



NOR-LEA GENERAL HOSPITAL
AUDITORS' REPORT AND FINANCIAL
STATEMENTS
JUNE 30, 2010 AND 2009

MOSS ADAMS LLP

Certified Public Accountants | Business Consultants

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**NOR-LEA GENERAL HOSPITAL
OFFICIAL ROSTER
JUNE 30, 2010**

Board of Trustees

Agustin Dorado	Chairman
Archie Cunningham	Member
Julia Myers	Member
Leon Faris	Member
Pat Wise	Member

Principal Employee

David Shaw	Administrator
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Independent Auditors' Report

Board of Trustees and the Management of
Nor-Lea General Hospital and
Mr. Hector Balderas
New Mexico State Auditor

We have audited the accompanying financial statements of the business-type activities of Nor-Lea General Hospital (“Hospital”), a political subdivision of the State of New Mexico, as of and for the years ended June 30, 2010 and 2009, which collectively comprise the Hospital’s basic financial statements, as listed in the table of contents. We have also audited the Schedule of Revenue and Expenses with Budget Comparison (“budget comparison”) of the Hospital presented as supplemental information for the year ended June 30, 2010. These financial statements and budget comparison are the responsibility of the Hospital’s management. Our responsibility is to express an opinion on these financial statements and budget comparison based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America 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. An audit includes 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 Hospital’s internal control over financial reporting. Accordingly, we express no such opinion. An audit 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 opinions.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the business-type activities of the Hospital as of June 30, 2010 and 2009, and the changes in its financial position and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America. In addition, in our opinion, the financial statements referred to above present fairly, in all material respects the budgetary comparison of the Hospital for the year ended June 30, 2010 in conformity with accounting principles generally accepted in the United States of America.

Board of Trustees and the Management of
Nor-Lea General Hospital and
Mr. Hector Balderas
New Mexico State Auditor

In accordance with *Government Auditing Standards*, we have also issued our report dated December 7, 2010 on our consideration of the Hospital's internal control over financial reporting and 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 is important for assessing the results of our audit.

Management's Discussion and Analysis on pages 4 through 12 is not a required part of the basic financial statements but is supplemental information required by accounting principles generally accepted in the United States of America. We have applied certain limited procedures, which consisted primarily of inquiries of management regarding the methods of measurement and presentation of the required supplemental information. However, we did not audit the information and express no opinion on it.

Our audits were performed for the purpose of forming an opinion on the basic financial statements and budgetary comparison of the Hospital. The accompanying Schedule of Collateral Pledged by Depository for Public Funds and Schedule of Deposits and Investment Accounts, as listed in the table of contents, are presented for purposes of additional analysis and are not a required part of the basic financial statements. Such schedules have been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Albuquerque, New Mexico
December 7, 2010

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS
June 30, 2010 and 2009**

Our discussion and analysis of Nor-Lea General Hospital's (Hospital) financial performances provides an overview of the Hospital's financial activities for the fiscal years ended June 30, 2010 and June 30, 2009. Please read it in conjunction with the Hospital's financial statements.

The Lea County Commissioners closed Nor-Lea General Hospital in 1976, but the residents of the Lovington and Tatum school districts lobbied the state legislature for a hospital district seeing the need for access to healthcare in northern Lea County. They were successful in creating the new hospital district through an act of the New Mexico State Legislature. Nor-Lea Hospital District became a political subdivision of the State in 1980. The Hospital provides affordable healthcare for the residents of Lea County and the surrounding area. The Hospital provides care for patients who have little or no health insurance or other means of repayment. This service to the community is consistent with the goals of the Hospital when it was established in 1980.

Financial Highlights

- The Hospital's net assets increased in each of the past three years with a \$4,818,059 or 18.4% increase in 2008; a \$5,374,558 or 17.4% increase in 2009; and a \$6,502,888 or 17.9% increase in 2010.
- The Hospital reported an operating loss of \$(235,444) in 2008; operating income of \$772,653 in 2009; and operating income of \$692,750 in 2010.
- Net patient revenue increased in each of the past three years. The net patient revenue increased in 2008 by \$1,507,169 or 6.6%; in 2009 by \$2,591,583 or 10.7%; and in 2010 by \$3,572,633 or 13.3%.
- Non-operating revenue increased in 2008 by \$706,951 or 18.4%, decreased in 2009 by \$(341,598) or 7.5%, and increased in 2010 by \$93,233 or 2.2%.

Using This Annual Report

The Hospital financial statements consist of three statements: a Balance Sheet; a Statement of Revenues, Expenses and Changes in Net Assets; and a Statement of Cash Flows. These financial statements and related notes provide information about the activities of the Hospital, including resources held by the Hospital but restricted for specific purposes by contributors, grantors, or enabling legislation.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

The Balance Sheet and Statement of Revenues, Expenses, and Changes in Net Assets

One of the most important questions asked about the Hospital finances is, "Is the Hospital as a whole better or worse off as a result of the year's activities?" The Balance Sheet and the Statement of Revenues, Expenses, and Changes in Net Assets report information about the Hospital resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

The Balance Sheet and the Statement of Revenues, Expenses, and Changes in Net Assets report the Hospital's net assets and changes in them. You can think of the Hospital's net assets—the difference between assets and liabilities—as one way to measure the Hospital's financial health, or financial position. Over time, increases or decreases in the Hospital net assets are one indicator of whether its financial health is improving or deteriorating. You will also need to consider other non-financial factors, such as changes in the Hospital's patient base and measures of the quality of service it provides to the community, as well as local economic factors to assess the overall health of the Hospital.

The Statement of Cash Flows

The final required statement is the Statement of Cash Flows. The statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. It provides answers to such questions as "Where did cash come from?" "What was cash used for?" and "What was the change in cash balances during the reporting period?"

The Hospital's Net Assets

The Hospital's net assets are the difference between its assets and liabilities reported in the Balance Sheet. The Hospital's net assets increased in each of the past three years by \$4,818,059 (18.4%) in 2008; \$5,374,558 (17.4%) in 2009; and \$6,502,888 (17.9%) in 2010 as you can see from Table 1.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

Table 1: Assets, Liabilities, and Net Assets

	2010	2009	2008
Assets			
Current assets	\$ 32,140,543	\$ 28,097,856	\$ 23,427,575
Capital assets, net	17,550,178	15,021,305	13,975,374
Other non-current assets	<u>148,945</u>	<u>130,970</u>	<u>139,232</u>
Total assets	<u>49,839,666</u>	<u>43,250,131</u>	<u>37,542,181</u>
Liabilities			
Long-term debt outstanding	3,340,414	3,763,644	4,023,288
Other current and non-current liabilities	<u>3,654,084</u>	<u>3,144,207</u>	<u>2,551,171</u>
Total liabilities	<u>6,994,498</u>	<u>6,907,851</u>	<u>6,574,459</u>
Net assets			
Invested in cap. assets, net of related debt	14,154,092	11,210,643	9,943,607
Outpatient chemotherapy	1,572,127	62,822	59,679
Unrestricted	<u>27,118,949</u>	<u>25,068,815</u>	<u>20,964,436</u>
Total net assets	<u>\$ 42,845,168</u>	<u>\$ 36,342,280</u>	<u>\$ 30,967,722</u>
Total liabilities and net assets	<u>\$ 49,839,666</u>	<u>\$ 43,250,131</u>	<u>\$ 37,542,181</u>

A significant component of the change in the Hospital's assets is the increase in net patient revenue for 2008, 2009 and 2010. The net patient revenue increased by \$1,507,169 in 2008, by \$2,591,583 in 2009 and by \$3,572,633 in 2010. The increase in net patient revenue allowed the hospital to grow the cash balance and purchase capital assets. Gross days in accounts receivable have held consistent with prior year. The gross days in accounts receivable were, 70.0 in 2008; 70.5 in 2009 and 70.7 in 2010. The receivable/payable for estimated third party settlements relating to open cost reports has changed in each of the years 2008, 2009 and 2010. There was a net receivable in 2008 of \$444,781, a net payable in 2009 of \$(180,274) and a payable in 2010 of \$(618,435). Cash and cash equivalents increased in 2010 by \$1,807,281 and current investments increase in 2010 by \$300,835, as management accumulated and expended funds for the hospital expansion project.

