

CONSOLIDATED FINANCIAL STATEMENTS
WITH SUPPLEMENTAL INFORMATION

West Tennessee Healthcare and Related Affiliates
Years Ended June 30, 2009 and 2008
With Report of Independent Auditors

Ernst & Young LLP



West Tennessee Healthcare and Related Affiliates
Consolidated Financial Statements with Supplemental Information

Years Ended June 30, 2009 and 2008

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Report of Independent Auditors

The Board of Trustees
West Tennessee Healthcare

We have audited the accompanying consolidated balance sheets of West Tennessee Healthcare and Related Affiliates (the Company) as of June 30, 2009 and 2008, and the related consolidated statements of revenues and expenses and changes in net assets, and cash flows for the years then ended. These financial statements are the responsibility of the Company's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. We were not engaged to perform an audit of the Company's internal control over financial reporting. Our audits included consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the consolidated financial position of West Tennessee Healthcare and Related Affiliates at June 30, 2009 and 2008, and the consolidated results of their operations and their cash flows for the years then ended, in conformity with accounting principles generally accepted in the United States.

Management's Discussion and Analysis on pages 3 through 10 is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the supplementary information. However, we did not audit the information and express no opinion on it.

In accordance with *Government Auditing Standards*, we have also issued our report dated October 23, 2009 on our consideration of the Company's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

Our audit was performed for the purpose of forming an opinion on the basic financial statements taken as a whole. The accompanying schedules of expenditures of federal awards and expenditures of state financial assistance are presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Ernst + Young LLP

October 23, 2009

West Tennessee Healthcare and Related Affiliates

Management's Discussion and Analysis

Years Ended June 30, 2009 and 2008

This section of the financial statements of West Tennessee Healthcare and Related Affiliates (the Company) presents management's analysis of the Company's financial performance during the fiscal year ended June 30, 2009.

Financial Highlights

2009

- The Company posted a negative operating margin for the year of (5.4)% as volumes for the flagship hospital waned while the Company experienced routine increases in expense and significant one-time and ongoing new expense related to the opening of a new bed tower and debt re-issuance.
- In addition to realizing the impact of physician clinics purchased late in the previous fiscal year, the Company made several service changes during the year. Among them were the establishment of several new physician practices and the transition of Home Health services to a joint venture arrangement. In addition, skilled nursing services were discontinued through the sale of West Tennessee Transitional Care.
- Total operating revenues increased by 2% compared to the prior year. The growth is attributed to the service changes noted above as well as growth in revenues for services outside the flagship hospital.
- Total operating expenses, excluding interest costs, increased by 5% over the prior year with market adjustments for employees and routine increases in supply costs. In addition, the opening of a new/replacement bed tower drove substantial increases in depreciation and utilities costs as well as some one-time operating costs associated with the transition to the new space.
- The Company incurred substantial non-operating expense during the fiscal year, primarily due to a \$35.7 million deterioration in the value of investments. In addition, the Company incurred \$18.9 million in interest expense and also, a one-time loss of \$18.9 million that resulted from the August 2008 Fixed rate bond issue and the termination of the interest rate swap agreements related to the refunding of the organization's auction and variable rate debt.
- The Company's bond ratings continue to be positive and consistent, with Moody's assigning a rating of "A1" at the time of the issuance of the 2008 series bonds and Standard & Poor's assigning an "A+" which was reaffirmed in July of 2009.

2008

- With an operating margin of 2%, the Company experienced a downturn in financial results for 2008 as growth in operating expense, including interest costs, outpaced growth in revenue. Contributing to the increase in the operating expense was a \$4 million dollar interest expense variance and two nonrecurring items: \$1.4 million in losses related to the writedown of office buildings to allow for construction of a new Medical Office Building and \$0.9 million in losses related to the extinguishment of the 2006A bond issue.
- The average length of stay for hospital inpatients at the flagship hospital was over budget by 2%, but improved from the prior year by 2%.
- Total operating revenues increased by 3% compared to the prior year with routine volume growth and improved reimbursement.
- Total operating expense, excluding interest costs, also increased by 3% compared to the prior year with market adjustments for employees, increases in depreciation expense, increases in cost for call pay to physicians and increases in maintenance contracts.
- During the last quarter of the calendar year 2007, turmoil in credit markets, downgrades to bond insurers and other financial institutions, as well as investor uncertainty resulted in the interruption of variable rate auction markets. This interruption negatively affected the Company and caused an interest expense variance from budget of \$4 million.
- The Company has a history of sound bond ratings, with Moody's assigning a rating of "A1" to the Company's 2006 bond issue while Standard and Poor's assigned a rating of "A+" to the 2006 issue. It should also be noted that the Company's debt was comprised of fully-insured variable rate bonds.
- During April, May and June, in order to mitigate the high interest expense, the Company purchased and held up to \$35,175,000 of its own bonds. This resulted in a reduced interest rate for the 2006A series of Bonds. As a result of this transaction, the Company posted a loss of \$936,467 on the extinguishment of the debt and related unamortized asset costs. In addition, the Long Term Liability and corresponding Investment were written down by \$33,175,000, the amount of bonds purchased.
- The increase in interest expense combined with negative results in investment income resulted in a significant downturn in net non-operating revenues and expenses compared with the prior year (down 163%).

Overview of the Financial Statements

The Financial Statements consist of two parts: Management's Discussion and Analysis and the Basic Financial Statements. The Basic Financial Statements also include notes and required supplementary information that explain in more detail some of the information in the Financial Statements.

Required Basic Financial Statements

The Company reports financial information about the Company using accounting methods similar to those used by private sector companies. These statements offer short-term and long-term financial information about its activities. The Consolidated Balance Sheets include all of the Company's assets and liabilities and provide information about the nature and amounts of investments in resources (assets) and the obligations to Company creditors (liabilities). The assets and liabilities are presented in a classified format, which distinguishes between current and long-term assets and liabilities. These statements also provide the basis for computing rate of return, evaluating the capital structure of the Company and assessing the liquidity and financial flexibility of the Company.

All of the current year's revenues and expenses are accounted for in the Consolidated Statements of Revenues and Expenses and Changes in Net Assets. These statements measure the performance of the Company's operations over the past year and can be used to determine whether the Company has successfully recovered all of its costs through the services provided, as well as its profitability and credit worthiness.

The final required statement is the Consolidated Statement of Cash Flows. The primary purpose of this statement is to provide information about the Company's cash receipts and cash payments during the reporting period. The statement reports cash receipts, cash payments, and net changes in cash resulting from operating, investing, non-capital financing and financing activities, and provides information as to where cash came from, what cash was used for, and what the change in the cash balance was during the reporting period.

Financial Analysis

Our analysis of the Financial Statements of the Company begins below. One of the most important questions asked about the Company's finances is "Is the Company as a whole better off or worse off as a result of the year's activities?" The Consolidated Balance Sheet and the Consolidated Statement of Revenues, Expenses, and Changes in Net Assets report information about the Company's activities in a way that will help answer this question. These statements report the net assets of the Company and changes in them. You can think of the Company's net assets – the difference between assets and liabilities – as one way to measure financial health or financial position. Over time, increases or decreases in the Company's net assets are one indicator of whether its financial health is improving or deteriorating. However, you will need to consider other non-financial factors such as changes in interest rates, economic conditions, regulations and new or changed government legislation.

Net Assets

A summary of the Company's Consolidated Balance Sheets is presented in Table A-1.

Table A-1

Condensed Consolidated Balance Sheets (In millions of dollars)

	Fiscal Year 2009	Fiscal Year 2008	Fiscal Year 2007	Dollar Increase (Decrease) 2008–2009	Percentage Increase (Decrease) 2008–2009
Current assets	\$ 134.0	\$ 114.8	\$ 105.0	\$ 19.2	17%
Capital assets, net	440.3	399.2	363.8	41.1	10%
Other long-term assets	229.0	275.0	356.6	(46.0)	(17%)
Total assets	\$ 803.3	\$ 789.0	\$ 825.4	\$ 14.3	2%
Current liabilities	\$ 72.1	\$ 66.4	\$ 71.1	\$ 5.7	9%
Long-term liabilities	300.0	229.2	265.8	70.7	31%
Total liabilities	\$ 372.1	\$ 295.6	336.9	76.4	26%
Invested in capital assets, net of related financing	\$ 392.0	\$ 230.7	\$ 213.1	\$ 161.3	70%
Restricted	27.2	1.1	19.2	26.1	2372%
Unrestricted	12.0	261.6	256.2	(249.6)	(95%)
Total net assets	431.2	493.4	488.5	(62.1)	(13%)
Total liabilities and net assets	\$ 803.3	\$ 789.0	\$ 825.4	\$ 14.3	2%

As indicated in Table A-1, net assets decreased from fiscal 2008 by \$62.1 million or 13% with the Company's financial performance in fiscal year 2009.

- Total assets increased by \$14.3 million or 2% with proceeds from the bond issue in August. As a result of the capital markets crisis that began in FY 2008, the District issued \$318,980,000 of Series 2008 Hospital Revenue Refunding and Improvement Bonds in August 2008. With this issue, the District refunded all existing auction rate and variable rate debt. A portion was used to establish a Debt Service Reserve Fund.
- Total liabilities increased by \$76.4 million or 26% primarily due to the bond issuance.

