

**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549**

FORM 8-K

CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): August 02, 2023

COMMUNITY HEALTH SYSTEMS, INC.

(Exact name of Registrant as Specified in Its Charter)

Delaware
(State or Other Jurisdiction
of Incorporation)

001-15925
(Commission File Number)

13-3893191
(IRS Employer
Identification No.)

4000 Meridian Boulevard
Franklin, Tennessee
(Address of Principal Executive Offices)

37067
(Zip Code)

Registrant's Telephone Number, Including Area Code: 615 465-7000

(Former Name or Former Address, if Changed Since Last Report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common Stock, \$.01 par value	CYH	New York Stock Exchange

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

The information contained in this Current Report on Form 8-K (including the exhibits hereto) shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as shall be expressly set forth by specific reference in any such filing.

Item 2.02 Results of Operations and Financial Condition.

On August 2, 2023, Community Health Systems, Inc. (the "Company") announced operating results for the second quarter ended June 30, 2023. A copy of the press release making this announcement is attached as Exhibit 99.1 to this Current Report on Form 8-K and is incorporated by reference into this Item 2.02.

Item 7.01 Regulation FD Disclosure.

On August 2, 2023, the Company announced operating results for the second quarter ended June 30, 2023 in a press release attached as Exhibit 99.1 to this Current Report on Form 8-K which is incorporated by reference into this Item 7.01.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

The following exhibits are furnished herewith:

<u>Exhibit Number</u>	<u>Description</u>
99.1	Community Health Systems, Inc. Press Release, dated August 2, 2023.
104	Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

COMMUNITY HEALTH SYSTEMS, INC.

Date: August 2, 2023

By: /s/ Tim L. Hingtgen
Tim L. Hingtgen
Chief Executive Officer and Director
(principal executive officer)

By: /s/ Kevin J. Hammons
Kevin J. Hammons
President and Chief Financial Officer
(principal financial officer)

By: /s/ Jason K. Johnson
Jason K. Johnson
Senior Vice President and Chief Accounting Officer
(principal accounting officer)

Investor Contact: Kevin Hammons
President and
Chief Financial Officer
(615) 465-7000

**COMMUNITY HEALTH SYSTEMS, INC. ANNOUNCES SECOND QUARTER
ENDED JUNE 30, 2023 RESULTS**

FRANKLIN, Tenn. (August 2, 2023) – Community Health Systems, Inc. (NYSE: CYH) (the “Company”) today announced financial and operating results for the three and six months ended June 30, 2023.

The following highlights the financial and operating results for the three months ended June 30, 2023.

- **Net operating revenues totaled \$3.115 billion.**
- **Net loss attributable to Community Health Systems, Inc. stockholders was \$(38) million, or \$(0.29) per share (diluted), compared to \$(326) million, or \$(2.52) per share (diluted), for the same period in 2022. Excluding the adjusting items as presented in the table in footnote (e) on page 15, net loss attributable to Community Health Systems, Inc. stockholders was \$(0.22) per share (diluted), compared to \$(2.52) per share (diluted) for the same period in 2022.**
- **Adjusted EBITDA was \$373 million.**
- **Net cash provided by operating activities was \$86 million for the three months ended June 30, 2023, compared to \$53 million for the same period in 2022.**
- **On a same-store basis, admissions increased 4.8 percent and adjusted admissions increased 4.9 percent, compared to the same period in 2022.**

Commenting on the results, Tim L. Hingtgen, chief executive officer of Community Health Systems, Inc., said, "Our continued progress in the second quarter included sequential improvements in key operating metrics including patient volumes and net operating revenues, among others. During the quarter, we saw further recovery in the utilization of our healthcare services and we executed key growth and expense management initiatives that are producing strong results for our markets and the Company overall. Other strategic developments are expected to have a positive impact moving forward, including recent investments to modernize our business operations. We are in the process of redesigning numerous workflows that will further standardize and centralize key business functions across our organization, which we are referring to as Project Empower. As part of Project Empower, we are nearing the launch of a new Enterprise Resource Planning (ERP) platform which will enable us to leverage this new way of doing business as we streamline and enhance many business support services."