Operating Results and Changes in the Hospital Net Assets

In 2010, the Hospital's net assets increased by \$6,502,888 or 17.9%, as shown in Table 2. This increase is made up of several different components.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

Table 2: Operating Results and Changes in Net Assets

	2010	2009	2008
Operating Revenues			
Net patient service revenues	\$30,418,966	\$26,846,333	\$24,254,750
Other operating revenues	<u>731,221</u>	<u>444,850</u>	<u>402,235</u>
Total operating revenues	<u>31,150,187</u>	<u>27,291,183</u>	<u>24,656,985</u>
Operating Expenses			
Salaries and benefits	15,745,469	13,639,040	12,481,891
Purchased services and other	5,712,700	5,297,923	5,332,633
Supplies	6,035,837	4,895,432	4,319,327
Professional fees	1,168,554	948,834	1,000,649
Depreciation and amortization	1,329,851	1,334,698	1,400,483
Insurance	<u>465,026</u>	<u>402,603</u>	<u>357,446</u>
Total operating expenses	<u>30,457,437</u>	<u>26,518,530</u>	<u>24,892,429</u>
Operating income/(loss)	<u>692,750</u>	<u>772,653</u>	<u>(235,444)</u>
Non-operating Revenues and Expenses			
Mill levy	3,531,227	3,708,750	3,717,497
Investment income	69,129	235,325	560,933
Gain (loss) on investment	182,950	(198,765)	-
Non-capital grants and contributions	652,981	675,655	492,931
Interest expense	<u>(126,149)</u>	<u>(204,060)</u>	<u>(212,858)</u>
Total non-operating revenues	<u>4,310,138</u>	<u>4,216,905</u>	<u>4,558,503</u>
Excess of revenues over expenses before capital grants and contributions	5,002,888	4,989,558	4,323,059
Capital grants and contributions	<u>1,500,000</u>	<u>385,000</u>	<u>495,000</u>
Increase in net assets	6,502,888	5,374,558	4,818,059
Net assets beginning of year	<u>36,342,280</u>	<u>30,967,722</u>	<u>26,149,663</u>
Net assets end of year	<u>\$42,845,168</u>	<u>\$36,342,280</u>	<u>\$30,967,722</u>

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

Operating Income

The first component of the overall change in the Hospital's net assets is its operating income—generally, the difference between net patient service and the expenses incurred to perform those services. The Hospital reported operating loss of \$(235,444) in 2008, income of \$772,653 in 2009, and income of \$692,750 in 2010. Fiscal year end 2003 is the first year in the history of the Hospital that an operating profit was made, and this trend continued through 2010, with 2008 being the only year reporting a loss during this time period. Operating revenues increased in 2010 by 14.1% and operating expenses increased by 14.9%, resulting in a 10.3% reduction in operating profit from 2009.

The primary components of operating results are:

- Net patient service revenue increased in each of the past four years. The net service patient revenue increased in 2008 by \$1,507,169 (6.6%); in 2009 by \$2,591,583 (10.7%); and in 2010 by \$3,572,633 (13.3%).
- In 2007, several new services were added that had initial start up cost in supplies and staffing, including cardiac rehab, sleep lab, school based clinic and pulmonary rehab. During 2008 the revenue increases slowed and expenses increased resulting in an operating loss. Net patient revenue only increased 6.6% and operating expenses increased 8.0%. The increase in operating expenses is primarily related to an 11.56% increase in salaries and benefits, 11.7% increase in supplies and a 9.4% increase in insurance costs. During 2009 the net patient service revenue increased by 10.7% and operating expenses increased by 6.5%. In 2009 two practitioners were added to the Lovington Medical Clinic and the Hospital continued to increase its presence in the southern part of Lea County which increased lab tests and revenue. In 2010, one additional provider was added to the Lovington Medical Clinic and a neurologist was added to a Professional Physicians Center established to bring a much needed specialty to Lea County and Southeastern New Mexico, while still fitting within the mission of the Hospital District.
- The Hospital became a sole community hospital beginning in 2003. As a sole community hospital, the Hospital receives additional state funding in addition to the county indigent dollars which help to offset uncompensated care. The uncompensated care is reflected in the net patient revenues as an allowance. The additional operating revenue generated was \$360,958 in 2008; \$396,922 in 2009; and \$682,690 in 2010.
- The Hospital became a critical access hospital as of August 1, 2002 which allows the Hospital to be cost-based reimbursed for Medicare patients. Medicare accounted for 42.8% of the gross revenue in 2008, 40.1% in 2009, and 39.4% in 2010.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

Non-operating Revenues and Expenses

Non-operating revenues consist primarily of property taxes levied by the Hospital and interest revenue and investment earnings. A mill levy, approved by the voters of the Lovington and Tatum school districts, expires on various dates. A 1.5 mill was approved in 2009 for 4 years and a 2.5 mill was approved in 2007 for 4 years. The next mill levy election will be in 2011. Mill levy property taxes are levied based on the assessed value of the property in the two school districts as well as on the value of oil & gas production and equipment. Mill levy property taxes are levied on November 1st and are due in two payments by November 10th and April 10th. The mill levy is a vital source of revenue for the Hospital because it not only funds operations when needed, but it also funds capital improvements in an ever changing healthcare environment. Without the necessary improvements to the Hospital facilities, the quality of patient care could be affected. The oil and gas amount of the mill levy, which was 80.0% of the mill levy proceeds in 2008, 80.4% in 2009, and 76.5% in 2010, can fluctuate from year to year depending upon the current economy.

Grants, Contributions, and Endowments

Historically, the Hospital has not received significant capital grants and contributions but is becoming more active in the pursuit of additional funding. During 2008, the Hospital received \$495,000 from the State Legislative Fund for expansion of the clinic, \$8,497 from a Small Hospital Improvement Grant, \$105,000 from the State for the School Based Clinic, \$15,605 in smoking cessation funds from the State, and other miscellaneous grants of \$13,490. During 2009, the Hospital received \$385,000 from the State Legislative Fund for capital equipment, Trauma Grant funding of \$140,572, \$8,282 from a Small Hospital Improvement Grant, smoking cessation funds from the State of \$30,000, county funds for diabetic supplies of \$49,331, \$10,000 for a physician recruitment grant, \$85,000 from the State for the School Based Clinic, and other miscellaneous grants of \$8,945. During 2010, the Hospital recorded \$1,500,000 in grant funding from the State legislature for the expansion of the cancer treatment center. In addition, the Hospital received various other grants including: a trauma grant of \$89,915, a Small Hospital Improvement Grant of \$8,136, smoking cessation funds of \$30,200, diabetic supply funds of \$12,629, school based clinic funds of \$85,000, dental clinic improvement funds of \$75,376, and other grants of \$10,252.

The Hospital also receives federal grant funding through the state in the form of a RHPCA Grant which is to supplement the rural health clinics for the indigent and uninsured. During 2008, 2009 and 2010, the Hospital received \$267,300 each year in RHPCA Grant funds.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

The Hospital established a foundation through its management company's foundation, Covenant Health System Foundation. All funds generated through the Nor-Lea Foundation are used solely by Nor-Lea Hospital District. The Nor-Lea Foundation account is reported as a separate fund by the Covenant Health System Foundation. All decisions regarding the funds generated by Nor-Lea Foundation are made by the Hospital and its Board. During the years ended June 30, 2008, 2009 and 2010, the Hospital received net donations (restricted and unrestricted) of \$40,937, \$28,043, and \$46,753 respectively. The activity of the Nor-Lea Foundation and its ending cash balance are combined in the audited financial statements.

The Hospital Cash Flows

Changes in the Hospital cash flows are consistent with changes in operating losses and non-operating revenues and expenses, discussed earlier.

Capital Asset and Debt Administration

Capital Assets

In 2008, the Hospital began the architectural design to a planned expansion to the new hospital section, incurring fees of \$43,901 in 2008 and \$263,217 in 2009. It will house ancillary and financial/administrative services and is scheduled for completion in the spring of 2011. All departments took part in the development of the final architectural designs. The new expansion is being paid for out of excess cash reserves. As of 2010, the Hospital had expended a total of \$3,200,585 on the construction project, which was recorded to construction in progress. Of that amount, \$2,893,466 was expended during 2010.

At the end of 2010, the Hospital had \$17,550,178 invested in capital assets, net of accumulated depreciation; see Note 6 to the financial statements. The Hospital purchased new equipment in the amount of \$595,164 and spent \$186,313 in building and improvements. During 2010, the Hospital also purchased 20 acres of land adjacent to the Hospital's property for future expansions and needs of the District for \$179,647.