Table A-2

Condensed Consolidated Statements of Revenues, Expenses and Changes in Net Assets (In millions of dollars)

	Fiscal Year 2009	Fiscal Year 2008	Fiscal Year 2007	Dollar Increase (Decrease) 2008–2009	Percentage Increase (Decrease) 2008–2009
Net patient service revenues	\$ 519.4	\$ 510.1	\$ 496.1	\$ 9.3	2%
Other operating revenues	33.2	33.0	31.8	0.2	1%
Total operating revenues	552.6	543.1	527.9	9.5	2%
Salaries and benefits	302.5	288.9	279.2	13.6	5%
Supply expenses	113.3	110.5	108.2	2.8	3%
Other expenses	124.6	118.1	105.7	6.5	6%
Total expenses	540.4	517.5	493.1	22.9	5%
Income from operations	12.2	25.6	34.8	(13.4)	(52%)
Net nonoperating revenues and expenses	(73.5)	(15.4)	24.6	(58.1)	377%
Change in net assets	(61.3)	10.2	59.4	(71.5)	(701%)
Beginning net assets	493.4	488.5	431.8	4.9	1%
Less contributions	(0.9)	(5.3)	(2.7)	4.4	(83%)
Ending net assets	\$ 431.2	\$ 493.4	\$ 488.5	\$ (62.2)	(13%)

While the Consolidated Balance Sheets show the change in financial position or net assets, the Consolidated Statements of Revenues and Expenses and Changes in Net Assets, as indicated above, provide answers as to the nature and source of these changes (i.e., the financial result of current year operations).

Operating revenues increased by 2% from the prior year. The increase was driven primarily by service changes and revenue growth outside the flagship hospital, as noted below.

1. At the flagship hospital, revenues were flat compared to the prior year as routine increases in reimbursement were offset by volume declines.
2. Several service changes were made during the year which contributed to an increase in revenue over the prior year. In addition to realizing the full impact of several clinic purchases made late in the previous fiscal year, the Company purchased or established several new practices during the year. The Company also entered into a joint venture arrangement for Home Health services which contributed to increased revenue.
3. Outside the flagship hospital, routine increases in reimbursement combined with some volume increases generated revenue in excess of prior year.

Operating expense increased by 5% from the prior year.

1. Total salaries and benefits expense for the system increased by 5%. The Company's staffing levels as measured by total paid full-time-equivalent employees (FTEs) increased by 2% driving a portion of the increase. The remainder of the increase was driven by adjustments to salaries (merit and market-based salary adjustments in the first quarter of 2009) and routine growth of health plan claims cost. These increases were offset by the Company's efforts to control and reduce cost with reduced volumes. The most significant of these efforts included the discontinuation of employer matching for employee 403b plan contributions in February. In addition, the Company instituted controls to curb the rate of hiring, increase productivity and reduce the usage of premium pay.
2. Total supply cost for the system increased by 3% from the prior year driven largely by increases in pharmaceutical costs. In addition to inflation of drug costs beyond expectations, the Company experienced an increase in utilization of certain high-cost drugs.
3. Other expenses increased by 6% from the prior year with the following notable changes.
 - a. Depreciation expense increased by 17% or \$6.8 million. With the completion of the major construction project for a replacement bed tower, the Company took on a significant increase in depreciation expense early in the fiscal year.
 - b. Administrative and other expenses increased by 2.5% or \$1.9 million over the prior year, primarily driven by an increase in utilities cost of \$2.7 million with increases in rates and a substantial increase in cost for the flagship hospital with the opening of the new bed tower.

Significant nonoperating expense totaling \$73.5 million was incurred with the combination of \$35.7 million in market-driven investment losses and certain debt transactions described below.

1. In August 2008, the District issued \$318,980,000 of Series 2008 Hospital Revenue Refunding and Improvement Bonds. With this issue, the District refunded all existing auction rate and variable rate debt.
2. The District realized increased interest expense over the prior year, \$18,863,711 in total, mainly due to the higher interest rate on the new fixed rate bond issue.
3. In connection with the August 2008 bond issue and refunding of all auction rate and variable rate debt, the District also terminated all interest rate swap agreements. The cost and one time expense of such terminations totaled \$18,912,223.

Capital Assets and Long-Term Debt

Capital Assets

As of June 30, 2009, the Company had \$440.3 million invested in a variety of capital assets, as reflected in Table A-3, which represents a net increase (additions, disposals and depreciation) of \$41.1 million or 9% from the end of last year. Construction in progress includes costs for a parking garage and pedestrian crosswalk currently being constructed adjacent to the main campus.

Table A-3

Capital Assets (In millions of dollars)

	Fiscal Year 2009	Fiscal Year 2008
Land and land improvements	48.6	43.0
Buildings	255.9	167.8
Equipment	496.7	440.0
Construction in progress	23.8	128.5
Total capital assets	825.0	779.3
Accumulated depreciation	(384.7)	(380.1)
Net capital assets	440.3	399.2

Long-Term Debt

As of June 30, 2009, the Company had \$306.8 million in outstanding long-term debt and as of June 30, 2008, the Company had \$233.4 million in outstanding long-term debt. This represents a net increase of \$74 million over the prior fiscal year which is attributable to the issuance of the 2008 fixed rate bonds, as discussed above.

For more detailed information regarding the Company's capital assets and long-term debt, please refer to the notes to the financial statements.

Future Outlook

The Board of Trustees and management have a positive outlook about the future of the Company. Increases in volume are expected to resume as new physicians are recruited to the community and the Company continues to add and expand services. Additional increases in volume are expected as the Company continues to experience an increase in the population of its service area along with an increase in the age of the population as a whole and a projected increase in medical staff. The Company continues its efforts to control costs and improve operating efficiency to raise margins and strengthen its financial position for the future.

A five story medical office building to be located on Forest Avenue across from the main campus is currently under construction. This building is being constructed by Cogdell Spencer Erdman Developers. As noted above the Company is constructing a parking garage and pedestrian crosswalk which will connect the medical office building to the main hospital facility. The Company will lease space in the building, including the first floor which will house an ambulatory surgery center, and is currently paying the cost of certain leasehold improvements to the space it will be leasing.

Requests for Information

This financial report is designed to provide a general overview of the Company's finances. Questions concerning any of the information provided in this report or requests for additional information should be addressed to the Company.

West Tennessee Healthcare and Related Affiliates

Consolidated Balance Sheets

	June 30	
	2009	2008
Assets		
Current assets:		
Cash and cash equivalents	\$ 28,326,492	\$ 12,121,725
Accounts receivable:		
Patient accounts receivable	84,436,643	85,642,117
Other	4,445,592	5,232,847
Total accounts receivable	88,882,235	90,874,964
Inventories	5,339,277	4,976,984
Prepaid expenses	5,773,854	5,771,386
Assets limited as to use—current portion	5,737,858	1,076,595
Total current assets	134,059,716	114,821,654
Assets limited as to use:		
Funded depreciation—buildings	28,943,383	34,197,922
Funded depreciation—equipment	15,562,167	18,387,406
Debt service reserve fund	21,468,359	—
Project building fund	55,310,965	101,764,179
Operating reserve fund	78,569,001	91,876,306
Contingency fund	6,077,501	7,180,844
High technology fund	7,215,742	8,525,726
	213,147,118	261,932,383
Other assets:		
Unamortized bond issue costs	2,396,847	5,567,012
Other	13,473,686	7,449,212
	15,870,533	13,016,224
Property, plant, and equipment:		
Land and land improvements	48,616,153	42,965,154
Buildings	255,914,662	167,820,543
Fixed equipment	170,848,174	117,145,675
Moveable equipment	325,817,417	322,857,236
Construction in progress	23,841,942	128,538,305
	825,038,348	779,326,913
Accumulated depreciation	(384,760,214)	(380,093,335)
	440,278,134	399,233,578
Total assets	\$ 803,355,501	\$ 789,003,839

	June 30	
	2009	2008
Liabilities and net assets		
Current liabilities:		
Accounts payable	\$ 17,234,267	\$ 19,784,889
Accrued compensation and related expenses	19,891,437	18,337,515
Accrued interest expense	4,327,042	1,302,308
Other accrued expenses	23,934,007	22,874,594
Long-term debt due within one year	6,723,672	4,100,000
Total current liabilities	<u>72,110,425</u>	<u>66,399,306</u>
Other liabilities:		
Long-term debt, less amounts due within one year	300,035,676	229,251,283
Net assets:		
Unrestricted net assets	12,030,049	261,573,077
Invested in capital assets, net of related financing	391,973,134	230,703,578
Restricted net assets	27,206,217	1,076,595
Total net assets	<u>\$ 431,209,400</u>	<u>\$ 493,353,250</u>

Total liabilities and net assets

<u><u>\$ 803,355,501</u></u>	<u><u>\$ 789,003,839</u></u>
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See accompanying notes.

West Tennessee Healthcare and Related Affiliates

Consolidated Statements of Revenues
and Expenses and Changes in Net Assets

	Year Ended June 30	
	2009	2008
Operating revenues		
Net patient service revenues	\$ 519,406,705	\$ 510,105,046
Other revenues	33,181,011	32,990,361
Total operating revenues	552,587,716	543,095,407
Operating expenses		
Salaries and benefits	302,529,385	288,898,960
Supplies and other	190,388,299	187,985,953
Depreciation and amortization	47,437,696	40,593,135
Total operating expenses	540,355,380	517,478,048
Income from operations	12,232,336	25,617,359
Nonoperating revenues (expenses)		
Investment (loss) income	(35,702,189)	(325,599)
Interest expense	(18,863,711)	(15,112,931)
Nonoperating (expenses) revenue before loss on swap termination	(54,565,900)	(15,438,530)
Loss on swap termination	(18,912,223)	-
Income (loss) before capital contributions	(61,245,787)	10,178,829
Other changes in net assets		
Contribution to City of Jackson & Madison County	(400,000)	(2,000,000)
Contribution to City of Jackson Sportsplex	(150,000)	(150,000)
Contribution to City of Jackson Skyline Drive	-	(1,613,715)
Contribution to West Tennessee Healthcare Foundation	(348,063)	(1,564,194)
Net assets at beginning of year	493,353,250	488,502,330
Net assets at end of year	\$ 431,209,400	\$ 493,353,250

See accompanying notes.