Three Months Ended June 30, 2023

Net operating revenues for the three months ended June 30, 2023, totaled \$3.115 billion, a 6.2 percent increase compared to \$2.934 billion for the same period in 2022. On a same-store basis, net operating revenues increased 9.2 percent for the three months ended June 30, 2023, compared to the same period in 2022. Net operating revenues for the three months ended June 30, 2023, reflect a 0.9 percent increase in both admissions and adjusted admissions compared to the same period in 2022. On a same-store basis, admissions increased 4.8 percent and adjusted admissions increased 4.9 percent for the three months ended June 30, 2023, compared to the same period in 2022.

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Net loss attributable to Community Health Systems, Inc. stockholders was \$(38) million, or \$(0.29) per share (diluted), for the three months ended June 30, 2023, compared to \$(326) million, or \$(2.52) per share (diluted), for the same period in 2022. Excluding the adjusting items as presented in the table in footnote (e) on page 15, net loss attributable to Community Health Systems, Inc. stockholders was \$(0.22) per share (diluted) for the three months ended June 30, 2023, compared to \$(2.52) per share (diluted) for the same period in 2022. During the three months ended June 30, 2023, pandemic relief funds did not materially impact net loss attributable to Community Health Systems, Inc. stockholders. During the three months ended June 30, 2022, pandemic relief funds had a positive impact on net loss attributable to Community Health Systems, Inc. stockholders (both on a consolidated and adjusted basis) of approximately \$6 million, or \$0.05 on a per share (diluted) basis.

Adjusted EBITDA for the three months ended June 30, 2023, was \$373 million compared to \$253 million for the same period in 2022. During the three months ended June 30, 2023, pandemic relief funds did not materially impact Adjusted EBITDA. During the three months ended June 30, 2022, pandemic relief funds had a positive impact on Adjusted EBITDA of approximately \$8 million.

The decrease in net loss attributable to Community Health Systems, Inc. stockholders and increase in Adjusted EBITDA for the three months ended June 30, 2023, compared to the same period in 2022, is primarily due to higher inpatient and outpatient volumes, increased reimbursement rates, higher acuity, an increase in non-patient revenue, and lower costs for contract labor, partially offset by higher costs for professional liability insurance and increased rates for outsourced medical specialists.

Six Months Ended June 30, 2023

Net operating revenues for the six months ended June 30, 2023, totaled \$6.223 billion, a 3.0 percent increase compared to \$6.044 billion for the same period in 2022. On a same-store basis, net operating revenues increased 5.3 percent for the six months ended June 30, 2023, compared to the same period in 2022. Net operating revenues for the six months ended June 30, 2023, reflect a 1.0 percent increase in admissions and a 3.4 percent increase in adjusted admissions, compared to the same period in 2022. On a same-store basis, admissions increased 4.8 percent and adjusted admissions increased 7.2 percent for the six months ended June 30, 2023, compared to the same period in 2022.

Net loss attributable to Community Health Systems, Inc. stockholders was \$(89) million, or \$(0.68) per share (diluted), for the six months ended June 30, 2023, compared to \$(327) million, or \$(2.54) per share (diluted), for the same period in 2022. Excluding the adjusting items as presented in the table in footnote (e) on page 15, net loss attributable to Community Health Systems, Inc. stockholders was \$(0.65) per share (diluted) for the six months ended June 30, 2023, compared to \$(2.40) per share (diluted) for the same period in 2022. During the six months ended June 30, 2023, pandemic relief funds did not materially impact net loss attributable to Community Health Systems, Inc. stockholders. During the six months ended June 30, 2022, pandemic relief funds had a positive impact on net loss attributable to Community Health Systems, Inc. stockholders (both on a consolidated and adjusted basis) of approximately \$41 million, or \$0.32 on a per share (diluted) basis.

Adjusted EBITDA for the six months ended June 30, 2023, was \$707 million compared to \$662 million for the same period in 2022. During the six months ended June 30, 2023, pandemic relief funds did not materially impact Adjusted EBITDA. During the six months ended June 30, 2022, pandemic relief funds had a positive impact on Adjusted EBITDA of approximately \$55 million.

