PROMISES MADE... PROMISES KEPT

2001

CHS
Community Health

Systems, Inc.
2001 Annual Report

Company Profile

Community Health Systems, Inc., located in the Nashville suburb of Brentwood, Tennessee, is a leading operator of general acute care hospitals in non-urban communities throughout the country. Through its subsidiaries, the company currently owns, leases or operates 59 hospitals in 20 states. Its hospitals offer a broad range of inpatient medical and surgical services, outpatient treatment and skilled nursing care.

Shares in Community Health Systems, Inc. are traded on the New York Stock Exchange under the symbol "CYH."

Alabama

Woodland Community Hospital, Cullman Parkway Medical Center, Decatur Lakeview Community Hospital, Eufaula South Baldwin Regional Medical Center, Foley L.V. Stabler Memorial Hospital, Greenville Hartselle Medical Center, Hartselle Edge Regional Hospital, Troy

Arizona

Western Arizona Regional Medical Center, Bullhead City

Payson Regional Medical Center, Payson

Arkansas

Harris Hospital, Newport Helena Regional Medical Center, Helena * Randolph County Medical Center, Pocahontas

California

Barstow Community Hospital, Barstow Fallbrook Hospital, Fallbrook Watsonville Community Hospital, Watsonville

Florida

North Okaloosa Medical Center, Crestview

Georgia

Berrien County Hospital, Nashville Fannin Regional Hospital, Blue Ridge

Illinois

Crossroads Community Hospital, Mt. Vernon Gateway Regional Medical Center, Granite City * Marion Memorial Hospital, Marion Red Bud Regional Hospital, Red Bud

Kentuck

Parkway Regional Hospital, Fulton Three Rivers Medical Center, Louisa Kentucky River Medical Center, Jackson

Louisiana

Byrd Regional Hospital, Leesville Sabine Medical Center, Many River West Medical Center, Plaquemine

Mississippi

King's Daughters Hospital, Greenville

Missouri

Northeast Regional Medical Center, Kirksville Moberly Regional Medical Center, Moberly

New Mexico

Mimbres Memorial Hospital, Deming Northeastern Regional Hospital, Las Vegas Eastern New Mexico Medical Center, Roswell

North Carolina

Martin General Hospital, Williamston

Pennsylvania

Berwick Hospital, Berwick Brandywine Hospital, Coatesville Easton Hospital, Easton Jennersville Regional Hospital, West Grove

South Carolina

Marlboro Park Hospital, Bennettsville Chesterfield General Hospital, Cheraw Springs Memorial Hospital, Lancaster

Tennessee

Cleveland Community Hospital, Cleveland Lakeway Regional Hospital, Morristown Scott County Hospital, Oneida White County Community Hospital, Sparta

Texas

Big Bend Regional Medical Center, Alpine Scenic Mountain Medical Center, Big Spring Northeast Medical Center, Bonham Cleveland Regional Medical Center, Cleveland Lake Granbury Medical Center, Granbury Hill Regional Hospital, Hillsboro Highland Medical Center, Lubbock South Texas Regional Medical Center, Jourdanton

Utah

Tooele Valley Regional Medical Center, Tooele

Virginia

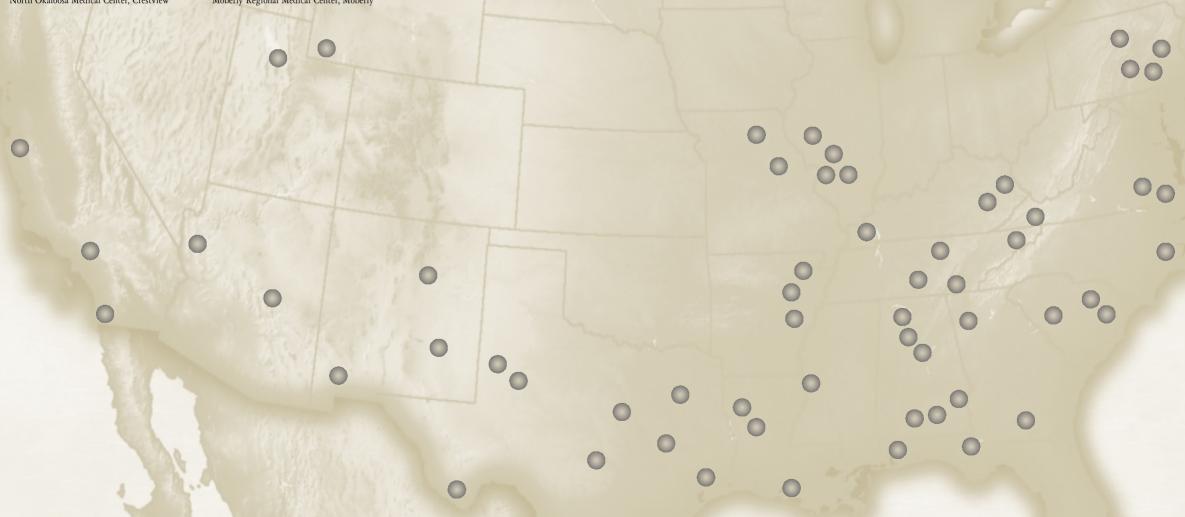
Greensville Memorial Hospital, Emporia Southampton Memorial Hospital, Franklin Russell County Medical Center, Lebanon