West Tennessee Healthcare and Related Affiliates

Consolidated Statements of Cash Flows

	Year Ended June 30	
	2009	2008
Operating activities		
Receipts from third party payors and patients	\$ 554,580,445	\$ 530,166,225
Payments to suppliers	(198,482,567)	(199,090,605)
Payments to employees	(300,975,463)	(286,701,881)
Net cash provided by operating activities	55,122,415	44,373,739
Noncapital financing activity		
Contributions to City of Jackson and Madison County	(898,063)	(5,327,909)
Net cash used in noncapital financing activity	(898,063)	(5,327,909)
Investing activities		
Interest, dividends, and realized gain on investments	5,370,325	7,449,165
Investment in assets limited as to use	24,351,202	74,471,202
Net cash provided by investing activities	29,721,527	81,920,367
Capital and related financing activities		
Purchases of property, plant, and equipment	(88,268,428)	(75,885,705)
Proceeds from 2008 bond issuance	306,759,348	-
Establishment of debt service reserve	(21,299,713)	-
Repayment of long-term debt	(233,351,283)	(36,420,438)
Interest paid on long-term debt	(12,668,813)	(13,759,321)
Termination of interest rate swap instruments	(18,912,223)	-
Net cash used in capital and related financing activities	(67,741,112)	(126,065,464)
Increase (decrease) in cash and cash equivalents	16,204,767	(5,099,266)
Cash and cash equivalents at beginning of year	12,121,725	17,220,991
Cash and cash equivalents at end of year	\$ 28,326,492	\$ 12,121,725
Reconciliation of excess of revenues over expenses to net cash provided by operating activities		
Income from operations	\$ 12,232,336	\$ 25,617,359
Adjustments to reconcile income from operations to net cash provided by operating activities:		
Depreciation	47,223,872	40,457,815
Amortization	213,824	135,320
Changes in operating assets and liabilities:		
Accounts receivable	1,992,729	(12,929,183)
Inventory and prepaid expenses	(364,762)	(2,195,134)
Other assets	(6,238,297)	(1,476,577)
Accounts payable and accrued expenses	62,713	(5,235,861)
Net cash provided by operating activities	\$ 55,122,415	\$ 44,373,739
Supplemental schedule of noncash investing activities		
Change in fair value of investments	(41,072,513)	\$ (7,774,764)

See accompanying notes.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements

June 30, 2009

1. Significant Accounting Policies

Organization and Basis of Presentation

The accompanying consolidated financial statements include West Tennessee Healthcare and its related affiliates (hereinafter collectively referred to as the Company), all of which are under common control of the Jackson-Madison County General Hospital District (the District) and have been presented as blended component units of the Company. The Company presents its financial statements in accordance with generally accepted accounting principles and financial reporting standards. All significant intercompany balances and transactions have been eliminated in consolidation.

Proprietary Fund Accounting

The Company utilizes the proprietary fund method of accounting whereby revenues and expenses are recognized on an accrual basis. Substantially all revenues and expenses are subject to accrual.

Accounting Standards

Pursuant to Governmental Accounting Standards Board (GASB) Statement No. 20, *Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting*, the Company has elected to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB) issued before November 30, 1989.

Recent Accounting Pronouncements

In June 2008, the GASB issued GASB Statement No. 53, *Accounting and Financial Reporting for Derivative Instruments*. This statement intended to improve how state and local governments report information about derivative instruments – financial arrangements used by governments to manage specific risks or make investments – in their financial statements. The Statement specifically requires governments to measure most derivative instruments at fair value in their financial statements that are prepared using the economic resources measurement focus and the accrual basis of accounting. The guidance in this Statement also addresses hedge accounting requirements and is effective for financial statements for reporting periods beginning after June 15, 2009 (July 1, 2009 for the Company).

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

The new standard provides specific criteria that governments will use to determine whether a derivative instrument results in an effective hedge. Changes in fair value for effective hedges that are achieved with derivative instruments will be recognized in the reporting period to which they relate. The changes in fair value of these hedging derivative instruments do not affect current investment revenue, but are instead reported as deferrals in the statement of net assets or the balance sheet. Derivative instruments that either do not meet the criteria for an effective hedge or are associated with investments that are already reported at fair value are classified as investment derivative instruments for financial reporting purposes. Changes in fair value of those derivative instruments are reported as part of investment revenue in the current reporting period. The statement also improves disclosures, providing a summary of the government's derivative instrument activity, its objectives for entering into derivative instruments, and their significant terms and risks. The Company is in the process of evaluating the impact this statement will have on its results of operations or financial position.

On July 1, 2008, the Company adopted the provisions of GASB Statement No. 49, *Accounting and Financial Reporting for Pollution Remediation Obligations* (GASB 49). This Statement addresses accounting and financial reporting standards for pollution (including contamination) remediation obligations, which are obligations to address the current or potential detrimental effects of existing pollution by participating in pollution remediation activities such as site assessments and cleanups. The scope of the document excludes pollution prevention or control obligations with respect to current operations, and future pollution remediation activities that are required upon retirement of an asset, such as landfill closure and post closure care and nuclear power plant decommissioning. Once any one of five specified obligating events occurs (specified within GASB 49), a government is required to estimate the components of expected pollution remediation outlays and determine whether outlays for those components should be accrued as a liability or, if appropriate, capitalized when goods and services are acquired. The adoption of this statement did not have an impact on the Company's results of operations or financial position.

Cash and Cash Equivalents

The Company considers temporary cash investments with a maturity of three months or less when purchased to be cash and cash equivalents.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Investments

The Company's investments are reported at fair value in accordance with GASB Statement No. 31, *Accounting and Financial Reporting for Certain Investments and for External Investment Pools*. The Company invests in government bonds, short-term money market investments, equity securities and alternative investments that are in accordance with the Company's investment policy.

Investments include the Company's ownership interest in various limited partnerships and investment funds (collectively referred to as Funds) that, in turn, invest the capital of the Funds in other funds. These Funds have no significant liabilities, and the equity of the Funds is based upon the fair value of the financial instruments held. One of the Company's seven Funds invests directly in other funds that, in turn, invest primarily in financial instruments that are readily marketable in various public markets. The remaining six Funds invest in real estate, hedge funds, and limited partnerships. The fair value of these investments is determined by the underlying asset's manager or independent appraisals (in the case of real estate). Due to inherent uncertainty of these estimates, these values may differ materially from the values that would have been used had a ready market for these investments existed.

The calculation of realized gains and losses is independent of a calculation of the net change in the fair value of investments. Realized gains and losses on investments that had been held in more than one fiscal year and sold in the current year were included as a change in the fair value of investments reported in the prior year and the current year. Realized and unrealized gains and losses are included in investment income in the accompanying consolidated statements of revenues and expenses and changes in net assets.

Inventories

Inventories are stated at the lower of cost (first-in, first-out method) or market.

Funded Depreciation

The Company reserves funds for future purchases of property, plant and equipment. Investment earnings on funded depreciation funds were \$7,207,642 and \$6,314,313 for the years ended June 30, 2009 and 2008, respectively, and are classified as investment income in the accompanying consolidated statements of revenues and expenses and changes in net assets.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Bond Issue Costs and Discounts

Bond issue costs and discounts are amortized over the life of the related bonds by the interest method. Such amortization is included in interest expense in the accompanying consolidated statements of revenues and expenses and changes in net assets.

Property, Plant, and Equipment

Property, plant, and equipment are recorded on the basis of cost. Provisions for depreciation are computed by the straight-line method based on the estimated useful lives of the assets.

Fair Value of Financial Instruments

The carrying amounts reported in the consolidated balance sheets for cash and cash equivalents, accounts receivable and accounts payable approximate fair value because of the short-term maturity of these instruments. The carrying amounts of the Company's long-term debt instruments approximate fair value.

Compensated Absences

The Company allows employees to accumulate paid time off to be used for vacation, holiday and sick time. The Company allows employees to be paid for their vacation and holiday time not taken and accrues its liability for such time. Such liability is classified as accrued compensation and related expenses in the accompanying consolidated balance sheets.

Charity Care and Community Benefit

As a community provider, the Company's policy is to accept all patients regardless of their ability to pay. As a result, no distinction is made between bad debts and charity care for financial reporting purposes. However, management believes that substantially all of the uncollected amounts are due to patients' inability to pay. Therefore, all amounts which are not collected, other than third-party payor contractual adjustments, are recorded as charity care and excluded from net patient service revenues. The community benefit provided through charity care was \$79,735,918 and \$79,583,495, based on gross charges, for the years ended June 30, 2009 and 2008, respectively.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Net Patient Service Revenues

Net patient service revenues are reported at the net amounts billed to patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as changes in estimated provisions and final settlements are determined. Changes in estimated provisions and final settlements are included in net patient service revenues. For the fiscal year ended June 30, 2009, changes in estimated settlements resulted in an increase to revenues of approximately \$1,098,091.

The Company has agreements with third-party payors that provide for payments to the Company at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows.

- *Medicare.* Inpatient acute care services and skilled nursing services rendered to Medicare program beneficiaries are paid at prospectively determined rates per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors. The Company receives additional payments from Medicare based on the provision of services to a disproportionate share of Medicaid eligible and other low income patients. Effective August 1, 2000, the Center for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration) established an outpatient prospective payment system. The CMS established groups called ambulatory payment classifications for outpatient procedures. Payments are made based on the group assignment for the service rendered. Additionally, CMS established a prospective payment system for home health services.
- *TennCare.* Effective January 1, 1994, the State of Tennessee Medicaid program was replaced by the State of Tennessee TennCare (TennCare) program for hospital services. Under the TennCare program, patients traditionally covered by the State of Tennessee Medicaid program enroll in managed care organizations that have contracted with the State of Tennessee to ensure health care coverage to their enrollees. The Company contracts with the managed care organizations to receive reimbursement for providing hospital services to these patients. Payment arrangements with these managed care organizations consist primarily of prospectively determined rates per discharge, discounts from established charges or prospectively determined daily rates.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

- *Other.* The Company has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations and preferred provider organizations. The bases for payment to the Company under these agreements include prospectively determined rates per discharge, discounts from established charges or prospectively determined daily rates.

