



2025 HOSPITAL EXECUTIVE COMPENSATION REPORT

Conducted by: TOTAL COMPENSATION SOLUTIONS, LLC

Total Compensation Solutions is pleased to announce the availability of the 2025 Hospital Executive Compensation Report. This report covers 31 executive and director-level positions found in a sample of 671 hospitals. The data in this report was collected from the latest 990 forms for the hospitals and includes 3,421 employee data points. For many organizations, this report has the potential to be a primary data source on executive compensation for hospitals in the United States and it includes the following information:

COMPENSATION DATA PROVIDED (WHEN AVAILABLE)

- Annual Base Salary (Avg., 25th, 50th, 75th)
- Annual Bonus Paid (Avg., 25th, 50th, 75th)
- Total Cash Compensation (Avg., 25th, 50th, 75th)
- Total Remuneration (Avg., 25th, 50th, 75th)
- Retirement, Non-taxable Benefits & Other Income (Avg., 25th, 50th, 75th)
- Five Regional Cuts
- Three Cost-of-Labor Cuts (High/Medium/Low)
- Seven Major Metro Area Cuts (for select job titles)

JOB TITLES INCLUDED

Chief Executive Officer
 Chief Operating Officer
 Top Financial Executive
 Chief Medical Officer
 Chief Nursing Officer
 Chief of Staff
 Top Legal Executive
 Top Administrative Executive
 Top Strategy Executive
 Top Medical Information Officer
 Top Quality/Patient Safety Executive
 Top Information Services Executive
 Chief Human Resources Officer
 Top Development Officer
 Top Compliance Officer
 Top Facilities Executive
 Top Patient Care Executive
 Chief Clinical Officer
 Physician
 Director of Nursing
 Certified Registered Nurse Anesthetist (CRNA)
 Director of Pharmacy
 Controller
 Treasurer
 Pharmacist

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REPORT SUBSCRIBER ORDER FORM

The 2025 Hospital Executive Compensation Report is currently available. Please complete the required information and return this form via fax, mail or email: tbailey@total-comp.com
Fax 914-730-7303

<u>EMPLOYMENT</u>	<u>SURVEY FEE</u>	<u>INVOICING PROCEDURE</u>
Hospitals <input type="checkbox"/>	\$525	Send Bill <input type="checkbox"/> Purchase Order # _____
Consulting Firms (Single Office) <input type="checkbox"/>	\$895	Check Enclosed <input type="checkbox"/>
Consulting Firms (Multiple Locations) <input type="checkbox"/>	\$3,000	ACH (Bank Details will be sent with invoice) <input type="checkbox"/>
**Note: This report only comes as a PDF and refunds will not be granted after the report has been sent.		

INDIVIDUAL TO RECEIVE SURVEY REPORT:

NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE: _____

FAX NUMBER: _____

e-Mail: _____

SIGNATURE: _____ DATE: _____

Please complete and return this form to:

Total Compensation Solutions, LLC

Attn: Tom Bailey

200 Business Park Drive

Armonk, NY 10504

Phone (914) 255-8725

Fax (914) 730-7303

www.Total-comp.com