At the end of 2009 the Hospital had \$15,021,305 invested in capital assets, net of accumulated depreciation. The Hospital purchased new equipment in the amount of \$1,220,473 and spent \$892,804 in building and improvements. During 2009, the Hospital purchased 2 properties located next to the main hospital facilities. The building which the Hospital leased from the City of Lovington for the Heritage Program for Senior Adults was purchased as well as the building across the street from the main hospital facility. The building across the street houses the offsite storage, the maintenance warehouse and the Nor-Lea Home Medical showroom and warehouse.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

At the end of 2008 the Hospital had \$13,975,374 invested in capital assets, net of accumulated depreciation. The Hospital purchased new equipment in the amount of \$498,550 and spent \$144,374 in building and improvements. During 2008, the Hospital completed the construction of the Lovington Clinic expansion, which added approximately 3870 square feet to the existing clinic and accounted for 2008 expenditures of \$1,212,703, bringing the total cost of construction to \$1,295,126.

Debt

The Hospital Board authorized the issuance of the Nor-Lea Special Hospital Revenue Bonds, Series 2003 in the amount of \$4,000,000. The Hospital received funding in an Escrow account and entered into a credit agreement with Wells Fargo for \$4,000,000 in May 2003. The Hospital Board also authorized the issuance of the Nor-Lea Special Hospital Revenue Bonds, Series 2004 in the amount of \$2,000,000. The Hospital received funding in an Escrow account and entered into a credit agreement with Wells Fargo for \$2,000,000 in May 2004. These Bonds do not constitute general obligation debt of the Hospital, and are payable solely out of the net revenues derived from the operations of the Hospital and its facilities. Schedule principal payments through 2010 have brought the outstanding balance on the 2003 bonds to \$1,200,000. Also, the Hospital had outstanding debt associated with capital leases. The outstanding capital lease debt was \$31,767 in 2008; \$210,662 in 2009; and \$196,086 in 2010.

Other Economic Factors

In the community of Hobbs, New Mexico approximately 30 miles south of Lovington, a major provider clinic was closed by Covenant Health System in May 2003. Nor-Lea General Hospital has since seen significant increases in patient revenues in its Lovington Clinic, a rural health clinic. As of June 2006, the Hospital had three clinics, located in Lovington, Tatum and Hobbs, which had 5 mid-level practitioners and 5 physicians. In 2007, the Hospital added the school-based clinic, and in 2008, the Hospital added an additional physician to its clinics as well as a mid-level practitioner. During 2009, the Hospital added one more physician and an additional mid-level practitioner to its clinic staff, for a total of 6 mid-level practitioners and 7 physicians. During 2010, the Hospital added an additional physician to complete the space in the Lovington clinic. The District also established an additional clinic to meet the demand for specialists in Lea County. The first physician hired for the Professional Physicians Center was a neurologist in January of 2010, and during 2011, a cardiologist and a gastroenterologist will be hired by the District. The total for 2010 is 6 mid-level practitioners and 9 physicians.

**NOR-LEA GENERAL HOSPITAL
MANAGEMENT'S DISCUSSION AND ANALYSIS (CONTINUED)
June 30, 2010 and 2009**

Budgetary Analysis

The operating and capital budget is created through the cooperative efforts of all department managers, the CEO/Administrator and the CFO. The Hospital's Board reviews and approves the final budget before it is sent to the Department of Finance and Administration of the State of New Mexico (DFA) for approval. During the year, the Hospital Board may deem it necessary to amend the original budget based on increased services provided or other new changes in the operations of the Hospital. The same procedure is followed to develop the amended budget with the managers and administration working together. Once the Hospital Board approves the amended budget, it is sent to the DFA for final approval. During 2010 the Hospital developed a budget with gross patient revenue of \$62,700,654 and operating expenses of \$31,241,129.

Contacting the Hospital Financial Management

The financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of the Hospital finances and to show the Hospital's accountability for the money it receives. If you have questions about this report or need additional financial information, contact the Hospital CEO or CFO, at Nor-Lea General Hospital, 1600 N. Main Street, Lovington, New Mexico 88260.

NOR-LEA GENERAL HOSPITAL
BALANCE SHEETS
June 30, 2010 and 2009

	2010	2009
ASSETS		
Current Assets		
Cash and cash equivalents	\$ 3,477,514	1,670,233
Patient accounts receivable, net of estimated uncollectibles of \$3,405,689 in 2010 and \$2,772,527 in 2009	5,260,351	4,758,963
Other receivables	2,426,132	950,598
Estimated third-party payor settlements	-	63,228
Inventories and prepaid expenses	889,914	869,037
Short-term investments	20,014,505	19,722,975
Short-term investments - restricted	72,127	62,822
Total current assets	32,140,543	28,097,856
Capital assets		
Property and equipment, net	17,550,178	15,021,305
Other assets		
Physician receivables	135,541	113,432
Goodwill and intangibles, net of accumulated amortization, \$74,571 in 2010 and \$70,437 in 2009	13,404	17,538
Total other assets	148,945	130,970
Total assets	\$ 49,839,666	43,250,131
LIABILITIES AND NET ASSETS		
Current Liabilities		
Accounts payable	\$ 1,447,418	1,551,300
Accrued liabilities	930,835	778,887
Estimated third-party payor settlements	618,435	243,502
Current portion of capital leases	55,672	47,018
Compensated absences	601,724	523,500
Total current liabilities	3,654,084	3,144,207
Long-term debt, net of current portion	3,340,414	3,763,644
Total liabilities	6,994,498	6,907,851
Net Assets		
Invested in capital assets, net of related debt	14,154,092	11,210,643
Restricted - expendable	1,572,127	62,822
Unrestricted	27,118,949	25,068,815
Total net assets	42,845,168	36,342,280
Total liabilities and net assets	\$ 49,839,666	43,250,131

See Notes to Financial Statements.

NOR-LEA GENERAL HOSPITAL
STATEMENTS OF REVENUES, EXPENSES AND
CHANGES IN NET ASSETS
Years Ended June 30, 2010 and 2009

	2010	2009
Operating Revenue		
Net patient service revenue, net of provision for bad debts of \$5,621,488 in 2010 and \$3,878,876 in 2009	\$ 30,418,966	26,846,333
Other revenue	731,221	444,850
	<hr/>	<hr/>
Total operating revenue	31,150,187	27,291,183
	<hr/>	<hr/>
Operating Expenses		
Salaries and wages	11,518,411	10,036,973
Supplies	6,035,837	4,895,432
Employee benefits	4,227,058	3,602,067
Purchased services	3,923,382	3,492,192
Depreciation and amortization	1,329,851	1,334,698
Other	1,182,875	1,131,970
Professional fees	1,168,554	948,834
Insurance	465,026	402,603
Leases and rentals	377,957	364,457
Utilities	228,486	309,304
	<hr/>	<hr/>
Total operating expenses	30,457,437	26,518,530
	<hr/>	<hr/>
Operating income	692,750	772,653
	<hr/>	<hr/>
Nonoperating revenues		
Mill levy	3,531,227	3,708,750
Investment income	69,129	235,325
Gain (loss) on investments	182,950	(198,765)
Interest expense	(126,149)	(204,060)
Noncapital grants and contributions	652,981	675,655
	<hr/>	<hr/>
Total nonoperating revenues	4,310,138	4,216,905
	<hr/>	<hr/>
Excess of revenues over expenses before capital grants and contributions	5,002,888	4,989,558
	<hr/>	<hr/>
Capital grants and contributions	1,500,000	385,000
	<hr/>	<hr/>
Increase in net assets	6,502,888	5,374,558
	<hr/>	<hr/>
Net assets, beginning of year	36,342,280	30,967,722
	<hr/>	<hr/>
Net assets, end of year	\$ 42,845,168	36,342,280
	<hr/>	<hr/>

See Notes to Financial Statements.

**NOR-LEA GENERAL HOSPITAL
STATEMENTS OF CASH FLOWS
Years Ended June 30, 2010 and 2009**

	2010	2009
Cash Flows From Operating Activities		
Receipts from and on behalf of patients	\$ 30,355,739	26,593,467
Payments to suppliers and contractors	(13,506,876)	(11,285,840)
Payments to and on behalf of employees	(15,515,297)	(13,439,406)
Receipts from sole community provider funds	682,690	396,922
Other operating receipts	216,538	5,282
Net cash provided by operating activities	2,232,794	2,270,425
Cash Flows From Noncapital Financing Activities		
Mill levy support	3,344,756	3,708,750
Noncapital grants and contributions	695,911	675,655
Net cash provided by noncapital financing activities	4,040,667	4,384,405
Cash Flows From Capital and Related Financing Activities		
Payments on long-term debt	(400,000)	(400,000)
Interest paid on long-term debt	(126,149)	(204,060)
Payments on capital leases	(51,626)	(34,592)
Capital grants and contributions	-	385,000
Capital expenditures	(3,817,540)	(2,163,008)
Net cash (used) by capital and related financing activities	(4,395,315)	(2,416,660)
Cash Flows From Investing Activities		
Increase in restricted investments	(9,305)	(3,143)
Payments received on physician receivables	(22,109)	4,128
Purchase of investments	(23,809,570)	(22,366,289)
Proceeds from sale of investments	23,700,990	17,743,557
Investment income	69,129	235,325
Net cash (used) by investing activities	(70,865)	(4,386,422)
Increase (decrease) in cash and cash equivalents	1,807,281	(148,252)
Cash and cash equivalents, beginning of year	1,670,233	1,818,485
Cash and cash equivalents, end of year	\$ 3,477,514	1,670,233

See Notes to Financial Statements.