The decrease in net loss attributable to Community Health Systems, Inc. stockholders and increase in Adjusted EBITDA for the six months ended June 30, 2023, compared to the same period in 2022, is primarily due to stronger inpatient and outpatient volumes, increased reimbursement rates, higher acuity, an increase in non-patient revenue, and reduced expense for contract labor, partially offset by unfavorable changes in payor mix, a reduction in pandemic relief funds recognized, increased salaries and benefits expense, higher costs for professional liability insurance, and increased rates for outsourced medical specialists.

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Other

During 2023, through the date of this press release, the Company has completed the divestiture of three hospitals. On January 1, 2023, the Company completed the divestiture of one hospital (in respect of which the Company received proceeds at a preliminary closing on December 31, 2022). On April 1, 2023, the Company completed the divestiture of one hospital (in respect of which the Company received proceeds at a preliminary closing on March 31, 2023). On July 1, 2023, the Company completed the divestiture of one hospital (in respect of which the Company received proceeds at a preliminary closing on June 30, 2023). Financial and statistical data for 2023 and 2022 presented in this press release includes the operating results of divested or closed businesses for the periods prior to the consummation of the respective divestiture or closure. Same-store operating results and statistical information include operating results of businesses operated in the comparable current year and prior year periods and exclude businesses divested or closed in 2022 and the six months ended June 30, 2023.

Information About Non-GAAP Financial Measures

This press release presents Adjusted EBITDA, a non-GAAP financial measure, which is EBITDA adjusted to add back net income attributable to noncontrolling interests and to exclude loss (gain) from early extinguishment of debt, impairment and (gain) loss on sale of businesses, expense related to the Business Transformation Costs (as defined in footnote (c) to the Financial Highlights, Financial Statements and Selected Operating Data below), gain on sale of equity interests in Macon Healthcare, LLC, expense related to government and other legal matters and related costs, income during the fourth quarter of 2021 associated with the settlement of litigation for the recovery of amounts of certain professional liability claims settled in 2020 covered by third-party insurance policies, expense related to employee termination benefits and other restructuring charges, the impact of a change in estimate to increase the professional liability claims accrual recorded during the fourth quarter of 2022 with respect to claims incurred in prior years related to divested locations and the gain on sale by HealthTrust Purchasing Group, L.P. ("HealthTrust") of a majority interest in CoreTrust Holdings, LLC ("CoreTrust") completed during the fourth quarter of 2022. For information regarding why the Company believes Adjusted EBITDA provides useful information to investors, and for a reconciliation of Adjusted EBITDA to net loss attributable to Community Health Systems, Inc. stockholders, see footnote (c) to the Financial Highlights, Financial Statements and Selected Operating Data below.

Additionally, this press release presents adjusted net loss attributable to Community Health Systems, Inc. stockholders per share (diluted), a non-GAAP financial measure, to reflect the impact on net loss attributable to Community Health Systems, Inc. stockholders per share (diluted) from the selected items used in the calculation of Adjusted EBITDA. For information regarding why the Company believes this non-GAAP financial measure provides useful information to investors, and for a reconciliation of this non-GAAP financial measure to net loss attributable to Community Health Systems, Inc. stockholders per share (diluted), see footnote (e) to the Financial Highlights, Financial Statements and Selected Operating Data below.

The non-GAAP financial measures set forth above are not measurements of financial performance under U.S. GAAP, and should not be considered in isolation or as a substitute for any financial measure calculated in accordance with U.S. GAAP. Additionally, the calculation of these non-GAAP financial measures may not be comparable to similarly titled measures disclosed by other companies.

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The Company's annual earnings guidance for 2023, as provided in our press release issued on February 15, 2023, is reaffirmed. The 2023 guidance is based on the Company's historical operating performance, current trends and other assumptions the Company believes are reasonable. Assumptions underlying the annual earnings guidance provided on February 15, 2023 are unchanged.

About Community Health Systems, Inc.