Wyoming

Evanston Regional Hospital, Evanston

* acquired in the first quarter of 2002

Community Health
Systems is devoted
through services, quality
and innovation to
providing continued
healthcare leadership in
the communities we serve.



Year Ended

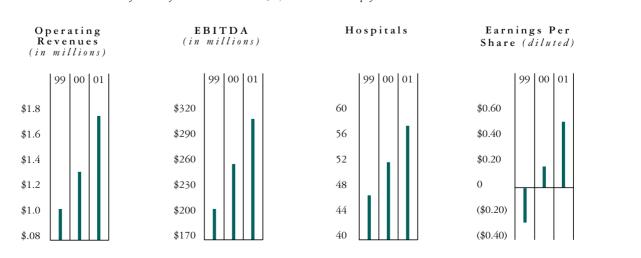
As of December 31,

	December 31,	
(In thousands, except per share amounts)	2001	2000*
Operating Results		
Net operating revenues	\$1,693,625	\$1,337,501
EBITDA	308,711	252,736
Income before extraordinary item	48,551	9,569
Net income	44,743	9,569
Income per share before extraordinary item:		
Basic	0.55	0.14
Diluted	0.54	0.14
Net income per share:		
Basic	0.51	0.14
Diluted	0.50	0.14
Weighted average number of shares outstanding:		
Basic	88,382	67,610
Diluted	90,251	69,187
		!

	2001	2000
Balance Sheet Data		
Working capital	\$ 194,987	\$ 167,704
Total assets	2,460,664	2,213,837
Long-term debt	980,083	1,201,590
Stockholders' equity	1,115,665	756,174

Year Ended December 31, Consolidated Same Store 2001 2001 2000* % Change 2000* % Change Selected Operating Data Number of hospitals 57 52 52 52 Licensed beds 4,688 4,625 4,688 5,391 Beds in service 4,139 3,587 3,560 3,587 Admissions 169,574 143,310 18.3% 148,675 143,062 3.9% 311,238 273,700 262,419 4.5% Adjusted admissions 18.6%261,933 643,229 548,827 17.2% 559,226 547,881 2.1% Patient days Average length of stay (days) 3.8 3.8 3.8 3.8 45.9% Occupancy rate (beds in service) 46.7% 44.6%44.7% \$ 1,693,625 Net operating revenues \$ 1,337,501 26.6% \$ 1,468,544 \$ 1,330,795 10.4% EBITDA as a % of total net operating revenue 18.2% 18.9%19.1% 18.6%

^{* 2000} includes one more business day in the year ended December 31, 2000 due to leap year.



Dear Shareholders:

We are very pleased to report that 2001 was an outstanding year for Community Health Systems. We not only demonstrated strong execution in meeting our strategic objectives, but we exceeded expectations in nearly every respect. More importantly, we are extremely proud to be able to share our success with communities across the country, and to deliver greater value to our shareholders. The measure of our success in 2001 is demonstrated by these key accomplishments:

- We reported record financial results with \$1.7 billion in revenues and \$309 million in EBITDA, representing 27% and 22% increases, respectively, over the prior year. Net income was \$44.7 million, or \$0.50 per share, in 2001, compared with \$9.6 million, or \$0.14 per share, in 2000.
- We achieved greater than 18% annual growth in both admissions and adjusted admissions (factors in outpatient business) on a consolidated hospital basis.
- We recruited 378 physicians, compared with 305 for the prior year, reflecting our commitment to improve the quality and scope of healthcare services in the communities we serve.
- We invested over \$93 million in hospital replacement projects, renovations and equipment improvements, and completed 10 emergency room projects, enhancing the delivery of healthcare in the communities we serve.
- We acquired five hospitals, expanding our asset base to 57 hospitals in 20 states at year-end, making us the most active acquirer in the non-urban sector of the hospital industry. In January and March of 2002, we purchased two additional facilities bringing the total to 59 hospitals.