**NOR-LEA GENERAL HOSPITAL
STATEMENTS OF CASH FLOWS (CONTINUED)
Years Ended June 30, 2010 and 2009**

	2010	2009
Reconciliation of operating income to net cash provided by operating activities		
Operating income	\$ 692,750	772,653
Adjustments to reconcile operating income to net cash provided by operating activities		
Depreciation and amortization	1,329,851	1,334,698
Provision for bad debts	5,621,488	3,878,876
Changes in current assets and liabilities		
Patient accounts receivable	(6,122,876)	(4,756,797)
Other receivables	168,007	(42,646)
Inventories and prepaid expenses	(20,877)	(56,843)
Accounts payable	(103,882)	315,795
Accrued salaries, wages and benefits	151,948	97,002
Estimated third-party payor settlements	438,161	625,055
Compensated absences	78,224	102,632
	<hr/>	<hr/>
Net cash provided by operating activities	\$ 2,232,794	2,270,425
	<hr/> <hr/>	<hr/> <hr/>
Noncash Investing, Capital and Financing Activities		
Additions to equipment under capital leases	\$ 37,050	213,487
	<hr/> <hr/>	<hr/> <hr/>

See Notes to Financial Statements.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 1. DESCRIPTION OF REPORTING ENTITY

Reporting Entity. Nor-Lea General Hospital (Hospital), a political subdivision of the State of New Mexico, is a 25-bed critical access hospital facility located in Lovington, Lea County, New Mexico, that operates two rural outpatient clinics, one freestanding clinic, a school-based clinic, a dental clinic, and a durable medical equipment division. The Hospital is controlled by Nor-Lea Hospital District (District), which has no assets, liabilities, revenues or expenses. The Hospital provides health care services to patients in the surrounding southeast New Mexico region.

The accompanying financial statements present the Hospital and its component unit, the Nor-Lea Foundation (Foundation), an entity for which the Hospital is considered to be financially accountable. The Foundation, although a legally separate entity, is in substance, part of the Hospital's operations.

Blended Component Unit. The Foundation's mission is to provide or generate funding and resources for distant future improvements of the district's facilities and to provide sustainability for the future of Nor-Lea Hospital District. Nor-Lea Foundation accepts and manages gifts from individuals and corporations in order to continue exemplary healthcare to the community. The Foundation is reported as part of the Hospital's operations.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements and notes are the representation of the Hospital's management who are responsible for their integrity and objectivity. The financial statements of the Hospital conform to accounting principles generally accepted in the United States of America (GAAP) as applied to governmental units. The Governmental Accounting Standards Board (GASB) is the accepted standard-setting body for establishing governmental accounting and financial reporting principles. The summary of significant accounting policies of the Hospital is presented to assist in the understanding of the Hospital's financial statements. The more significant of the Hospital's accounting policies are described below.

Use of Estimates. The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

**NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Enterprise Fund Accounting. The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. As initially provided in GASB Statement No. 20, *Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting*, and made permanent for enterprise funds by GASB Statement No. 34, *Basic Financial Statements - and Management's Discussion and Analysis - for State and Local Governments*, the Hospital has elected to not apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB), including those issued after November 30, 1989 that do not conflict with or contradict GASB pronouncements.

Cash and Cash Equivalents. Cash and cash equivalents include cash as well as investments with an original maturity of three months or less.

New Mexico State Statutes require collateral pledged for deposits in excess of the federal deposit insurance to be delivered, or a joint safekeeping receipt be issued, to the Hospital for at least one half of the amount on deposit with the institution, and 102% of the amount in overnight repurchase accounts on deposit with the institution.

The detail of collateral pledged is presented as supplemental information to these financial statements. The types of collateral allowed are limited to direct obligations of the United States Government and all bonds issued by any agency, district or political subdivision of the State of New Mexico.

Inventories. Inventories are recorded at the lower of cost or market on a first-in, first-out basis, and consist of medical, surgical, pharmaceutical, dietary and other supplies held for use in operations and are recorded as expenses when consumed rather than when purchased.

Patient Accounts Receivable. Patient accounts receivable are stated at the amount management expects to collect from outstanding balances. Estimated provisions for doubtful accounts are recorded to the extent it is probable a portion or all of a particular account will not be collected. The Hospital determines if patient accounts receivable are past-due based on the date the service was performed, and the Hospital does not charge interest on past-due accounts.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

**NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Capital Assets. The Hospital capitalizes property and equipment costing \$5,000 or more. Such assets are recorded at historical cost or estimated historical cost if purchased or constructed. Donated property and equipment are recorded at fair market value at date of donation. Depreciation is recorded using the straight-line method over the following estimated useful lives:

	Years
Land improvements	40
Building and improvements	10 - 40
Equipment	3 - 15

Costs of Borrowing. Except for capital assets acquired through gifts, contributions, or capital grants, interest cost on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. Construction activity on the Hospital expansion project began in 2010. Although the construction is being paid in cash, generally accepted accounting principles require interest capitalization using the rates of any outstanding borrowings, and accordingly, \$58,107 of 2010 interest cost has been capitalized.

Mill Levy. The Hospital is the recipient of mill levy taxes approved by the voters of Lea County every four years. The mill levy consists of a 1.5 mill levy, scheduled to expire on December 31, 2013, and a 2.5 mill levy, scheduled to expire on December 31, 2011. The Hospital recorded \$3,531,227 in 2010 and \$3,708,750 in 2009 in mill levy proceeds. Included in other receivables is \$465,773 and \$279,302 in mill levy receivables. Mill levy revenues are used in accordance with the provisions of the property tax referendum.

The Hospital receives mill levy taxes from the Treasurer of Lea County. The County serves as the intermediary collecting agency and remits the Hospital's share of mill levy tax collections. The Hospital does not maintain detailed records of mill levy taxes receivable by the individual taxpayer.

Mill levy property taxes are levied on November 1, based on the assessed value of property as listed on the previous January 1, and are due in two payments by November 10 and April 10. The taxes attach as an enforceable lien on property thirty (30) days thereafter, at which time they become delinquent. The Hospital recognizes revenue from mill levy property taxes in the period for which they are levied.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

**NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Grants and Contributions. From time to time, the Hospital receives grants from the State of New Mexico as well as contributions from individuals and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating revenues and expenses.

The Hospital receives federal grant awards annually related to the Rural Primary Health Care Act (Act). The Act requires the Hospital, through its Lovington and Tatum clinics, to provide primary care health services to surrounding rural areas. The revenue recognized is based on allowable costs incurred. The Hospital recognized and expended \$267,300 in 2010 and 2009 in federal grant awards. These amounts are included in non-capital grants and contributions in the accompanying statements of revenues, expenses, and changes in net assets.

In 2010 and 2009, the Hospital recognized \$1.5 million and \$385,000 in capital grants for grants awarded through the State of New Mexico. The \$1.5 million grant was approved by the State in 2010 and has been accrued in *Other receivables* in the accompanying financial statements.

Restricted Resources. When the Hospital has both restricted and unrestricted resources available to finance a particular program, it is the Hospital's policy to use restricted resources before unrestricted resources.

Net Assets. Net assets of the Hospital are classified in three components. Net assets invested in capital assets net of related debt consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. Restricted expendable net assets are non-capital net assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital. Such restrictions are comprised of amounts deposited with trustees pursuant to revenue bond indentures, discussed in Note 7, a restricted investment account of \$72,127, and the \$1.5 million grant discussed above. Unrestricted net assets are remaining net assets that do not meet the definition of invested in capital assets net of related debt or restricted.

Operating Revenues and Expenses. The Hospital's statements of revenues, expenses and changes in net assets distinguishes between operating and non-operating revenues and expenses. Operating revenues result from exchange transactions associated with

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

**NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

providing health care services, the Hospital's principal activity. Non-exchange revenues, including taxes, grants, and contributions received for purposes other than capital asset acquisition, are reported as non-operating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs and investment losses.