Community Health Systems, Inc. is one of the nation's largest healthcare companies. The Company's affiliates are leading providers of healthcare services, developing and operating healthcare delivery systems in 43 distinct markets across 15 states. As of August 2, 2023, the Company's subsidiaries own or lease 77 affiliated hospitals with approximately 13,000 beds and operate more than 1,000 sites of care, including physician practices, urgent care centers, freestanding emergency departments, occupational medicine clinics, imaging centers, cancer centers and ambulatory surgery centers.

The Company's headquarters are located in Franklin, Tennessee, a suburb south of Nashville. Shares in Community Health Systems, Inc. are traded on the New York Stock Exchange under the symbol "CYH." More information about the Company can be found on its website at www.chs.net.

Community Health Systems, Inc. will hold a conference call on Thursday, August 3, 2023, at 10:00 a.m. Central, 11:00 a.m. Eastern, to review financial and operating results for the second quarter ended June 30, 2023. Investors will have the opportunity to listen to a live internet broadcast of the conference call by clicking on the Investor Relations link of the Company's website at www.chs.net. For those who cannot listen to the live broadcast, a replay will be available shortly after the call and will continue to be available for approximately 30 days. Copies of this press release and conference call slide show, as well as the Company's Current Report on Form 8-K (including this press release), will be available on the Company's website at www.chs.net.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Financial Highlights (a)(b)
(In millions, except per share amounts)
(Unaudited)

	Three Months Ended		Six Months Ended	
	June 30,		June 30,	
	2023	2022	2023	2022
<i>Net operating revenues</i>	\$ 3,115	\$ 2,934	\$ 6,223	\$ 6,044
Net income (loss) (f)	2	(298)	(18)	(268)
Net loss attributable to Community Health Systems, Inc. stockholders	(38)	(326)	(89)	(327)
Adjusted EBITDA (c)	373	253	707	662
Net cash provided by operating activities	86	53	91	154
<i>Loss per share attributable to Community Health Systems, Inc. stockholders:</i>				
Basic (f)	\$ (0.29)	\$ (2.52)	\$ (0.68)	\$ (2.54)
Diluted (e), (f)	(0.29)	(2.52)	(0.68)	(2.54)
<i>Weighted-average number of shares outstanding (d):</i>				
Basic	131	129	130	128
Diluted	131	129	130	128

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Condensed Consolidated Statements of Loss (a)(b)
(In millions, except per share amounts)
(Unaudited)

	Three Months Ended June 30,			
	2023		2022	
	Amount	% of Net Operating Revenues	Amount	% of Net Operating Revenues
<i>Net operating revenues</i>	\$ 3,115	100.0 %	\$ 2,934	100.0 %
Operating costs and expenses:				
Salaries and benefits	1,338	42.9 %	1,295	44.1 %
Supplies	504	16.2 %	487	16.6 %
Other operating expenses	836	26.8 %	830	28.3 %
Lease cost and rent	80	2.6 %	78	2.7 %
Pandemic relief funds	-	-	(8)	(0.3) %
Depreciation and amortization	124	4.0 %	133	4.5 %
Impairment and (gain) loss on sale of businesses, net (f)	(13)	(0.4) %	-	-
Total operating costs and expenses	2,869	92.1 %	2,815	95.9 %
Income from operations (f)	246	7.9 %	119	4.1 %
Interest expense, net	207	6.6 %	218	7.4 %
Equity in earnings of unconsolidated affiliates	(1)	(0.0) %	(1)	(0.0) %
Income (loss) before income taxes	40	1.3 %	(98)	(3.3) %
Provision for income taxes	38	1.2 %	200	6.8 %
Net income (loss) (f)	2	0.1 %	(298)	(10.1) %
Less: Net income attributable to noncontrolling interests	40	1.3 %	28	1.0 %
Net loss attributable to Community Health Systems, Inc. stockholders	\$ (38)	(1.2) %	\$ (326)	(11.1) %
<i>Loss per share attributable to Community Health Systems, Inc. stockholders:</i>				
Basic (f)	\$ (0.29)		\$ (2.52)	
Diluted (e), (f)	\$ (0.29)		\$ (2.52)	
Weighted-average number of shares outstanding (d):				
Basic	131		129	
Diluted	131		129	