Charges at the Company's established billing rates (gross patient service charges) related to patients covered by Medicare, Medicaid, and TennCare programs were 59% and 61% of gross patient service revenues in 2009 and 2008, respectively.

Charges exceeding amounts reimbursed and not included in net patient service revenues were as follows:

	Year Ended June 30	
	2009	2008
Medicare	\$ 361,629,438	\$ 314,589,830
TennCare	137,387,574	117,340,200
Other	262,589,621	235,007,606
	<u>\$ 761,606,633</u>	<u>\$ 666,937,636</u>

Laws and regulations governing the Medicare and TennCare/Medicaid programs are complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. The estimated reimbursement amounts are adjusted in subsequent periods as cost reports are prepared and filed and as final settlements are determined (in relation to certain government programs, primarily Medicare, this is generally referred to as the "cost report" filing and settlement process). Final determination of amounts earned under prospective payment and cost reimbursement activities is subject to review by appropriate governmental authorities or their agents. Management believes that adequate provisions have been made for adjustments that may result from final determination of amounts earned under Medicare and Medicaid programs.

Essential access and Medicaid Disproportionate Share payments of approximately \$6,641,865 and \$4,701,724 received from TennCare/Medicaid were included in net revenues during the years ended June 30, 2009 and 2008, respectively.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

The Company believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing. Compliance with such laws and regulations can be subject to future government review and interpretation as well as significant regulatory action including fines, penalties, and exclusion from the Medicare and TennCare/Medicaid programs.

Operating Revenues

The Company's primary mission is to provide health care services to the citizens of West Tennessee through its acute care and specialty care facilities. Therefore, operating revenues include those generated from direct patient care and sundry revenues related to the operation of the Company's facilities.

Use of Estimates

The preparation of financial statements in conformity with governmental accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Federal Income Taxes

The Internal Revenue Service has determined that all material affiliates comprising the Company are exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (IRC). The District is also exempt from federal income taxes under Section 115 of the IRC. As qualified tax-exempt organizations, each of the tax-exempt affiliates comprising the Company must operate in conformity with the IRC to maintain its tax-exempt status.

Reclassifications

Certain reclassifications have been made in the 2008 financial statements to conform to the 2009 presentation. These reclassifications have no effect on the results of operations or financial position as previously reported.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

2. Assets Limited as to Use

The Company, as authorized by the Board of Trustees, maintains checking accounts necessary for daily operations, deposits for the contingency fund, and deposits and investments for the funded depreciation funds. The bond funds are maintained in accordance with the bond indenture related to the Series 2008 \$318,980,000 Hospital Revenue Refunding and Improvement Bonds (see Note 6). The interest fund and bond sinking fund are maintained for the payment of bond principal and interest. A debt service reserve fund is maintained to make up any deficiencies in the interest fund and bond sinking fund. The interest fund, bond sinking fund and debt service reserve fund are included in assets limited as to use – current portion in the accompanying consolidated balance sheets.

The Company's investments and deposits, classified as assets limited as to use, are categorized to give an indication of the level of risk assumed by the Company as of year-end. All of the Company's investments presented below are included in Category 1. Category 1 includes investments that are insured or registered, or for which the securities are held by the Company or its agent in the Company's name.

The Company's investments are reported at fair value in accordance with GASB Statement No. 31, *Accounting and Financial Reporting for Certain Investments and for External Investment Pools*. The Company invests in government and corporate bonds, equity securities, alternative investments and short-term money market investments that are in accordance with the Company's investment policy.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

2. Assets Limited as to Use (continued)

A summary of assets limited as to use follows:

	June 30	
	2009	2008
Externally restricted by bond indenture agreement – held by bond trustee:		
Cash and short-term investments	\$ 27,206,217	\$ 1,076,595
Internally designated for capital acquisitions:		
Cash and short-term investments	1,092,749	847,674
Corporate and U.S. agency bond funds	33,977,929	53,164,124
Real estate mortgage fund	12,375,825	16,981,387
Equity securities	59,585,757	91,882,050
	107,032,260	162,875,235
Other internally designated funds:		
Cash and short-term investments	11,477,413	22,940,970
U.S. government agency obligations	23,467,486	24,975,070
Real estate mortgage fund	8,547,593	7,977,396
Equity securities	41,154,007	43,163,712
	84,646,499	99,057,148
Total assets limited as to use	218,884,976	263,008,978
Amounts required to meet current obligations	(5,737,858)	(1,076,595)
	\$ 213,147,118	\$ 261,932,383

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

3. Cash and Investments

At June 30, 2009 and 2008, the Company had cash on hand and deposits as follows:

	June 30	
	2009	2008
Cash on hand	\$ 14,847	\$ 17,605
Insured (FDIC) or collateralized with securities held by the Company	2,028,642	862,296
Collateralized by securities held by the pledging financial institution's trust department in the Company's name or in the State of Tennessee Collateral Pool	26,283,003	11,241,824
Total	\$ 28,326,492	\$ 12,121,725

The types of securities which are permitted investments for Company funds are established by the Company's Investment Policy in accordance with Tennessee Statutes. All funds of the Company may be invested in obligations of or guaranteed by the U.S. Government. In addition, certain funds of the Company may be invested in obligations of agencies of the U.S. government; obligations of or guaranteed by the State of Tennessee; collateralized certificates of deposit and repurchase agreements' commercial paper; and other asset classes including fixed income, domestic equities, international equities, and alternative investments.

Investments of the Company are comprised of the following:

	June 30	
	2009	2008
Cash and short-term investments	\$ 12,570,169	\$ 23,788,643
Trustee funds	27,206,217	1,076,595
Corporate and U.S. agency bond funds	57,445,410	78,139,197
Real estate mortgage fund	20,923,417	24,958,785
Equity securities	100,739,763	135,045,758
Total investments	218,884,976	263,008,978
Amounts required to meet current obligations	(5,737,858)	(1,076,595)
Total	\$ 213,147,118	\$ 261,932,383

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

3. Cash and Investments (continued)

At June 30, 2009 and 2008, the Company had \$12,570,169 and \$23,788,643, respectively, invested in short-term investments, which include U.S. Agencies and a sweep account secured by Agency securities held by the Trustee. All investments are carried at fair value.

In accordance with Governmental Accounting Standards Board Statement No. 40, *Deposit and Investment Risk Disclosures* (GASB 40), the Company has assessed the Custodial Credit Risk, the Concentration of Credit Risk, Credit Risk, and Interest Rate Risk of its Cash and Investments.

(a) Custodial Credit Risk – The Company’s deposits are exposed to custodial credit risk if they are not covered by depository insurance and the deposits are uncollateralized or are collateralized with securities held by the pledging financial institution’s trust department or agent but not in the depositor-government’s name. The deposit risk is that, in the event of the failure of a depository financial institution, the Company will not be able to recover deposits or will not be able to recover collateral securities that are in the possession of an outside party. The Company’s investment securities are exposed to custodial credit risk if the securities are uninsured, are not registered in the name of the Company, and are held by either the counterparty or the counterparty’s trust department or agent but not in the Company’s name. The investment risk is that, in the event of the failure of the counterparty to a transaction, the Company will not be able to recover the value of the investment or collateral securities that are in the possession of an outside party.

At June 30, 2009, the Company’s bank balances were not exposed to custodial credit risk since the full amount was covered by FDIC insurance or collateralized by securities held by the pledging financial institution’s Trust department in the Company’s name or by the State of Tennessee Collateral Pool.

As of June 30, 2009 and 2008, the Company’s investments were comprised of various short term investments, trustee funds, corporate and U.S. agency bond funds, real estate mortgage funds, equity securities and alternative investments. Since the investments are registered in the Company’s name, they are not exposed to custodial credit risk. In addition, the Company’s investment policy requires that specific qualifications be met in order to represent the Company as a custodian.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

3. Cash and Investments (continued)

(b) Concentration of Credit Risk – This is the risk associated with the amount of investments the Company has with any one issuer that exceeds 5% or more of its total investments. Investments issued or explicitly guaranteed by the U.S. government and investments in mutual funds, external investment pools, and other pooled investments are excluded from this requirement. The Company’s investment policy states that no equity may represent more than 8% of any individual portfolio manager and that no single purchase shall represent more than 5% of the Company’s total equity position.

(c) Credit Risk – GASB 40 requires that disclosure be made as to the credit rating of all debt security investments except for obligations of the U.S. government or obligations explicitly guaranteed by the U.S. government. This is the risk that an issuer or other counterparty to an investment will not fulfill its obligations. The Company’s investment policy provides guidelines for its fund managers and lists specific allowable investments. The policy provides for the utilization of varying styles of managers so that portfolio diversification is maximized and total portfolio efficiency is enhanced.

The credit risk profile of the Company’s investments as of June 30, 2009, is as follows:

Investment Type	Balance as of June 30, 2009	Rating			
		AAA	AA	A+	N/A
Short-term investments	\$ 12,570,169	\$ 12,570,169	\$ –	\$ –	\$ –
Trustee funds	27,206,217	27,206,217	–	–	–
Corporate & US agency bond funds	57,445,410	–	44,020,848	13,424,562	–
Real estate mortgage fund	20,923,417	–	–	–	20,923,417
Equity securities	100,739,763	–	–	–	100,739,763
Total investments	218,884,976	39,776,386	44,020,848	13,424,562	121,663,180
Amounts required to meet current obligations	(5,737,858)	(5,737,858)	–	–	–
Total	\$ 213,147,118	\$ 34,038,528	\$ 44,020,848	\$ 13,424,562	\$ 121,663,180

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

3. Cash and Investments (continued)

(d) Investment Rate Risk – This is the risk that changes in interest rates will adversely affect the fair value of an investment. The Company’s Investment Policy authorizes a strategic asset allocation that is designed to provide an optimal return over the Company’s investment horizon and within the Company’s risk tolerance and cash requirements.