Compensated Absences. Vacation pay is accrued for employees based on hours paid. Accrual rates of 25 to 35 days per year are based on years of service. Vacation hours vest to the employee as they are earned. As of June 30, 2010 and 2009, the Hospital had accrued \$601,724 and \$523,500 for compensated absences, respectively.

Budgets and Budgetary Accounting. Prior to the beginning of each fiscal year, the budget for the Hospital is prepared on the accrual basis by the Chief Financial Officer and is presented to the Hospital's Board of Trustees (Board) for review and approval. Upon Board approval, the budget is sent to the Department of Finance and Administration of the State of New Mexico (DFA) for tentative approval. Final approval is granted after the beginning of the fiscal year when net assets for the prior year are known. Expenditures legally cannot exceed the total budget. Any budget amendments are first reviewed and approved by the Board and then sent to the DFA for state approval. The Board is authorized to transfer budgeted amounts between the departments; however, any revisions that alter the total expenditures must be approved by the DFA. As of June 30, 2010 and 2009, the Hospital was in compliance with these requirements.

Investments in Debt and Equity Securities. Investments in debt and equity securities are reported at fair value. Interest, dividends, and gains and losses, both realized and unrealized on investments in debt and equity securities are included in non-operating revenue when earned.

Risk Management. The Hospital 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 2010 and 2009.

NOTE 3. DEPOSITS AND INVESTMENTS

Deposit and Investment Policies. State statutes authorized the investment of the Hospital's funds in a wide variety of instruments including certificates of deposit and other similar obligations, state investment pool, and money market accounts. The Hospital is also allowed to invest in United States Government obligations.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 3. DEPOSITS AND INVESTMENTS (CONTINUED)

Deposits of funds may be made in interest or non-interest bearing checking accounts in one or more banks or savings and loan associations within the geographical boundaries of the Hospital's district. Deposits may be made to the extent that they are insured by an agency of the United States or by collateral deposited as security or by bond given by the financial institution.

The rate of interest in non-demand interest-bearing accounts shall be set by the State Board of Finance, but in no case shall the rate of interest be less than 100% of the asked price on United States treasury bills of the same maturity on the day of deposit.

Excess funds may be temporarily invested in securities which are issued by the State or by the United States government, or by their departments or agencies, and which are either direct obligations of the State or the United States or are backed by the full faith and credit of those governments.

Custodial Credit Risk - Deposits. Custodial credit risk is the risk that in the event of a bank failure, the Hospital's deposits may not be returned to it. The Hospital does not have a deposit policy for custodial credit risk. New Mexico State Statutes require collateral pledged for deposits in excess of the federal deposit insurance to be delivered, or a joint safekeeping receipt be issued, to the Hospital for at least one half of the amount on deposit with the institution. As of June 30, 2010, the Hospital's deposits with Wells Fargo Brokerage consisted of various certificates of deposit limited to \$250,000 per underlying financial institution, and accordingly, are fully insured. As of June 30, 2009, the Hospital's investments with Wells Fargo were fully insured under the Temporary Transaction Account Guarantee Program of the FDIC. The Hospital's deposits are subject to custodial credit risk as the certain deposits were uninsured and collateralized by securities held by the depository institution's trust department in the name of the trust department but not in the name of the Hospital. The following tables summarize the Hospital's exposure to custodial credit risk.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 3. DEPOSITS AND INVESTMENTS (CONTINUED)

	Wells		
	Fargo & Wells Fargo Brokerage	Lea County State Bank	Total
Year ended June 30, 2010			
Total amount of deposits	\$ 14,833,446	200,000	15,033,446
FDIC Coverage	<u>(11,764,441)</u>	<u>(200,000)</u>	<u>(11,964,441)</u>
Total uninsured public funds	3,069,005	-	3,069,005
Collateralized by securities held by the pledging institution or by its trust department or agent in other than the Hospital's name	<u>4,029,107</u>	<u>-</u>	<u>4,029,107</u>
Uninsured and uncollateralized	<u>\$ -</u>	<u>-</u>	<u>-</u>
Collateral requirement (50% of uninsured public funds)	\$ 1,534,503	-	1,534,503
Pledged securities	<u>4,029,107</u>	<u>-</u>	<u>4,029,107</u>
Over (under) collateralization	<u>\$ 2,494,604</u>	<u>-</u>	<u>2,494,604</u>
	Wells		
	Fargo & Wells Fargo Brokerage	Lea County State Bank	Total
Year ended June 30, 2009			
Total amount of deposits	\$ 7,291,948	150,000	7,441,948
FDIC Coverage	<u>(7,291,948)</u>	<u>(150,000)</u>	<u>(7,441,948)</u>
Total uninsured public funds	-	-	-
Collateralized by securities held by the pledging institution or by its trust department or agent in other than the Hospital's name	<u>-</u>	<u>-</u>	<u>-</u>
Uninsured and uncollateralized	<u>\$ -</u>	<u>-</u>	<u>-</u>
Collateral requirement (50% of uninsured public funds)	\$ -	-	-
Pledged securities	<u>-</u>	<u>-</u>	<u>-</u>
Over (under) collateralization	<u>\$ -</u>	<u>-</u>	<u>-</u>

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 3. DEPOSITS AND INVESTMENTS (CONTINUED)

Custodial Credit Risk - Investments. For an investment, custodial credit risk is the risk that, in the event of the failure of the counterparty, the Hospital will not be able to recover the value of its investments or collateral securities that are in the possession of an outside party. The Hospital does not have an investment policy for custodial credit risk. New Mexico State Statutes require collateral pledged to be delivered for securities underlying an overnight repurchase agreement, or a joint safekeeping receipt be issued to the Hospital for at least 102% of the fair value of the securities underlying overnight repurchase accounts invested with the institution. The Hospital's investments are subject to custodial credit risk if the investments are uninsured and collateralized by securities held by the investment counterparty in the name of the counterparty but not in the name of the Hospital. The Hospital's investments with Lea County State Bank and Wells Fargo Brokerage are registered in the name of the Hospital and therefore are not subject to custodial credit risk. At June 30, 2010 and 2009, the Hospital's investment balances were exposed to custodial credit risk as indicated below.

	Wells Fargo	New MexiGROW LGIP	Total
Year ended June 30, 2010			
Investment in the State Treasurer's Local Government Investment Pool	\$ -	8,372,191	8,372,191
Securities underlying an overnight repurchase agreement held by the investment's counterparty not in the Hospital's name	-	-	-
Total investments subject to custodial credit risk	\$ -	8,372,191	8,372,191
Collateral requirement for repurchase agreements (102% of value of underlying securities)	\$ -	-	-
Pledged securities	-	-	-
Over (under) collateralization	\$ -	-	-

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 3. DEPOSITS AND INVESTMENTS (CONTINUED)

	Wells Fargo	New MexiGROW LGIP	Total
Year ended June 30, 2009			
Investment in the State Treasurer's Local Government Investment Pool	\$ -	8,191,790	8,191,790
Securities underlying an overnight repurchase agreement held by the investment's counterparty not in the Hospital's name	<u>876,241</u>	-	<u>876,241</u>
Total investments subject to custodial credit risk	<u>\$ 876,241</u>	<u>8,191,790</u>	<u>9,068,031</u>
Collateral requirement for repurchase agreements (102% of value of underlying securities)	\$ 893,766	-	893,766
Pledged securities	<u>893,766</u>	-	<u>893,766</u>
Over (under) collateralization	<u>\$ -</u>	<u>-</u>	<u>-</u>

Credit Risk. The New MexiGROW Local Government Investment Pool's (LGIP) investments are valued at fair value based on quoted market prices as of the valuation date. The LGIP is not SEC registered. The New Mexico State Treasurer is authorized to invest the short-term investment funds, with the advice and consent of the State Board of Finance, in accordance with Section 6-10-10 I through 6-10-10 P and Section 6-10-10.1 A and E, NMSA 1978. The LGIP does not have unit shares. Per Section 6-10-10.1 F, NMSA 1978, at the end of each month all interest earned is distributed by the State Treasurer to the contributing entities in amounts directly proportionate to the respective amounts deposited in the fund and the length of time the fund amounts were invested. Participation in the LGIP is voluntary.