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Condensed Consolidated Statements of Loss (a)(b)
(In millions, except per share amounts)
(Unaudited)

	Six Months Ended June 30,			
	2023		2022	
	Amount	% of Net Operating Revenues	Amount	% of Net Operating Revenues
<i>Net operating revenues</i>	\$ 6,223	100.0 %	\$ 6,044	100.0 %
Operating costs and expenses:				
Salaries and benefits	2,703	43.5 %	2,620	43.4 %
Supplies	1,011	16.2 %	985	16.3 %
Other operating expenses	1,671	26.9 %	1,683	27.8 %
Lease cost and rent	161	2.6 %	155	2.6 %
Pandemic relief funds	-	-	(55)	(0.9) %
Depreciation and amortization	255	4.1 %	261	4.3 %
Impairment and (gain) loss on sale of businesses, net (f)	(35)	(0.6) %	6	0.1 %
Total operating costs and expenses	5,766	92.7 %	5,655	93.6 %
Income from operations (f)	457	7.3 %	389	6.4 %
Interest expense, net	414	6.6 %	435	7.2 %
Loss from early extinguishment of debt	-	-	5	-
Equity in earnings of unconsolidated affiliates	(4)	(0.1) %	(6)	(0.1) %
Income (loss) before income taxes	47	0.8 %	(45)	(0.7) %
Provision for income taxes	65	1.1 %	223	3.7 %
Net loss (f)	(18)	(0.3) %	(268)	(4.4) %
Less: Net income attributable to noncontrolling interests	71	1.1 %	59	1.0 %
Net loss attributable to Community Health Systems, Inc. stockholders	\$ (89)	(1.4) %	\$ (327)	(5.4) %
<i>Loss per share attributable to Community Health Systems, Inc. stockholders:</i>				
Basic (f)	\$ (0.68)		\$ (2.54)	
Diluted (e), (f)	\$ (0.68)		\$ (2.54)	
Weighted-average number of shares outstanding (d):				
Basic	130		128	
Diluted	130		128	

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Condensed Consolidated Statements of Comprehensive Loss
(In millions)
(Unaudited)

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Net income (loss)	\$ 2	\$ (298)	\$ (18)	\$ (268)
Other comprehensive (loss) income, net of income taxes:				
Net change in fair value of available-for-sale debt securities, net of tax	(1)	(6)	2	(14)
Other comprehensive (loss) income	(1)	(6)	2	(14)
Comprehensive income (loss)	1	(304)	(16)	(282)
Less: Comprehensive income attributable to noncontrolling interests	40	28	71	59
Comprehensive loss attributable to Community Health Systems, Inc. stockholders	\$ (39)	\$ (332)	\$ (87)	\$ (341)

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Selected Operating Data (a)
(Dollars in millions)
(Unaudited)

	Three Months Ended June 30,					
	Consolidated			Same-Store		
	2023	2022	% Change	2023	2022	% Change
Number of hospitals (at end of period)	78	84		78	78	
Licensed beds (at end of period)	12,735	13,341		12,735	12,645	
Beds in service (at end of period)	10,843	11,608		10,843	10,912	
Admissions	108,799	107,805	0.9%	108,326	103,356	4.8%
Adjusted admissions	249,442	247,119	0.9%	248,087	236,427	4.9%
Patient days	486,142	498,189		484,735	480,071	
Average length of stay (days)	4.5	4.6		4.5	4.6	
Occupancy rate (average beds in service)	49.3%	47.3%		49.3%	48.5%	
Net operating revenues	\$ 3,115	\$ 2,934	6.2%	\$ 3,104	\$ 2,842	9.2%
Net inpatient revenues as a % of net operating revenues	47.0%	44.9%		47.0%	45.1%	
Net outpatient revenues as a % of net operating revenues	53.0%	55.1%		53.0%	54.9%	
Income from operations (f)	\$ 246	\$ 119	106.7%			
Income from operations as a % of net operating revenues	7.9%	4.1%				
Depreciation and amortization	\$ 124	\$ 133				
Equity in earnings of unconsolidated affiliates	\$ (1)	\$ (1)				
Net loss attributable to Community Health Systems, Inc. stockholders	\$ (38)	\$ (326)	88.3%			
Net loss attributable to Community Health Systems, Inc. stockholders as a % of net operating revenues	-1.2%	-11.1%				
Adjusted EBITDA (c)	\$ 373	\$ 253	47.4%			
Adjusted EBITDA as a % of net operating revenues	12.0%	8.6%				
Net cash provided by operating activities	\$ 86	\$ 53	62.3%			