Our outstanding performance reflects the strength of our proven operating model with centralization and standardization throughout our hospital network. This was evidenced by our excellent same-store (hospitals owned during the last 12 months) growth metrics, a critical measure of success in our industry. On a same-store basis, revenues increased by over 10%, admissions increased 4%, and adjusted admissions increased nearly 5% over the prior year. Other key utilization statistics, including emergency room visits and surgical procedures, also improved, again validating the strength of our business model. More importantly, it demonstrates that our hospitals are successful in meeting the healthcare needs of the communities they serve.

In 2001, we continued to build the solid financial platform to sustain our growth. In the fourth quarter we completed a public offering of 12 million shares of common stock and the sale of \$288 million of convertible subordinated notes, raising approximately \$585 million in net proceeds. As a result, we were able to significantly reduce our debt and we entered 2002 with a very attractive 48% debt-to-capital ratio and over \$300 million available on our line of credit. As of December 31, 2001, our balance sheet reflects \$195 million in working



WE BELIEVE THAT TO BE TRULY SUCCESSFUL, WE MUST BE FULLY ACCOUNTABLE TO THE COMMUNITIES WE SERVE, AND ULTIMATELY HAVE A POSITIVE INFLUENCE ON THE HEALTH OF EVEN GREATER NUMBERS OF PEOPLE.





WAYNE. T. SMITH
CHAIRMAN OF THE BOARD
PRESIDENT AND CHIEF EXECUTIVE OFFICER

capital, \$980 million in long-term debt, and approximately \$2.5 billion in total assets, providing the financial flexibility to continue to pursue our growth strategy.

Community Health Systems has continued to set a high standard for success in our industry with our ability to selectively acquire hospitals. We exceeded our projected target of acquisitions in 2001 with the addition of five new hospitals, all of which fit our criteria as the sole provider in their respective communities. We expect to achieve continued profitable growth with the effective assimilation of these acquired hospitals into our system. In addition, we remain confident about our future growth opportunities in what we view as a very acquisition-friendly environment. We have already completed two acquisitions this year, making us confident that we will reach our goal to acquire an additional three to four hospitals in 2002. Our growing recognition in the marketplace as the acquirer of choice reflects our steadfast commitment to our reputation for promises made, promises kept.

WE NOT ONLY DEMONSTRATED STRONG EXECUTION IN MEETING OUR STRATEGIC AND FINANCIAL OBJECTIVES IN 2001, BUT WE EXCEEDED EXPECTATIONS IN NEARLY EVERY RESPECT.

One of the most critical elements to success in our business is effective physician recruitment. We recognize that the most fundamental relationship in delivering healthcare services is the one between patient and physician. As we acquire hospitals and enter new communities, we also focus on bringing in new physicians, including specialists, to increase the level of intensity of healthcare services in the community. Above all, our highest priority is providing superior quality healthcare and we are committed to enhancing the experience a patient receives in one of our hospitals. More importantly, we want to ensure they can receive the highest level of care possible without having to leave their community. In the hospital management industry, there are many benchmarks for success. However, we believe that to be truly successful, we must be fully accountable to the communities we serve, and ultimately have a positive influence on the health of even greater numbers of people.

Our achievements to date have extended our role as a leading provider of quality healthcare in the non-urban market. We have an enviable advantage in the marketplace with a high quality asset portfolio, a compelling operating strategy, and a highly motivated management team capable of leveraging these attributes with a focus on success. We also recognize that it takes many talented and dedicated people working together to accomplish the remarkable milestones that Community Health Systems has achieved. We thank all of our employees, and associated physicians and medical staffs for their dedicated efforts and contributions to an incredible year.

We are most excited about the momentum we are building and believe that the greatest opportunities for Community Health Systems are still ahead. Our goal is to turn these future opportunities into greater value for our shareholders. We appreciate your interest and the trust you have placed in us through your investment in Community Health Systems and we hope that you will continue to be a part of our future.