As of June 30, 2010, the Hospital's investments were rated as follows:

Federal Home Loan discount notes	Aaa	(Moody's)
LGIP	AAAm	(S&P)

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 3. DEPOSITS AND INVESTMENTS (CONTINUED)

Interest Rate Risk. The Hospital does not have a formal policy limiting investment maturities to manage its exposure to fair value losses from increasing interest rates. The Hospital's investments at June 30, 2010 and 2009 included the following:

<u>Investments</u>	<u>Maturities</u>	<u>Fair Value</u>	
		2010	2009
Securities underlying an overnight repurchase agreement	Daily	\$ -	876,241
Money market	Daily	62,220	89,712
LGIP ***		8,372,191	8,191,790
Federal Home Loan discount notes	120 days	-	4,978,098
		<u>\$ 8,434,411</u>	<u>14,135,841</u>

***The LGIP's weighted average maturity at June 30, 2010 is 50 days, which is a key determinant of the tolerance of the LGIP's investments to increases in interest rates.

Concentration of Credit Risk. The Hospital places no limit on the amount it may invest in any one issuer. The Hospital has a concentration of credit risk in the LGIP of \$8,372,191 as of June 30, 2010.

NOTE 4. NET PATIENT SERVICE REVENUE

Net patient service revenue is reported at the estimated net amounts realizable from patient, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

A summary of the payment arrangements with major third-party payors follows:

Medicare - Effective August, 2002, the Hospital qualified as a "Critical Access Hospital" under the Medicare system. As a designated Critical Access Hospital the Hospital is reimbursed for inpatient, inpatient non-acute services, and certain outpatient services related to Medicare beneficiaries based on a cost reimbursement methodology. The Hospital is reimbursed for cost-reimbursable items at a tentative rate, with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare fiscal intermediary.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 4. NET PATIENT SERVICE REVENUE (CONTINUED)

Medicaid – Similar to Medicare, inpatient and outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. The Hospital is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid fiscal intermediary.

Revenue from the Medicare and Medicaid programs accounted for approximately 39% and 13%, respectively, of the Hospital's patient revenue for the year ended June 30, 2010, and 40% and 12%, respectively, of the Hospital's patient revenue for the year ended June 30, 2009. Laws and regulations governing the Medicare and Medicaid programs are extremely 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 Medicare and Medicaid cost reports for 2010 and 2009 have not been finalized. In management's opinion, estimated Medicare and Medicaid settlements accrued for at June 30, 2010 and 2009 are adequate to provide for the settlement of all open cost reports.

The Hospital has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Hospital under these agreements includes prospectively determined rates per discharge, discounts from established charges, prospectively determined daily rates, and a cost reimbursement methodology.

NOTE 5. RESTRICTED NET ASSETS

Restricted, expendable net assets are restricted according to donor or grantor purpose restrictions. As of June 30, 2010 and 2009, these restrictions are as follows:

	2010	2009
Investments – restricted for outpatient chemotherapy and cardiovascular rehabilitation services	\$ 72,127	62,822
Other receivables – restricted for hospital expansion project	<u>1,500,000</u>	-
	<u>\$ 1,572,127</u>	<u>62,822</u>

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 6. CAPITAL ASSETS

Capital asset additions, retirements, and balances for the years ended June 30, 2010 and 2009 were as follows:

	Balance June 30, 2009	Additions	Deletions	Balance June 30, 2010
Non-depreciable assets				
Land	\$ 33,000	179,647	-	212,647
Construction in progress	307,119	2,893,466	-	3,200,585
	<u>340,119</u>	<u>3,073,113</u>	<u>-</u>	<u>3,413,232</u>
Depreciable assets				
Land improvements	28,660	-	-	28,660
Building and improvements	16,360,698	186,313	-	16,547,011
Equipment	9,203,855	595,164	(1,201)	9,797,818
	<u>25,593,213</u>	<u>781,477</u>	<u>(1,201)</u>	<u>26,373,489</u>
Accumulated depreciation				
Land improvements	(28,141)	(419)	-	(28,560)
Building and improvements	(4,463,999)	(554,116)	-	(5,018,115)
Equipment	(6,419,887)	(771,182)	1,201	(7,189,868)
	<u>(10,912,027)</u>	<u>(1,325,717)</u>	<u>1,201</u>	<u>(12,236,543)</u>
Capital assets, net	<u>\$ 15,021,305</u>	<u>2,528,873</u>	<u>-</u>	<u>17,550,178</u>

	Balance June 30, 2008	Additions	Deletions	Balance June 30, 2009
Non-depreciable assets				
Land	\$ 33,000	-	-	33,000
Construction in progress	43,901	263,218	-	307,119
	<u>76,901</u>	<u>263,218</u>	<u>-</u>	<u>340,119</u>
Depreciable assets				
Land improvements	28,660	-	-	28,660
Building and improvements	15,467,894	892,804	-	16,360,698
Equipment	7,985,040	1,220,473	(1,658)	9,203,855
	<u>23,481,594</u>	<u>2,376,497</u>	<u>(1,658)</u>	<u>25,593,213</u>
Accumulated depreciation				
Land improvements	(27,426)	(715)	-	(28,141)
Building and improvements	(3,909,262)	(554,737)	-	(4,463,999)
Equipment	(5,646,433)	(775,112)	1,658	(6,419,887)
	<u>(9,583,121)</u>	<u>(1,330,564)</u>	<u>1,658</u>	<u>(10,912,027)</u>
Capital assets, net	<u>\$ 13,975,374</u>	<u>1,045,931</u>	<u>-</u>	<u>15,021,305</u>

The construction in progress is the Hospital expansion project which is currently under construction and expected to be completed in late 2010. Depreciation expense, including amortization for equipment held under capital leases for the years ended June 30, 2010 and 2009 was \$1,325,717 and \$1,330,564, respectively. The Hospital acquired equipment under capital leases at a cost of \$37,050 and \$213,487 for the years ended June 30, 2010

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 6. CAPITAL ASSETS (CONTINUED)

and 2009, respectively. Amortization expense for this equipment was \$57,774 and \$51,276 for the years ended June 30, 2010 and 2009, respectively, and amortized cost was \$224,050 and \$193,498 for the years ended June 30, 2010 and 2009, respectively.

NOTE 7. LONG-TERM DEBT

A schedule of changes in the Hospital's noncurrent liabilities for June 30, 2010 and 2009 follows:

	Balance June 30, 2009	Additions	Reductions	Balance June 30, 2010	Amounts Due Within One Year
Bonds Payable					
2004 Hospital Revenue Bond	\$ 2,000,000	-	-	2,000,000	-
2003 Hospital Revenue Bond	1,600,000	-	400,000	1,200,000	-
Total Long-term debt	3,600,000	-	400,000	3,200,000	-
Compensated absences	523,500	1,106,505	1,028,281	601,724	601,724
Capital lease obligations	210,662	37,050	51,626	196,086	55,672
Total non-current liabilities	<u>\$ 4,334,162</u>	<u>1,143,555</u>	<u>1,479,907</u>	<u>3,997,810</u>	<u>657,396</u>

	Balance June 30, 2008	Additions	Reductions	Balance June 30, 2009	Amounts Due Within One Year
Bonds Payable					
2004 Hospital Revenue Bond	\$ 2,000,000	-	-	2,000,000	-
2003 Hospital Revenue Bond	2,000,000	-	400,000	1,600,000	-
Total Long-term debt	4,000,000	-	400,000	3,600,000	-
Compensated absences	420,868	930,451	827,819	523,500	523,500
Capital lease obligations	31,767	213,487	34,592	210,662	47,018
Total non-current liabilities	<u>\$ 4,452,635</u>	<u>1,143,938</u>	<u>1,262,411</u>	<u>4,334,162</u>	<u>570,518</u>

Payments to employees for compensated absences are included in operating expenses on the Statement of Revenues, Expenses and Changes in Net Assets.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 7. LONG-TERM DEBT (CONTINUED)

The terms and due dates of the Hospital's long-term debt, including capital lease obligations, at June 30, 2010 and 2009 follow:

2004 Hospital Revenue Bond. On March 17, 2004, the Board authorized the issuance of the Nor-Lea Special Hospital Revenue Bonds, Series 2004 (2004 Bond), in the principal amount of \$2,000,000. Nor-Lea entered into a credit agreement in the amount of \$2,000,000 with Wells Fargo, dated May 25, 2004. Proceeds from the 2004 Bond were used to finance, in part, the cost of equipping, furnishing, remodeling and renovating the facilities of the Hospital. At June 30, 2010 and 2009, the balance remaining on the 2004 Bond was \$2,000,000.

The 2004 Bond bears interest at a fixed rate of 4.90%, which is payable on January 1 and July 1 of each year through July 1, 2018. Principal is payable on July 1 of each year through July 1, 2018, however, no principal payments will be made on the 2004 Bond until the 2003 Hospital Revenue Bond has been paid in full. The 2004 Bond does not constitute indebtedness or a debt of the Hospital within the meaning of any constitutional or statutory provision or limitation and shall not be considered or held to be a general obligation of the Hospital. The 2004 Bond is payable and collectible solely out of the net revenues derived from the operation of the Hospital and its facilities, which is exclusive of mill levy or tax proceeds. The 2004 Bond is tax-exempt under Section 265(b)(3)(B) of the Internal Revenue Code of 1986, as amended.

