

## **Summary Annual Report**

### **For Carespring Health Care Management LLC Savings & Retirement Plan**

This is a summary of the annual report for Carespring Health Care Management LLC Savings & Retirement Plan, Employer Identification Number 01-0885621, Plan No. 001 for the period January 1, 2008 through December 31, 2008. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

#### **Basic Financial Statement**

Benefits under the plan are provided through a trust fund. Plan expenses were \$118,546. These expenses included \$6,466 in administrative expenses and \$100,116 in benefits paid to participants and beneficiaries and \$11,964 in other expenses. A total of 818 persons were participants in or beneficiaries of the plan at the end of the plan year.

The value of plan assets, after subtracting liabilities of the plan, was \$2,915,788, as of December 31, 2008 compared to \$3,944,629 as of January 1, 2008. During the plan year, the plan experienced a decrease in its net assets of \$1,028,841. This decrease includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. The plan had total income of (\$910,295), including employer contributions of \$77,351, employee contributions of \$502,180, other contributions of \$15,301, and losses from investments of \$1,505,127.

#### **Your Rights To Additional Information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. financial information and information on payments to service providers;
2. information regarding any CCTs, PSAs, MTs, or 103-12Ies;
3. an accountant's report;
4. assets held for investment;

To obtain a copy of the full annual report, or any part thereof, write or call Carespring Health Care Management, LLC, 390 Wards Corner Road, Loveland, OH 45140, (513) 943-4000.

You also have the right to receive from the Plan Administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the Plan Administrator, these two statements and accompanying notes will be included as part of that report.

You also have the legally protected right to examine the annual report at the main office of the plan at Carespring Health Care Management, LLC, 390 Wards Corner Road, Loveland, OH 45140, and at the U.S. Department of Labor in Washington, D.C. or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.