Sincerely,

Wayne T. Smith Chairman of the Board

President and Chief Executive Officer

W. Larry Cash

Executive Vice President Chief Financial Officer







W. LARRY CASH
EXECUTIVE VICE PRESIDENT
CHIEF FINANCIAL OFFICER

Board of Directors

Wayne T. Smith (1)
Chairman of the Board
President and Chief Executive
Officer

Sheila P. Burke (3)
Under Secretary for American
Museums and National Programs
at the Smithsonian Institution

W. Larry Cash Executive Vice President and Chief Financial Officer Robert J. Dole Former U.S. Senator Former Senate Majority Leader

J. Anthony Forstmann (2)
Managing Director
J.A. Forstmann

Theodore J. Forstmann (1) Senior Founding Partner Forstmann Little & Co.

Dale F. Frey (3)
Former Chairman and
President
General Electric Investment Corp

Sandra J. Horbach (1) General Partner Forstmann Little & Co.

Harvey Klein, M.D. Professor of Clinical Medicine Cornell University Medical College

Thomas H. Lister General Partner Forstmann Little & Co.

Michael A. Miles (1) (2) (3) Former Chairman and Chief Executive Officer Philip Morris (1) Member of the Executive Committee

(2) Member of the Compensation Committee

(3) Member of the Audit and Compliance Committee

Officers

Wayne T. Smith Chairman of the Board President and Chief Executive Officer

W. Larry Cash Executive Vice President and Chief Financial Officer

David L. Miller Senior Vice President – Group Operations

Gary D. Newsome Senior Vice President – Group Operations Michael T. Portacci Senior Vice President – Group Operations

John A. Fromhold Vice President – Group Operations

Robert E. Hardison
Senior Vice President –
Acquisitions and Development

Carolyn S. Lipp Senior Vice President – Quality and Resource Management Martin G. Schweinhart Senior Vice President – Operations

Rachel A. Seifert Senior Vice President, Secretary and General Counsel

T. Mark Buford Vice President and Corporate Controller

James W. Doucette Vice President and Treasurer Kenneth D. Hawkins Vice President – Acquisitions

Robert A. Horrar Vice President – Administration

Linda K. Parsons Vice President – Human Resources

J. Gary Seay Vice President – Information Systems

Gerald A. Weissman Vice President – Medical Staff Development

This Annual Report contains forward looking statements made pursuant to the "safe-harbor" provisions of the Private Securities Litigation Reform Act of 1995. Important factors that could cause our actual results to differ materially from the results contemplated by the forward looking statements are contained in our Annual Report on Form 10-K filed with the Securities and Exchange Commission (the "SEC") and included with this Annual Report and in subsequent filings with the SEC.

Corporate Information / COMMUNITY HEALTH SYSTEMS

Corporate Office

Community Health Systems, Inc. 155 Franklin Road, Suite 400 Brentwood, Tennessee 37027 615.373.9600 www.chs.net

Form 10-K/Investor Contact

A copy of the Company's Annual Report on Form 10-K, filed with the Securities and Exchange Commission, may be obtained from the Company at no charge. Requests for the Annual Report on Form 10-K and other investor information should be directed to Investor Relations at the Company's corporate office.

Registrar and Transfer Agent Mellon Investor Services LLC

600 North Pearl Street, Suite 1010 Dallas, Texas 75201 214.922.4400

Independent Auditors Deloitte & Touche LLP Nashville, Tennessee

Annual Shareholders' Meeting

The annual meeting of shareholders will be held on Tuesday, May 21, 2002, at 8:30 a.m. local time at J.P. Morgan Chase & Co., 270 Park Avenue, 11th Floor - Room C, New York, New York.

Common Stock Information

The Company's common stock trades on the New York Stock Exchange under the symbol CYH. As of March 22, 2002, Community Health Systems had approximately 6,411 beneficial holders of its common stock. Of that total, 61 were stockholders of record. To date, the Company has not paid cash dividends on its common stock.

The following table sets forth the high and low sales price information as reported by the New York Stock Exchange during the period indicated.

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\tr	100	Pri	Ce

2001	High	Low
First Quarter	\$35.45	\$22.20
Second Quarter	\$30.75	\$21.25
Third Quarter	\$34.38	\$26.85
Fourth Quarter	\$29.85	\$22.40

2000*

Second Quarter	\$16.51	\$13.00
Third Quarter	\$32.50	\$15.63
Fourth Quarter	\$37.20	\$24.25

* No public market for the stock prior to June 9, 2000