Under the terms of the 2004 Bond Indenture, the Hospital is required to maintain certain deposits. Such deposits, if required, are included with restricted cash and investments in the accompanying Balance Sheet. The 2004 Bond Indenture also requires that the Hospital satisfy certain measures of financial performance as long as the notes are outstanding. As of June 30, 2010, the Hospital was in compliance with these requirements.

2003 Hospital Revenue Bond. On April 16, 2003, the Board authorized the issuance of the Nor-Lea Special Hospital Revenue Bonds, Series 2003 (2003 Bond), in the principal amount of \$4,000,000. Nor-Lea entered into a credit agreement in the amount of \$4,000,000 with Wells Fargo, dated May 22, 2003. Proceeds from the 2003 Bond were used to finance, in part, the cost of equipping, furnishing, remodeling and renovating the facilities of the Hospital. At June 30, 2010 and 2009, the balance remaining on the 2003 Bond was \$1,200,000 and \$1,600,000 respectively.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 7. LONG-TERM DEBT (CONTINUED)

The 2003 Bond bears interest at a fixed rate of 4.75%, which is payable on January 1 and July 1 of each year through July 1, 2013. Principal is payable on July 1 of each year through July 1, 2013. As of June 30, 2010 and 2009, the Hospital paid the July 1 payments, accordingly no amounts are reported as current obligations in the accompanying financial statements. The 2003 Bond does not constitute indebtedness or a debt of the Hospital within the meaning of any constitutional or statutory provision or limitation and shall not be considered or held to be a general obligation of the Hospital. The 2003 Bond is payable and collectible solely out of the net revenues derived from the operation of the Hospital and its facilities, which is exclusive of mill levy or tax proceeds. The 2003 Bond is tax-exempt under Section 265(b)(3)(B) of the Internal Revenue Code of 1986, as amended.

Under the terms of the 2003 Bond Indenture, the Hospital is required to maintain certain deposits. Such deposits, if required, are included with restricted cash and investments on the balance sheet as of June 30, 2010 and 2009. The 2003 Bond Indenture also requires that the Hospital satisfy certain measures of financial performance as long as the notes are outstanding. As of June 30, 2010, the Hospital was in compliance with these requirements.

Scheduled principal and interest repayments on long-term debt and capital lease obligations are as follows:

Year ending June 30,	Principal	Interest
2011	\$ 55,672	168,271
2012	459,640	145,068
2013	456,630	121,539
2014	421,906	98,895
2015	402,238	78,432
Thereafter	<u>1,600,000</u>	<u>117,600</u>
	<u>\$ 3,396,086</u>	<u>729,805</u>

The Hospital incurred \$184,256 and \$204,060 in interest costs related to debt and capital leases during the years ended June 30, 2010 and 2009, respectively.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 8. EMPLOYEE RETIREMENT PLAN

The Nor-Lea General Hospital 403(b) defined contribution employee retirement plan (Plan) covers substantially all employees who have completed one year of service and have attained the age of 21. The Plan provides for Hospital contributions of 100% of eligible employees' deferred compensation up to 4% of such employees' compensation. Hospital contributions to the Plan totaled \$240,292 in 2010 and \$224,616 in 2009 and are fully vested when made. Employees may also elect to make contributions to the Plan.

NOTE 9. ACCOUNTS RECEIVABLE AND PAYABLE

Other receivables, accounts payable and accrued expenses reported as current assets and liabilities by the Hospital at June 30, 2010 and 2009 consisted of these amounts:

	2010	2009
Other receivables		
Mill levy receivable	\$ 465,773	279,302
Grants receivable	1,546,900	89,830
Receivable from detention facility clinic	144,021	126,453
Sole community provider funding	143,998	125,352
Miscellaneous receivables	<u>125,440</u>	<u>329,661</u>
Total other receivables	<u>\$ 2,426,132</u>	<u>950,598</u>
Accounts payable and accrued expenses		
Payable to suppliers	\$ 1,447,418	1,551,300
Payable to employees (including payroll taxes)	<u>930,835</u>	<u>778,887</u>
Total accounts payable and accrued expenses	<u>\$ 2,378,253</u>	<u>2,330,187</u>

Other receivables are considered fully collectible and therefore no provision for bad debt has been recorded for these amounts.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 10. COMMITMENTS AND CONTINGENCIES

Compliance with Laws and Regulations. The health care industry is subject to numerous laws and regulations of federal, state, and local governments. These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditation, government health care program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Government activity continues to increase with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by health care providers. Violations of these laws and regulations could result in expulsion from government health care programs together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Management believes that the Hospital is in compliance with fraud and abuse laws and regulations as well as other applicable government regulations. While no regulatory inquiries have been made, compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time.

Professional Liability Insurance. The Hospital maintains claims-made commercial insurance related to professional and general liability risks. The policy expired on December 31, 2009 and was renewed through January 1, 2011. The policy covers individual losses of up to \$1,000,000 subject to a \$3,000,000 aggregate and a \$25,000 deductible. Premiums incurred under this policy were \$249,844 in 2010 and \$235,238 in 2009 and are included in insurance expense in the accompanying financial statements. The Hospital also maintains medical malpractice coverage for its physicians. The coverage is claims-made and covers individual physician claims of up to \$200,000, subject to a \$600,000 aggregate. Premiums incurred under these policies were \$109,388 in 2010 and \$108,715 in 2009, and are included in insurance expense in the accompanying financial statements. The medical malpractice policies expire on various dates through June 30, 2010. Management expects to renew all policies at rates and coverage commensurate with 2010 levels.

Workers' Compensation Insurance. The Hospital is insured under the New Mexico Hospital Workers' Compensation Group for the purpose of providing insurance coverage for workers' compensation. The policy is a retrospectively rated policy and premiums accrue based on the cost of experience of participating health care entities. The Hospital expensed approximately \$164,258 and \$74,125 in workers' compensation premiums during 2010 and 2009, respectively. Such amounts are included in employee benefits in the accompanying financial statements.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 10. COMMITMENTS AND CONTINGENCIES (CONTINUED)

Employee Health Insurance. Effective July 1, 2004, the Hospital became self-insured with respect to medical insurance coverage offered to eligible employees, up to a maximum of \$40,000 per participant. This was increased to \$50,000 per participant effective July 1, 2009. Once the annual aggregate expense exceeds \$1,000,000 annually, excess loss reinsurance is in place that will cover 100% of covered claims not to exceed \$1,000,000. In connection with the self-insured portion, the Hospital maintains a liability for claims that are in the process of being paid. At June 30, 2010 and 2009 the outstanding claims liability was \$243,539 and \$192,771, respectively, and is included in accounts payable in the accompanying financial statements.

Commitment to Maintain Working Capital. As a condition of the Nor-Lea Special Hospital Revenue Bonds, Series 2004 and 2003, the Hospital has agreed to maintain a minimum of \$1,000,000 working capital as of each of the years ending during the term of the bond. The Hospital was in compliance with this condition as of June 30, 2010.

Management Agreement. Covenant Health Systems (System) manages the hospital pursuant to a four-year agreement dated July 1, 2006, whereby the Hospital reimburses the System for the appointed administrator's salary, including but not limited to social security payments, retirement benefits and other benefits accruing to executive-level employees of the System. This agreement may be terminated by either party upon 30 day's written notice. As part of this agreement, the Hospital is able to purchase medical supplies from various vendors at more favorable prices than the Hospital could negotiate on its own. An unexpected termination of this contract with the System could have an adverse effect on the operations of the Hospital due to the loss of key management personnel and the favorable purchasing agreements until such time a new contract could be negotiated with an alternate management firm. The Hospital is not aware of and does not anticipate any termination of the existing contract.

Sole Community Provider Funding. The Hospital receives Sole Community Provider Funding to compensate the Hospital for providing health care to the indigent population in Lea County. The funding is subject to annual reviews and approvals by Lea County as well as the State of New Mexico Human Services Department. In fiscal years 2010 and 2009, the Hospital recognized Sole Community Provider Funding of \$682,690 and \$396,922, respectively. Such amounts are reported as Other Revenue in the accompanying consolidated financial statements. This funding is essential to the Hospital's financial results and management believes this program will continue to be funded at levels similar to prior years.