The distribution of the Company’s investments by maturity as of June 30, 2009, is as follows:

Investment Type	Balance as of June 30, 2009	Remaining Maturity (In Months)				N/A
		12 Months or Less	13 Months to 24 Months	25 Months to 60 Months	Greater than 60 Months	
Short-term investments	\$ 12,570,169	\$ 12,570,169	\$ –	\$ –	\$ –	\$ –
Trustee funds	27,206,217	27,206,217	–	–	–	–
Corporate & US agency bond funds	57,445,410	–	–	57,445,410	–	–
Real estate mortgage fund	20,923,417	–	–	–	–	20,923,417
Equity securities	100,739,763	–	–	–	–	100,739,763
Total investments	218,884,976	39,776,386	–	57,445,410	–	121,663,180
Amounts required to meet current obligations	(5,737,858)	(5,737,858)	–	–	–	–
Total	\$213,147,118	\$ 34,038,528	\$ –	\$57,445,410	\$ –	\$ 121,663,180

For the years ended June 30, 2009 and 2008, investment (loss) income is comprised of the following:

	2009	2008
Interest earnings	\$ 5,370,324	\$ 7,449,165
Net decrease in fair value of investments	(41,072,513)	(7,774,764)
	<u>\$ (35,702,189)</u>	<u>\$ (325,599)</u>

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

4. Disaggregation of Payable Balances

Accounts Payable and Accrued Expenses

Accounts payable for the years ended June 30, 2009 and 2008, consisted of the following:

	<u>2009</u>	<u>2008</u>
Due to vendors	\$ 14,639,486	\$ 18,494,489
Due to patients	2,486,074	1,117,140
Other	108,707	173,260
Total accounts payable	<u>\$ 17,234,267</u>	<u>\$ 19,784,889</u>

Other accrued expenses for the years ended June 30, 2009 and 2008, consisted of the following:

	<u>2009</u>	<u>2008</u>
Accruals for self insurance	\$ 8,775,571	\$ 7,443,311
Other	15,158,436	15,431,283
Total other accrued expenses	<u>\$ 23,934,007</u>	<u>\$ 22,874,594</u>

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

5. Net Property, Plant and Equipment

Net property, plant, and equipment activity for the years ended June 30, 2009 and 2008, consisted of the following:

	Balance at June 30, 2007	Additions	Reductions	Balance at June 30, 2008	Additions	Reductions	Balance at June 30, 2009
Land and improvements	\$ 29,534,613	\$ 484,690	\$ (42,000)	\$ 29,977,302	\$ 2,951,000	\$ (26,000)	\$ 32,902,302
Land improvements	13,930,710	114,323	(1,057,181)	12,987,852	2,816,780	(90,781)	15,713,851
Less accumulated depreciation	7,145,923	605,475	(895,787)	6,855,611	885,701	(301,915)	7,439,397
Net land and improvements	6,784,787	(491,152)	(161,394)	6,132,241	1,931,079	211,134	8,274,454
Buildings	168,380,577	4,207,288	(4,767,322)	167,820,543	88,627,065	(532,946)	255,914,662
Less accumulated depreciation	85,034,017	7,161,357	(3,037,647)	89,157,727	11,933,618	(3,126,458)	97,964,887
Net buildings	83,346,560	(2,954,069)	(1,729,675)	78,662,816	76,693,447	2,593,512	157,949,775
Equipment	421,630,586	27,272,160	(8,899,836)	440,002,910	98,499,781	(41,837,100)	496,665,591
Less accumulated depreciation	259,948,176	32,770,998	(8,639,177)	284,079,996	38,682,518	(43,406,584)	279,355,930
Net equipment	161,682,411	(5,498,838)	(260,659)	155,922,914	59,817,263	1,569,484	217,309,661
Construction in progress	82,457,318	53,844,904	(7,763,917)	128,538,305	36,453,805	(141,150,168)	23,841,942
	<u>\$ 363,805,688</u>	<u>\$ 45,385,535</u>	<u>\$ (9,957,645)</u>	<u>\$ 399,233,578</u>	<u>\$ 177,846,594</u>	<u>\$ (136,802,038)</u>	<u>\$ 440,278,134</u>

Depreciation is computed by applying the straight-line method over the estimated remaining useful lives of buildings and improvements (10 to 40 years) and equipment (4 to 20 years). Assets under capital leases are amortized using the straight-line method over the shorter of the estimated useful life of the assets or life of the lease term, excluding any lease renewal, unless the lease renewals are reasonably assured. Amortization expense related to assets under capital leases is included in depreciation expense. The Company's capitalization threshold is \$1,000 and a minimum useful life of 2 years. Depreciation expense totaled \$47,223,872 and \$40,457,815 during the years ended June 30, 2009 and 2008, respectively.

Construction in progress at June 30, 2009, consists of various projects for additions and renovations to the Company's facilities. The Company has outstanding contracts and other commitments related to the completion of these projects. The Company estimates \$33,281,311 in costs to complete these projects.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

6. Long-Term Debt and Capital Lease Obligations

Long-term debt consists of the following:

	June 30	
	2009	2008
Hospital Revenue Refunding and Improvement Bonds, Series 1995, unamortized loss on bond refunding	\$ (697,351)	\$ (933,907)
	(697,351)	(933,907)
Hospital Revenue Bonds, Series 1998, unamortized bond discount	(2,546,100)	(2,780,807)
	(2,546,100)	(2,780,807)
Auction Rate Hospital Revenue Bonds, Series 2003, through April 2026	–	78,350,000
Less unamortized bond discount	–	(119,553)
Unamortized loss on defeasance	(1,897,539)	–
	(1,897,539)	78,230,447
Auction Rate Hospital Revenue Bonds, Series 2006A, through April 2041	–	15,550,000
Less unamortized bond discount	–	(52,941)
Unamortized loss on defeasance	(340,327)	–
	(340,327)	15,497,059
Auction Rate Hospital Revenue Bonds, Series 2006B, through April 2041	–	143,600,000
Less unamortized bond discount	–	(261,509)
Unamortized loss on defeasance	(3,309,760)	–
	(3,309,760)	143,338,491
Hospital Revenue Bonds, Series 2008	316,555,000	–
Less unamortized bond discount	(5,682,997)	–
	310,872,003	–
Capital lease obligation	1,518,629	–
Notes payable	3,159,793	–
	306,759,348	233,351,283
Amounts due within one year	(6,723,672)	(4,100,000)
	\$ 300,035,676	\$ 229,251,283

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

6. Long-Term Debt and Capital Lease Obligations (continued)

In September 1995, the District issued \$68,200,000 of Series 1995 Hospital Revenue Refunding and Improvement Bonds. A portion of the proceeds of the Series 1995 Bonds were used to advance refund \$39,370,000 of its Series 1986 Bonds. The remaining proceeds of the Series 1995 Bonds were used to fund capital improvements of certain facilities of the District.

The advance refunding resulted in a difference between the reacquisition price and the net carrying amount of the old debt of approximately \$1,840,000. This difference, reported in the accompanying balance sheets as a reduction of long-term debt, is being amortized through the year 2013.

In September 1998, the District issued \$70,000,000 of Series 1998 Hospital Revenue Bonds. A portion of the proceeds of the Series 1998 Bonds were used to advance refund \$8,940,000 and \$1,150,000 of Series 1992 and 1986 Bonds, respectively. The remaining proceeds of the Series 1998 Bonds were used to fund capital improvements of certain facilities of the District.

In October of 2003, the District issued \$80,000,000 of Series 2003 Auction Rate Hospital Revenue Bonds. The proceeds of these bonds were used to fund capital improvements of certain facilities of the District.

In August of 2006, the District issued \$50,100,000 of Series 2006A Auction Rate Hospital Revenue Refunding Bonds. A portion of the proceeds were used to refund \$49,700,000 of its Series 1995 Bonds. The remaining proceeds of the Series 2006A Bonds were used to fund capital improvements of certain facilities of the District.

In August of 2006, the District issued \$145,700,000 of Series 2006B Variable Rate Demand Hospital Revenue Refunding and Improvement Bonds. A portion of the proceeds were used to advance refund \$57,570,000 of its Series 1998 Bonds. The remaining proceeds of the Series 2006B Bonds were used to fund capital improvements of certain facilities of the District.

In August 2008, the District issued \$318,980,000 of Series 2008 Hospital Revenue Refunding and Improvement Bonds. With the 2008 fixed rate bond issue, the District has eliminated all auction rate and variable rate debt. A portion of the proceeds were used to refund \$78,350,000 of its Series 2003 Auction Rate Hospital Revenue Bonds; \$48,725,000 of its Series 2006A Auction Rate Hospital Revenue Bonds; and \$143,600,000 of its Series 2006B Variable Demand Rate Hospital Revenue Refunding and Improvement Bonds. A Debt Service Reserve Fund was

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

6. Long-Term Debt and Capital Lease Obligations (continued)

created under the 2008 indenture. On the date of issuance of the 2008 bonds, \$21,299,713 of the proceeds of the 2008 bonds were deposited in the Debt Service Reserve Fund. The remaining proceeds of the Series 2008 Bonds will be used to fund capital improvements of certain facilities of the District.

The District's revenues are pledged as collateral to the Series 2008.

The Company paid interest of \$12,668,812 and \$13,759,321 for the years ended June 30, 2009 and 2008, respectively.

