724	19,523	710,678
4 Richard Magnuson			537,406	0	193,681	28,724	13,079	772,890
5 Rick Woods			456,845	0	47,019	205,100	12,953	721,917
6 Mark Szalwinski			387,645	100,000	40,817	27,474	22,816	578,752
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

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135
email: hos@doh.wa.gov