Construction Commitment. At June 30, 2010, construction of the hospital expansion was in process. Remaining expected construction costs at June 30, 2010 were \$12,701,286.

**NOR-LEA GENERAL HOSPITAL
NOTES TO FINANCIAL STATEMENTS
June 30, 2010 and 2009**

NOTE 11. CONCENTRATIONS OF CREDIT RISK

The Hospital grants credit without collateral to its patients, most of who are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third party payors was as follows:

	2010	2009
Medicare	32%	26%
Medicaid	11	11
Commercial insurance	25	27
Private pay and other	<u>32</u>	<u>36</u>
	<u>100%</u>	<u>100%</u>

NOTE 12. CHARITY CARE

The Hospital accepts all patients regardless of their ability to pay. A patient is classified as a charity patient by reference to certain established policies of the Hospital. Essentially, these policies define charity services as those services for which no payment is anticipated. Charges excluded from revenue under the Hospital's charity care policy were \$638,028 and \$412,569 for June 30, 2010 and 2009, respectively.

NOTE 13. RELATED PARTY TRANSACTIONS AND BALANCES

From time to time, the Hospital will purchase goods and services from businesses owned by associates and employees of the Hospital. Following is a summary of the transactions:

	2010	2009
Purchase of goods and services	<u>\$ 113,267</u>	<u>5,487</u>

As described above, the Hospital is managed by Covenant. The Hospital incurred the following expenses under this management relationship:

	2010	2009
Management fees	\$ 197,097	225,558
Purchase of goods and services	712,730	499,097

No amounts were outstanding at June 30, 2010 or 2009 under the management agreement.

All related party transactions were made in the normal course of business at prices similar to those in transactions with third parties.

**NOR-LEA GENERAL HOSPITAL
SCHEDULE OF REVENUES AND EXPENSES
WITH BUDGET COMPARISON
Year Ended June 30, 2010**

	Original Budget	Final Approved Budget	Actual	Variance with Final Budget
Patient Revenue				
Inpatient	5,405,940	6,318,264	6,849,539	531,275
Outpatient	50,884,266	56,382,390	58,734,444	2,352,054
Total gross patient revenue	56,290,206	62,700,654	65,583,983	2,883,329
Contractual allowance	(22,451,083)	(26,248,220)	(29,543,529)	(3,295,309)
Provision for bad debts	(4,388,903)	(5,292,010)	(5,621,488)	(329,478)
Net patient service revenue	29,450,220	31,160,424	30,418,966	(741,458)
Other Revenue				
Other	1,134,700	1,207,926	731,221	(476,705)
Total other revenue	1,134,700	1,207,926	731,221	(476,705)
Total revenue	30,584,920	32,368,350	31,150,187	(1,218,163)
Expenses				
Salaries, wages and employee benefits	16,081,658	16,118,846	15,745,469	373,377
Purchased services and other	5,512,705	6,204,713	5,712,700	492,013
Supplies	5,119,688	5,687,637	6,035,837	(348,200)
Professional fees	832,373	1,082,373	1,168,554	(86,181)
Depreciation and amortization	1,504,000	1,504,000	1,329,851	174,149
Insurance	442,800	455,250	465,026	(9,776)
Total expenses	29,493,224	31,052,819	30,457,437	595,382
Operating Income	1,091,696	1,315,531	692,750	(622,781)
Nonoperating revenue and expenses				
Mill levy	3,000,000	3,000,000	3,531,227	531,227
Investment income	183,600	183,600	69,129	(114,471)
Gain on investment	-	-	182,950	182,950
Interest expense	(187,860)	(188,310)	(126,149)	62,161
Noncapital grants and contributions	1,521,000	1,521,000	652,981	(868,019)
Total nonoperating revenue and expenses	4,516,740	4,516,290	4,310,138	(206,152)
Excess of revenues over expenses before capital grants and contributions	5,608,436	5,831,821	5,002,888	(828,933)

**NOR-LEA GENERAL HOSPITAL
SCHEDULE OF COLLATERAL PLEDGED BY
DEPOSITORY FOR PUBLIC FUNDS
June 30, 2010**

Name of Depository	CUSIP	Description of Pledged Collateral Description	Maturity	Fair Market Value June 30, 2010	Location of Safekeeper
Wells Fargo Bank, N.A.	31409GP42	FED NATL MTG ASSN POOL #870843	10/1/2036	\$ 71,257	Federal Reserve Bank, San Francisco, CA
Wells Fargo Bank, N.A.	31409UVR3	FED NATL MTG ASSN POOL #870843	6/1/2036	872,507	Federal Reserve Bank, San Francisco, CA
Wells Fargo Bank, N.A.	31414AQQ8	FED NATL MTG ASSN POOL #870843	12/1/2037	2,922,866	Federal Reserve Bank, San Francisco, CA
Wells Fargo Bank, N.A.	31414SZH9	FED NATL MTG ASSN POOL #870843	6/1/2038	70,101	Federal Reserve Bank, San Francisco, CA
Wells Fargo Bank, N.A.	31415PKY3	FED NATL MTG ASSN POOL #870843	7/1/2038	92,376	Federal Reserve Bank, San Francisco, CA
Total				<u>\$ 4,029,107</u>	

NOR-LEA GENERAL HOSPITAL
SCHEDULE OF DEPOSIT AND INVESTMENT ACCOUNTS
Year Ended June 30, 2010

Deposit or Investment Type	Wells Fargo Bank	Wells Fargo Brokerage*	Lea County State Bank	NM State Treasurer Investment Pool	Total
Payroll - Checking	\$ -	-	-	-	-
Operating - Checking	3,154,136	-	-	-	3,154,136
Claims - Checking	160,874	-	-	-	160,874
Construction - Checking	3,995	-	-	-	3,995
Certificates of Deposit	-	11,514,441	200,000	-	11,714,441
Total deposits	3,319,005	11,514,441	200,000	-	15,033,446
Operational - Overnight repurchase	-	-	-	-	-
Money market	-	1,285	60,935	-	62,220
Investment in US Government Sponsored Enterprise Securities	-	-	-	-	-
Investment in local government investment pool	-	-	-	8,372,191	8,372,191
Total investments	-	1,285	60,935	8,372,191	8,434,411
Reconciling items	93,389	-	-	-	93,389
Carrying value	\$ 3,412,394	11,515,726	260,935	8,372,191	23,561,246
Petty Cash					2,900
Total deposits and investments as of June 30, 2010					\$ 23,564,146
Reconciliation to the Statement of Net Assets					
Cash and cash equivalents				\$	3,477,514
Investments					20,014,505
Investments - restricted					72,127
Total deposits and investments as of June 30, 2010				\$	23,564,146

* The Wells Fargo Brokerage investments includes deposits and investments held in a variety of financial institutions yet reported through Wells Fargo Brokerage.

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

Board of Trustees and the Management of
Nor-Lea General Hospital and
Mr. Hector Balderas
New Mexico State Auditor

We have audited the accompanying financial statements of the business-type activities of Nor-Lea General Hospital (Hospital), a political subdivision of the State of New Mexico, as of and for the year ended June 30, 2010, which collectively comprise the Hospital's basic financial statements, as listed in the table of contents. We also have audited the Schedule of Revenue and Expenses with Budget Comparison ("budget comparison") presented as supplemental information for the year ended June 30, 2010, and have issued our report thereon dated December 7, 2010. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States of America.

Internal Control Over Financial Reporting

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

A control deficiency 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 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.

Board of Trustees and the Management of
Nor-Lea General Hospital and
Mr. Hector Balderas
New Mexico State Auditor

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 over financial reporting 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 Hospital'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 the Hospital's Board of Trustees, the Hospital's management and the State of New Mexico Office of the State Auditor and is not intended to be and should not be used by anyone other than these specified parties.

Albuquerque, New Mexico
December 7, 2010

**NOR-LEA GENERAL HOSPITAL
SCHEDULE OF FINDINGS AND RESPONSES
Year Ended June 30, 2010**

None

**NOR-LEA GENERAL HOSPITAL
SCHEDULE OF STATUS OF PRIOR YEAR FINDINGS
Year Ended June 30, 2010**

None

**NOR-LEA GENERAL HOSPITAL
EXIT CONFERENCE
Year Ended June 30, 2010**

We held an exit conference with management and a member of the Board of Trustees on October 13, 2010. The exit conference was attended by the following individuals:

Management Exit Conference

Nor-Lea Hospital

David Shaw, Chief Executive Officer
Allyson Roberts, Chief Financial Officer
Julia Myers, Board Member

Moss Adams LLP

Brandon Fryar, Partner

The financial statements were prepared with the assistance of Moss Adams LLP.