Long-term debt activity for the years ended June 30, 2009 and 2008, consisted of the following:

	Balance at June 30, 2007				Balance at June 30, 2008				Balance at June 30, 2009
		Additions	Reductions			Additions	Reductions		
Bonds payable	\$274,600,000	\$ -	\$ 37,100,000		\$237,500,000	\$352,155,000	\$273,100,000		\$ 316,555,000
Other	-	-	-		-	8,928,795	4,250,373		4,678,422
Total long-term debt	\$274,600,000	\$ -	\$ 37,100,000		\$237,500,000	\$361,083,795	\$277,350,373		\$ 321,233,422

During fiscal year 2008, the District purchased \$33,175,000, of the Series 2006A Auction Rate Hospital Revenue Refunding Bonds, prior to refinancing all of its outstanding long-term debt in August 2008. These purchases were accounted for as an extinguishment of debt at June 30, 2008.

The 2008 Bond Issue which closed in August 2008 provided for the termination of the District's 2003A, 2006A, and 2006B interest rate swaps. The District made termination payments to the counterparties of \$4,145,700, \$3,529,000, and \$11,449,000, respectively for the 2003A, 2006A, and 2006B interest rate swaps. Subsequent to such termination payments, the District has no risk associated with any interest rate swaps at June 30, 2009.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

6. Long-Term Debt and Capital Lease Obligations (continued)

Scheduled principal and interest payments, including capital lease obligations, are as follows:

<u>Fiscal Years Ending June 30</u>	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2010	\$ 6,723,672	\$ 17,247,598	\$ 23,971,270
2011 – 2015	25,599,750	83,035,272	108,635,022
2016 – 2020	29,815,000	76,673,869	106,488,869
2021 – 2025	38,430,000	68,052,975	106,482,975
2026 – 2030	49,875,000	56,606,675	106,481,675
2031 – 2035	65,125,000	41,365,588	106,490,588
2036 – 2041	105,665,000	22,118,475	127,783,475
Unamortized bond discount, net	(5,682,997)	–	(5,682,997)
Unamortized loss on bond refunding, net	(8,791,077)	–	(8,791,077)
Total	<u>\$306,759,348</u>	<u>\$365,100,452</u>	<u>\$671,859,800</u>

7. Leases

The Company leases equipment under various operating leases. Rent expense for all operating leases was approximately \$3,913,261 and \$3,047,191 for the years ended June 30, 2009 and 2008, respectively. Approximate minimum future rental payments, by year and in the aggregate, under noncancelable operating leases with initial terms of one year or more are as follows at June 30, 2009.

2010	\$ 1,283,615
2011	896,351
2012	626,206
2013	186,516
2014	144,001
Thereafter	216,014
	<u>\$ 3,352,703</u>

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

8. Concentrations of Credit Risk

The Company grants credit without collateral to its patients, most of whom are individuals and are insured under third-party payor agreements. Accounts receivable from patients and third-party payors are as follows:

	June 30	
	2009	2008
Medicare	34%	35%
Medicaid and TennCare	13	14
Blue Cross	15	15
Private pay	24	22
Other	14	14
	<u>100%</u>	<u>100%</u>

9. Retirement Plans

Defined Benefit Plan

The Company has a noncontributory, defined benefit pension plan (the Plan) covering substantially all of its employees. The Plan is a single-employer defined benefit pension plan which covers all employees on the first anniversary of their date of hire who have completed at least 1,000 hours of employment in any anniversary year following their date of hire. All employees hired after October 1, 2005, are covered on the fifth anniversary of their date of hire after they have completed at least 1,800 hours of employment per year. The Plan provides retirement, termination, disability, and death benefits to plan members and beneficiaries. The operation of the Plan is consistent with the laws of Tennessee and the United States federal government. The Plan issues a publicly available financial report as required by GASB Statement No. 25 that includes a financial statement and required supplementary information for the Plan. That report may be obtained by writing to West Tennessee Healthcare, attention: Human Resources, Manager of Benefits, 620 Skyline Drive, Jackson, Tennessee 38301-3956 or by calling 731-541-5000.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

9. Retirement Plans (continued)

Funding Policy

The Company has no legal or plan requirements to fund the Plan. The Company has established a policy of funding the end of the Plan year normal cost plus 20-year amortization of the unfunded actuarial accrued liability up to fully funding the accrued liability of the Actuarial Cost Method.

Annual Pension Cost and Net Pension Obligation

Current year contributions made to the Plan equaled 98% of the annual pension cost. Contributions made to the Plan in 2005 equaled the annual pension cost plus an additional one-time discretionary contribution of \$6,300,006. Therefore, the net pension obligation had an ending credit balance of \$5,482,283 at June 30, 2009, and \$5,686,173 at June 30, 2008.

The annual required contribution for the fiscal year ending June 30, 2009, was determined as part of the actuarial valuation for the Plan year beginning January 1, 2008, and is the December 31, 2007, recommended contribution using the Actuarial Cost Method with amortization of the unfunded actuarial liability over 20 years. The actuarial assumptions included (a) 7.0% post-retirement and 7.0% pre-retirement investment rate of return and (b) a projected salary increase of 5.0% per year. Both (a) and (b) include an inflation component of 2.5%. The actuarial value of assets is equal to the market value of assets reported by First Tennessee Bank and CNA Insurance Company.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

9. Retirement Plans (continued)

Defined Benefit Plan Three-Year Trend Information

Fiscal Year Ending	Annual Pension Cost (APC)	Percentage of APC Contributed	Net Pension Obligation (Credit)
June 30, 2007	11,108,459	98%	(5,951,140)
June 30, 2008	11,447,418	98%	(5,686,173)
June 30, 2009	11,140,906	98%	(5,482,283)

Schedule of Funding Progress

Actuarial Valuation Date	Actuarial Value of Assets	Actuarial Accrued Liability (AAL)	Total Unfunded AAL (Funding Deficit) (UAAL)	Funded Ratio	Annual Covered Payroll	UAAL as a Percentage of Covered Payroll
01/01/07	133,859,871	160,535,174	26,675,303	83%	178,576,648	15%
01/01/08	152,712,499	175,027,485	22,314,986	87%	173,007,888	13%
01/01/09	160,897,049	192,825,950	31,928,901	83%	170,823,560	19%

The Company also maintains a defined contribution plan under Section 403(b) of the IRC which provides for voluntary contributions by employees upon employment and matching contributions by the District after two years of service. Substantially all employees of the District are eligible and may contribute up to 20% of their compensation, subject to certain IRC limitations. Upon January 1 after the completion of two years of credited service, the District matches 100% of the first 3% of compensation contributed and 50% of the next 3% contributed. The District placed a temporary freeze on the match to the 403(b) plan during the fiscal year ended June 30, 2009. The District recognized expense related to the 403(b) Plan of \$3,176,742 and \$4,612,918 in 2009 and 2008, respectively.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

9. Retirement Plans (continued)

Supplemental 415(m) Retirement Plan

In 2005 the Company established a supplemental 415(m) retirement plan (the 415 Plan). The 415 Plan will provide monthly benefits equal to the benefit that cannot be paid from the Defined Benefit Plan due to the application of the Code Section 415 limits. The operation of the Plan is consistent with the laws of Tennessee and the United States federal government.

Because the 415 Plan is unfunded, these benefit payments are deemed contributions when paid.

Supplemental 415(m) Plan Three-Year Trend Information

Fiscal Year Ending	Annual Pension Cost (APC)	Percentage of APC Contributed	Net Pension Obligation (Credit)
June 30, 2007	74,274	0%	144,344
June 30, 2008	78,744	0%	223,088
June 30, 2009	83,468	77%	242,429

Schedule of Funding Progress

Actuarial Valuation Date	Actuarial Value of Assets	Actuarial Accrued Liability (AAL)	Total Unfunded AAL (Funding Deficit) (UAAL)	Funded Ratio	Annual Covered Payroll	UAAL as a Percentage of Covered Payroll
01/01/07	–	903,176	903,176	0%	N/A	0%
01/01/08	–	957,366	957,366	0%	N/A	0%
01/01/09	–	925,935	925,935	0%	N/A	0%

Other Post-Employment Benefits

Governmental Accounting Standards Board (GASB) Statement No. 45: *Accounting and Financial Reporting by Employers for Postemployment Benefits Other Than Pensions* was issued in June 2004. The requirements apply to any state or local government employer that provides Other Post-Employment Benefits (OPEB). The primary types of OPEB covered by the statement are postretirement health benefits and life insurance benefits. The effective date of this requirement for the Company was the fiscal year beginning July 1, 2007.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

9. Retirement Plans (continued)

Any of six actuarial cost methods can be used to determine the OPEB expense. The Company calculated its OPEB expense using the projected unit credit method.

The unfunded actuarial accrued liability must be amortized over a period of not greater than 30 years. The amortization amount may be computed as a level dollar amount or as a level percentage of pay. The Company used a level percentage of pay with a 30 year closed amortization period for purposes of computing the minimum accrual under GASB 45.

The Annual Required Contribution (ARC) calculated in accordance with GASB 45 for the fiscal years ending June 30, 2009 and 2010, is summarized below.

ARC Based on a Level Percent of Pay Amortization for Fiscal Year Ending		
Level Percent of Pay Amortization	6/30/2009	6/30/2010
Medical Benefits – Projected Unit Credit	\$ 647,040	\$ 790,751

GASB 45 does not require funding of OPEB expense, but any differences between the annual expense and the amount funded in a year are recorded in the Company's financial statement as an increase (or decrease) in the net OPEB obligation. The Company elected to fund its OPEB expense and as of June 30, 2009, the fund had net assets in the amount of \$892,095. This balance represents the June 30, 2008 ARC of \$547,951 plus the fiscal year 2009 funding of \$337,343 in addition to \$6,801 in earnings on the fund. The fiscal year 2009 balance of \$337,343 represents the 2009 ARC of \$647,040 less actual benefit payments of \$309,697.

10. Commitments and Contingencies

The Company is exposed to various risks of loss from torts; theft of, damage to and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; and employee health, dental and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters.

Settled claims have not exceeded this commercial coverage in any of the three preceding years.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

10. Commitments and Contingencies (continued)

Professional Liability

The Company established the contingency fund as a professional liability self-insurance fund in accordance with the Government Tort Liability Act, which restricts the District's exposure to professional liability risks to a pre-determined amount per occurrence.

