



BENEFIT CATEGORY	COMPANY COST	EMPLOYEE COST
Thrift/Savings Plan-401(k)	\$493.10	\$986.19
Retirement Plan	\$8,457.30	\$0.00

Thrift/Savings Plan - 401(k)

WestView Healthcare's thrift/savings plan helps you provide for a sound financial future. This plan consists of your contribution and an employer-matching contribution. Currently, WestView Healthcare will match at a rate of \$.50 for each pre-tax dollar you save up to 8% of your compensation, subject to IRS limits. You are immediately vested in any money that you or the company contributes.

Our records indicate that as of 7/13/01, you were contributing at a rate of 6% and had a plan balance of \$31,966.90.

Projected Balances

Based on the assumptions below, your account balance might grow as follows:

Assumed Growth Rate	Estimated Future Value		
	In 10 Years	In 20 Years	At Age 65
3%	\$106,099.70	n/a	\$58,097.89
5%	\$123,718.59	n/a	\$62,345.89
7%	\$144,211.63	n/a	\$66,837.67

Note: The above projections are for illustrative purposes only and should not be relied upon as a true projection of your savings plan. It is assumed for illustration that your earnings remain fixed, your present level of contribution continues, and that the company's contribution continues at the same level as well.

Retirement Plan

The WestView Healthcare Retirement Plan is designed to provide you with a pension benefit at retirement. The plan is funded totally by WestView Healthcare and includes the following features:

- You become a participant in the plan after completing 1,000 hours and working for 12 consecutive months.
- You earn a fully-vested benefit after completing five years of eligible service. There are no provisions for partial vesting.
- Your benefit is computed by multiplying your final average compensation by 1.35% by your credited years of service with WestView Healthcare.
- Normal retirement age is 65.
- An early retirement is available starting at age 55 with 15 years of credited service.

The table below estimates current and projected benefits and the applicable dates:

Feature	Current Accrued Benefit	Early Retirement	Normal Retirement
Applicable Date	1/1/09	11/1/14	2/1/16
Annual Benefit	\$6,106.68	\$7,521.68	\$9,295.70

You are 100% vested.

Note: Prior WestView Healthcare Club service may impact your benefit amount if you have earned a vested benefit under a club's defined benefit plan.

	COMPANY COST	EMPLOYEE COST
Vacation	\$1,027.29	\$0.00
Holidays	\$1,195.38	\$0.00
Personal Time Off	\$298.85	\$0.00
Paid Sick Leave	\$1,942.51	\$0.00

Vacation

During your first 4 years of service, you earn vacation at a rate of 4 hours per pay period. Your periodic rate will increase by 1/2 hour for each five years of service. Our records indicate that you are earning vacation at a rate of 5 hours per pay period.

Holidays

As a full-time associate you receive 8 scheduled holidays.

Personal Time

As a full-time associate you earn 2 personal days per year. Personal days must be used within the calendar year in which they are earned.

Sick Leave

As a full-time associate you earn 104.00 hours per year and can accumulate up to 1,040 hours.

Family Assistance Program

This confidential 24 hour counseling and referral service can help you and your family deal with life's challenges. This program is paid for by WestView Healthcare.

Educational Assistance

This program provides up to 90% reimbursement of tuition and textbook expense for job-related courses. Reimbursement will not exceed \$4,675 per calendar year.

Health Care Spending Account

Provides a way to pay medical, dental and vision care expenses with pre-tax dollars.

Dependent Care Spending Account

Allows reimbursement with pre-tax dollars for work-related dependent day-care costs.

Service Awards

Your service with WestView Healthcare is recognized at every 5-year anniversary with a diamond lapel pin and a choice of other special gifts.

Harry M. Hardworker
83130-999
051-3D

WestView Healthcare 740



Your Total Compensation

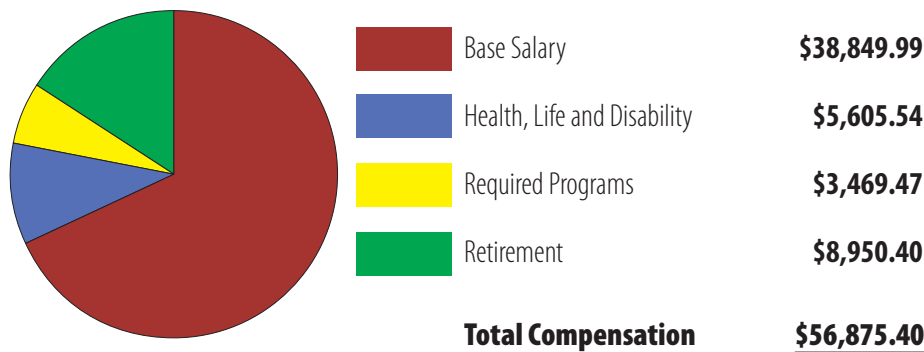


Prepared Exclusively For:

Harry M. Hardworker



YOUR TOTAL COMPENSATION		
Pay for Time Worked		\$34,385.96
Value of Vacation	\$1,027.29	
Value of Personal Time	\$298.85	
Value of Sick Leave	\$1,942.51	
Value of Holidays	\$1,195.38	
Total Paid Time Off		\$4,464.03
Base Salary		\$38,849.99
Medical Insurance	\$4,680.00	
Dental Insurance	\$390.00	
Vision Insurance	\$23.16	
Disability Insurance	\$106.73	
Life and AD&D Insurance	\$405.65	
Total Company Paid Insurance		\$5,605.54
Social Security Taxes	\$2,972.02	
Unemployment Insurance	\$116.72	
Workers Compensation	\$380.73	
Total Required Benefits		\$3,469.47
Pension Plan	\$8,457.30	
401(k) Match	\$493.10	
Total Retirement & Other		\$8,950.40
Total Compensation		\$56,875.40



BENEFIT CATEGORY	COMPANY COST	EMPLOYEE COST
Medical Insurance	\$4,680.00	\$1,664.00
Dental Insurance	\$390.00	\$260.00

The following information is intended to provide a brief overview of your WestView Healthcare benefits. Refer to your Associate Handbook for complete details and plan limits.

Medical Insurance

Once you have met the eligibility requirements, you are eligible for the CIGNA Point of Service Plan. Our records indicate that you have elected family coverage. Plan highlights are shown below:

Plan Features	Preferred Benefits In-Network	Nonpref. Benefits Out-of-Network
Deductible	None	\$500 ind/\$1,500 fam
Coinsurance	Copayments only	70%*
Out-of-pocket limit	Not applicable	\$2,500 ind/\$7,500 fam*
Lifetime maximum	\$2,000,000**	\$2,000,000**
Hospital inpatient	\$250 copay	70%*
Hospital outpatient	\$50 copay	70%*
Physician office visits	\$10 copay	70%*
Retail pharmacy (30 days)	\$7 copay, Generic \$15 copay, Brand Pref. \$35 copay, Brand Nonpref.	70%* 70%* 70%*
Mail order pharm. (90 days)	Same copays as above	Not covered

*after applying the deductible and for usual and customary rates

**special limits apply for alcohol and substance abuse

VisionCARE™ Insurance

You and your dependents are eligible for a standard eye exam every 12 months with a network eye doctor after a \$10 copay. Eyeglasses and other materials are available at a 25% discount.

Dental Insurance

Our records indicate that you have elected employee + spouse Delta Dental Traditional/PPO coverage. Plan highlights are shown below:

Plan Features	Traditional/PPO
Diagnostic & preventive	Paid at 100%
Deductible	\$50 ind/\$150 family
Restorative services	80%*
Oral surgery & periodont.	70%*
Crowns & dentures (Major)	50%*
Root canals	70%*
Calendar year maximum	\$1,500 per person
Orthodontics	50%* & \$1,000 life max.

*after applying the deductible and for usual and customary rates

BENEFIT CATEGORY	COMPANY COST	EMPLOYEE COST
Short-term disability	\$0.00	\$197.04
Long-term disability	\$106.73	\$0.00
Life and AD&D insurance	\$405.65	\$79.82

Short-Term Disability

As a full-time associate, you are eligible for the voluntary short-term disability plan. You may elect to participate at either 50% or 65% of your average weekly compensation. For purposes of the disability program, compensation is defined as benefit base pay plus incentive or commissions, if applicable. The maximum benefit under this plan is \$2,000 per week. Benefits begin the latter of 13 days or the exhaustion of your sick leave balance. Benefit payments are available for up to 26 weeks.

Our records indicate that you have chosen to participate in the 65% plan. Based on your compensation, your benefit would be \$513.13 per week.

Long-Term Disability

As a full-time employee, you are covered by the long-term disability plan. The plan will provide you with 66 2/3% of your compensation, and this benefit is paid for entirely by WestView Healthcare.

Based on your compensation, your benefit would be \$2,280.57 per month.

Life and Accidental Death & Dismemberment

WestView Healthcare provides basic term insurance in the amount of two times your annual benefit base pay. You may apply for an additional three times your annual benefit base pay subject to evidence of insurability and maximum limitations.

Your death benefit is \$78,000.00.

You are provided with accidental death and dismemberment insurance in an amount equal to two times your benefit base pay. You may elect additional coverage of one times your annual benefit base pay, subject to maximum limitations.

Your accidental death and dismemberment benefit is \$78,000.00.

WestView Healthcare provides business travel accident insurance for its associates. You are covered at four times your annual benefit base pay, subject to maximum limitations, or \$40,000, whichever is greater.

Your business travel and accident benefit is \$150,000.00.

In addition to life insurance for you, there is coverage available for your dependents as well. You may insure your spouse for \$10,000 and each of your children for \$5,000.

You have elected Spouse dependent insurance coverage.