The District is a "governmental entity" within the meaning of the Tennessee Governmental Tort Liability Act (the Tort Act). As such, its maximum liability for state law tort causes of action is \$250,000 for bodily injury or death of any one person in accident, occurrence, or act, and \$600,000 for bodily injury or death of all persons in any one accident, occurrence, or act. These limits are subject to change by the Tennessee Legislature. Prior to July 1, 2002, the Tennessee Governmental Tort Liability limited local government tort liability to \$130,000 for individual injury or death in any one occurrence and \$350,000 for injury or death of all persons in any one occurrence.

Investment earnings on contingency fund assets were \$997,587 and \$875,597 for the years ended June 30, 2009 and 2008, respectively, and are classified as investment income in the accompanying consolidated statements of revenues and expenses and changes in net assets.

The Company's accrual for self-insured professional liability risks was \$3,700,000 at June 30, 2009 and 2008, and was based on asserted claims for occurrences prior to that date. The Company does not accrue for unasserted claims or occurrences. In the opinion of management, any liability for such unasserted claims or occurrences would not materially affect the financial position of the Company.

Workers' Compensation

Under the Tennessee Workers' Compensation Law, governmental entities such as the District need not accept the workers' compensation system, thereby remaining subject to common law liability for work-related injuries and retaining all common law defenses to such claims. The limits of liability under the Tort Act are applicable to such claims. The District has not accepted the workers' compensation system. The Tennessee Supreme Court has ruled this exemption applicable to the District's affiliate nonprofit corporations as well.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

10. Commitments and Contingencies (continued)

Employee Health

The Company is self-insured with respect to employee health insurance. Estimates of health insurance claims incurred but unpaid as of June 30, 2009 and 2008, are accrued based on estimates that incorporate the Company's past experience, as well as other considerations including the nature of claims and relevant trends. The Company had accrued a liability for incurred but unpaid claims of approximately \$8,775,571 and \$7,443,311, as of June 30, 2009 and 2008, respectively, which is included in accrued compensation and related expenses in the accompanying consolidated financial statements. The expenses related to claims paid during the years ended June 30, 2009 and 2008, are \$29,178,267 and \$27,878,482, respectively, and are included in salary and benefits expense.

Litigation

The Company is subject to claims and suits which arise in the ordinary course of business. In the opinion of management, the ultimate resolution of such pending legal proceedings has been adequately recorded in its consolidated financial statements, and will not have a material effect on the Company's results of operations or financial position.

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

11. Segment Information

As disclosed in Note 6, the Company has revenue bonds outstanding that are payable from the operating revenues of certain affiliates of the District (the Obligated Group). Summary financial information for the Obligated Group is as follows:

	June 30	
	2009	2008
Assets		
Current assets	\$ 143,137,048	\$ 115,788,075
Property, plant, and equipment, net	409,487,771	372,381,426
Other assets	207,131,326	249,086,295
	\$ 759,756,145	\$ 737,255,796
 Liabilities and net assets		
Current liabilities	\$ 64,106,237	\$ 54,017,852
Long-term debt	300,035,676	229,251,283
 Net assets:		
Unrestricted net assets	7,225,244	249,058,640
Invested in capital assets, net of related financing	361,182,771	203,851,426
Restricted net assets	27,206,217	1,076,595
	395,614,232	453,986,661
	\$ 759,756,145	\$ 737,255,796

West Tennessee Healthcare and Related Affiliates

Notes to Consolidated Financial Statements (continued)

11. Segment Information (continued)

	Year Ended June 30	
	2009	2008
Net patient service revenues	\$ 448,410,772	\$ 451,643,882
Other operating revenues	19,379,821	19,997,840
Total revenues	467,790,593	471,641,722
Operating expenses	411,844,868	407,539,973
Depreciation	42,881,960	36,791,045
Total expenses	454,726,828	444,331,018
Income from operations	13,063,765	27,310,704
Loss on swap termination	(18,912,223)	-
Income (loss) from operations after swap loss	(5,848,458)	27,310,704
Net nonoperating gains (losses)	(31,839,413)	(438,185)
Interest expense	(18,863,711)	15,112,931
Income (loss) before capital contributions and transfers	(50,703,124)	(15,551,116)
Transfers (to) from other affiliates	(922,784)	(3,058,642)
Contributions	(898,063)	(5,327,909)
Increase (decrease) in net assets	(58,372,429)	3,373,037
Net assets, beginning of year	453,986,661	450,613,624
Net assets, end of year	\$ 395,614,232	\$ 453,986,661
Net cash provided by (used in):		
Operating activities	\$ 24,636,077	\$ 45,607,759
Noncapital financing activities	(1,820,846)	(8,386,551)
Capital and related financing activities	(19,035,229)	(120,646,061)
Investing activities	8,311,636	81,582,652
Net decrease in cash and cash equivalents	12,091,638	(1,842,201)
Cash and cash equivalents, beginning of year	2,192,654	4,034,855
Cash and cash equivalents, end of year	\$ 14,284,292	\$ 2,192,654

Supplementary Information

West Tennessee Healthcare and Related Affiliates
Schedule of Expenditures of Federal Awards and State Financial Assistance
For the Year ended June 30, 2009

Federal Grantor/Pass-Through Grantor	CFDA #	Contract Number	Beginning (Accrued) Deferred	Cash Receipts	Expenditures	Ending (Accrued) Deferred
Federal Awards						
US Dept of Education						
Tennessee Dept of Education						
Special Education Grants for Infants and Families With Disabilities	84.181A	GG-09-24514-00	\$ -	\$ 210,105	\$ 257,760	\$ (47,655)
	84.181A	GG-08-21963-00	(33,035)	33,035	-	-
Total US Dept of Education			(33,035)	243,140	257,760	(47,655)
US Department of Health and Human Services						
Tennessee Department of Human Services						
Child Care and Development Block Grant	93.575	N/A	-	334,541	504,455	(169,914)
	93.575	N/A	(120,217)	120,217	-	-
		N/A	-	1,175	4,187	(3,012)
		N/A	(3,628)	3,628	-	-
		N/A	(27,031)	27,031	-	-
Block Grant for Community Mental Health Services	93.958	GG-09-24917-00	-	128,307	205,500	(77,193)
	93.958	GG-09-25611-00	-	94,856	120,147	(25,291)
	93.958	GG-08-21846-00	(31,084)	31,084	-	-
Tennessee Department of Mental Health and Developmental Disabilities						
Division of Alcohol and Drug Abuse Services	93.959	Z-09-216528-00	-	157,170	183,350	(26,180)
Block Grant for Prevention and Treatment of Substance Abuse	93.959	Z-08-033634-00	(50,196)	50,196	-	-
	93.959	Z-08-033634-00	(7,210)	7,210	-	-
	93.959	Z-09-213832-00	-	134,575	155,555	(20,980)
	93.959	GG-09-26612-00	-	97,020	123,900	(26,880)
	93.959	GG-09-26041-00	-	24,352	35,421	(11,069)
Tennessee Department of Health						
Block Grant for Maternal and Child Health Services	93.994	GG-09-25283-00	-	7,882	9,861	(1,979)
	93.994 & 93.556	GG-08-20858-00	(2,695)	2,695	-	-
	93.301	Z-09-214880-00	-	-	-	-
	93.301	Z-08-022660-00	(42,500)	42,500	-	-

West Tennessee Healthcare and Related Affiliates
Schedule of Expenditures of Federal Awards and State Financial Assistance (continued)

Federal Grantor/Pass-Through Grantor	CFDA #	Contract Number	Beginning (Accrued) Deferred	Cash Receipts	Expenditures	Ending (Accrued) Deferred
Federal Awards (continued)						
Department of Health and Human Services (continued)						
Cooperative Agreements for State-Based Comprehensive Breast and Cervical Cancer Early Detection Programs	93.919	GG-09-24572-00	\$ -	\$ 28,449	\$ 34,793	\$ (6,344)
	93.919	GG-08-21163-00	(18,612)	18,612	-	-
National Bioterrorism Hospital Preparedness Program	93.889	Z-08-200412-01	275,300	399,500	172,655	502,145
	93.889	Z-08-200399-01	15,000	34,240	11,629	37,611
	93.889	Z-08-200438-01	15,000	34,240	3,175	46,065
	93.889	Z-08-200376-01	9,296	34,240	10,081	33,455
	93.889	Z-08-200378-01	4,228	34,240	14,882	23,586
	93.889	Z-08-200410-01	15,000	34,240	2,260	46,980
	93.889	Z-07-036207-00	4,444	-	4,444	-
	93.889	Z-07-036209-00	156,170	-	173,531	(17,361)
	93.889	Z-07-0362385-00	1,705	-	1,705	-
	93.889	Z-07-036196-00	1,389	-	975	414
Tennessee Department of Children's Services Foster Care Title IV-E	93.658	2008H3C0000530000	(1,436)	11,275	11,477	(1,638)
Tennessee Department Mental Health Development Disabilities Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	07-033433-01	(2,680)	8,275	10,800	(5,205)
Projects for Assistance in Transition from Homelessness	93.150	GG-09-25270-00	-	41,715	48,452	(6,737)
	93.150	GG-08-22103-00	(5,231)	5,231	-	-
Total US Department of Health and Human Services			\$ 185,012	\$ 1,948,696	\$ 1,843,235	\$ 290,473
Total Federal Awards			\$ 151,977	\$ 2,191,836	\$ 2,100,995	\$ 242,818

West Tennessee Healthcare and Related Affiliates
Schedule of Expenditures of Federal Awards and State Financial Assistance (continued)

Federal Grantor/Pass-Through Grantor	CFDA #	Contract Number	Beginning (Accrued) Deferred	Cash Receipts	Expenditures	Ending (Accrued) Deferred
State Financial Assistance						
US Dept of Education						
Tennessee Dept of Education						
Special Education Grants for Infants and Families With Disabilities						
	84.181A	GG-07-12423-01	\$ -	\$ 227,613	\$ 279,240	\$ (51,627)
	84.181A	GG-08-21963-00	(33,035)	33,035	-	-
Total US Dept of Education			(33,035)	260,648	279,240	(51,627)
US Department of Health and Human Services						
Block Grant for Prevention and Treatment of Substance Abuse						
	N/A	GG-09-26295-00	-	30,536	30,536	-
	N/A	GG-08-22588-00	(34,618)	34,618	-	-
Tennessee Department of Mental Health and Developmental Disabilities						
Division of Alcohol and Drug Abuse Services						
Block Grant for Prevention and Treatment						
	N/A	Z-09-216552-00	-	475,438	623,078	(147,640)
	93.959	Z-08-033634-00	(86,021)	86,021	-	-
	93.959	Z-08-033634-00	(12,355)	12,355	-	-
	N/A	GG-09-25230-00	-	124,800	125,000	(200)
	N/A	GG-0822552-00	(23,700)	23,700	-	-
	93.959	GG-09-26041-00	-	12,293	23,614	(11,321)
	N/A	GG-09-27052-00	-	79,264	126,827	(47,563)
Tennessee Department of Health						
Block Grant for Maternal and Child Health Services						
	93.994	GG-09-25283-00	-	211,066	264,058	(52,992)
	93.994 & 93.556	GG-08-20858-00	(71,338)	71,338	-	-
	N/A	GG-08-23167-00	(6,918)	6,918	-	-
	N/A	GG-09-25336-00	-	45,808	56,229	(10,421)
	N/A	GG-08-20896-00	(10,203)	10,203	-	-
	N/A	Z-07-033267-01 & 02 & 03 & 04	(11,347)	559,168	661,412	(113,591)
	N/A	GR-07-20785-00	(36,575)	36,575	-	-
	N/A	GG-08-23436-00	(55,000)	55,000	-	-

West Tennessee Healthcare and Related Affiliates

Schedule of Expenditures of Federal Awards and State Financial Assistance (continued)

Federal Grantor/Pass-Through Grantor	CFDA #	Contract Number	Beginning (Accrued) Deferred	Cash Receipts	Expenditures	Ending (Accrued) Deferred
State Financial Assistance (continued)						
US Department of Health and Human Services (continued)						
Tennessee Department of Children's Services	93.658	2008H3C0000530000	\$ (27,288)	\$ 214,214	\$ 218,054	\$ (31,127)
Tennessee Department of Mental Health Development Disabilities						
Block Grant for Community Mental Health Services	93.958	GG-09-24917-00	-	86,052	133,580	(47,528)
	93.958	GG-08-21460-00	(70,786)	70,786	-	-
	N/A	GG-09-25272-00	-	63,170	102,803	(39,633)
	N/A	GR-08-21905-00	(6,963)	6,963	-	-
	N/A	GG-09-25506-00	-	53,240	80,000	(26,760)
	N/A	GG-08-21765-00	(11,017)	11,017	-	-
	N/A	GG-09-26878-00	-	360,957	599,634	(238,677)
Substance Abuse and Mental Health Services						
Projects for Assistance in Transition from Homelessness	93.15	GG-09-25270-00	-	45,637	82,000	(36,363)
	93.15	GG-08-22103-00	(17,276)	17,276	-	-
	N/A	GG-09-24628-01 & 02	-	62,900	78,800	(15,900)
	N/A	GG-08-21267-00	(16,000)	16,000	-	-
	N/A	GG-09-24750-00	-	53,604	72,000	(18,396)
	N/A	GG-08-21518-01	(13,290)	13,290	-	-
Department of Finance and Administration						
Physician Connectivity	N/A	GG-09-26521-00	-	97,385	97,385	-
Total US Department of Health and Human Services			\$ (510,695)	\$ 3,047,592	\$ 3,375,010	\$ (838,112)
Total State Awards			\$ (543,730)	\$ 3,308,240	\$ 3,654,250	\$ (889,739)
Total Federal and State Awards			\$ (391,753)	\$ 5,500,076	\$ 5,755,245	\$ (646,921)

West Tennessee Healthcare and Related Affiliates

Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance

June 30, 2009

1. Basis of Presentation

The accompanying schedule of expenditures of federal awards and state financial assistance includes the federal grant activity of West Tennessee Healthcare and Related Affiliates and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.

2. Contingencies

The Company's federal programs are subject to financial and compliance audits by grantor agencies which, if instances of material noncompliance are found, may result in disallowed expenditures and affect the Company's continued participation in specific programs. The amount, if any, of expenditures which may be disallowed by the grantor agencies cannot be determined at this time, although the Company expects such amounts, if any, to be immaterial.

West Tennessee Healthcare and Related Affiliates

Schedule of Findings and Questioned Costs

Year Ended June 30, 2009

Part I – Summary of Auditor’s Results

Financial Statement Section

Type of auditor’s report issued:

Unqualified

Yes

No

Internal control over financial reporting:

Material weakness(es) identified?

X

Significant deficiencies identified not considered to be material weaknesses?

X

Noncompliance material to financial statements noted?

X

Federal Awards Section

Yes

No

Internal control over major programs:

Material weakness(es) identified?

X

Significant deficiencies identified not considered to be material weaknesses?

X

Type of auditor’s report on compliance for major programs:

Unqualified

Yes

No

Any audit findings disclosed that are required to be reported in accordance with Circular A-133 (section .510(a))?

X

West Tennessee Healthcare and Related Affiliates

Schedule of Findings and Questioned Costs (continued)

Year Ended June 30, 2009

Part I – Summary of Auditor’s Results (continued)

Identification of major programs:

<u>CFDA Number(s)</u>	<u>Name of Federal Program or Cluster</u>
93.889	US Department of Health and Human Services – National Bioterrorism Hospital Preparedness Program
93.958	US Department of Health and Human Services – Block Grants for Community Mental Health
93.959	US Department of Health and Human Services – Block Grants for Prevention and Treatment of Substance Abuse
93.575	US Department of Health and Human Services – Child Care and Development Block Grant

Dollar threshold used to determine Type A programs:

\$ 300,000

Yes

No

Auditee qualified as low-risk auditee?

X

West Tennessee Healthcare and Related Affiliates
Schedule of Findings and Questioned Costs (continued)

Year Ended June 30, 2009

Part II – Financial Statement Findings Section

This section identifies the significant deficiencies, material weaknesses, fraud, illegal acts, violations of provisions of contracts and grant agreements, and abuse related to the financial statements for which *Government Auditing Standards* require reporting in a Circular A-133 audit.

No findings required to be reported.

West Tennessee Healthcare and Related Affiliates

Schedule of Findings and Questioned Costs (continued)

Year Ended June 30, 2009

Part III – Federal Award Findings and Questioned Costs Section

This section identifies the audit findings required to be reported by Circular A-133 section .510 (for example, significant deficiencies, material weaknesses, and material instances of noncompliance, including questioned costs), as well as any abuse findings involving federal awards that are material to a major program.

No findings required to be reported.

Report on Compliance With Requirements Applicable to Each Major Program and on Internal Control Over Compliance in Accordance With OMB Circular A-133

The Board of Trustees
West Tennessee Healthcare and Related Affiliates

Compliance

We have audited the compliance of West Tennessee Healthcare and Related Affiliates (the Company) with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) *Circular A-133 Compliance Supplement* that are applicable to each of its major federal programs for the year ended June 30, 2009. The Company's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs. Compliance with the requirements of laws, regulations, contracts, and grants applicable to each of its major federal programs is the responsibility of the Company's management. Our responsibility is to express an opinion on the Company's compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Company's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination of the Company's compliance with those requirements.

In our opinion, the Company complied, in all material respects, with the requirements referred to above that are applicable to each of its major federal programs for the year ended June 30, 2009.

Internal Control Over Compliance

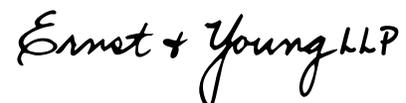
The management of the Company is responsible for establishing and maintaining effective internal control over compliance with the requirements of laws, regulations, contracts, and grants applicable to federal programs. In planning and performing our audit, we considered the Company's internal control over compliance with the requirements that could have a direct and material effect on a major federal program in order to determine our auditing procedures for the purpose of expressing our opinion on compliance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Company's internal control over compliance.

A *control deficiency* in an entity's internal control over compliance exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect noncompliance with a type of compliance requirement of a federal program on a timely basis. A *significant deficiency* is a control deficiency, or combination of control deficiencies, that adversely affects the entity's ability to administer a federal program such that there is more than a remote likelihood that noncompliance with a type of compliance requirement of a federal program that is more than inconsequential will not be prevented or detected by the entity's internal control.

A material weakness is a significant deficiency, or combination of significant deficiencies, that results in more than a remote likelihood that material noncompliance with a type of compliance requirement of a federal program will not be prevented or detected by the entity's internal control.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control that might be significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above.

This report is intended solely for the information and use of management, the Board of Trustees, others within the entity, and federal awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties.

A handwritten signature in black ink that reads 'Ernst & Young LLP'.

December 15, 2009

Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of the Financial Statements Performed in Accordance With *Government Auditing Standards*

The Board of Trustees
West Tennessee Healthcare and Related Affiliates

We have audited the consolidated financial statements of West Tennessee Healthcare and Related Affiliates (the Company) as of and for the year ended June 30, 2009, and have issued our report thereon dated October 23, 2009. We conducted our audit in accordance with auditing standards generally accepted in the United States and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Company's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Company's internal control over financial reporting.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, detect and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be deficiencies, significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Company's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

This report is intended solely for the information and use of management, the Board of Trustees, others within the entity, federal awarding agencies, and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties

Ernst + Young LLP

October 23, 2009