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Selected Operating Data (a)
(Dollars in millions)
(Unaudited)

	Six Months Ended June 30,					
	Consolidated			Same-Store		
	2023	2022	% Change	2023	2022	% Change
Number of hospitals (at end of period)	78	84		78	78	
Licensed beds (at end of period)	12,735	13,341		12,735	12,645	
Beds in service (at end of period)	10,843	11,608		10,843	10,912	
Admissions	218,423	216,172	1.0%	217,063	207,081	4.8%
Adjusted admissions	495,275	478,926	3.4%	491,255	458,238	7.2%
Patient days	994,067	1,049,443		989,478	1,011,899	
Average length of stay (days)	4.6	4.9		4.6	4.8	
Occupancy rate (average beds in service)	50.6%	50.1%		50.6%	51.4%	
Net operating revenues	\$ 6,223	\$ 6,044	3.0%	\$ 6,173	\$ 5,862	5.3%
Net inpatient revenues as a % of net operating revenues	47.1%	47.2%		47.1%	47.5%	
Net outpatient revenues as a % of net operating revenues	52.9%	52.8%		52.9%	52.5%	
Income from operations (f)	\$ 457	\$ 389	17.5%			
Income from operations as a % of net operating revenues	7.3%	6.4%				
Depreciation and amortization	\$ 255	\$ 261				
Equity in earnings of unconsolidated affiliates	\$ (4)	\$ (6)				
Net loss attributable to Community Health Systems, Inc. stockholders	\$ (89)	\$ (327)	72.8%			
Net loss attributable to Community Health Systems, Inc. stockholders as a % of net operating revenues	-1.4%	-5.4%				
Adjusted EBITDA (c)	\$ 707	\$ 662	6.8%			
Adjusted EBITDA as a % of net operating revenues	11.4%	11.0%				
Net cash provided by operating activities	\$ 91	\$ 154	-40.9%			

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Condensed Consolidated Balance Sheets
(In millions, except share data)
(Unaudited)

	June 30, 2023	December 31, 2022
ASSETS		
<i>Current assets</i>		
Cash and cash equivalents	\$ 118	\$ 118
Patient accounts receivable	2,043	2,040
Supplies	333	353
Prepaid income taxes	100	99
Prepaid expenses and taxes	259	237
Other current assets	339	235
Total current assets	3,192	3,082
<i>Property and equipment</i>		
	9,527	9,639
Less accumulated depreciation and amortization	(4,277)	(4,274)
Property and equipment, net	5,250	5,365
<i>Goodwill</i>		
	4,054	4,166
<i>Deferred income taxes</i>		
	49	49
<i>Other asset, net</i>		
	2,103	2,007
Total assets	\$ 14,648	\$ 14,669
LIABILITIES AND STOCKHOLDERS' DEFICIT		
<i>Current liabilities</i>		
Current maturities of long-term debt	\$ 30	\$ 21
Current operating lease liabilities	134	148
Accounts payable	736	773
Accrued liabilities:		
Employee compensation	560	637
Accrued interest	189	189
Other	427	418
Total current liabilities	2,076	2,186
<i>Long-term debt (g)</i>		
	11,728	11,614
<i>Deferred income taxes</i>		
	362	354
<i>Long-term operating lease liabilities</i>		
	580	605
<i>Other long-term liabilities</i>		
	722	644
Total liabilities	15,468	15,403
<i>Redeemable noncontrolling interests in equity of consolidated subsidiaries</i>		
	583	541
STOCKHOLDERS' DEFICIT		
<i>Community Health Systems, Inc. stockholders' deficit:</i>		
Preferred stock, \$.01 par value per share, 100,000,000 shares authorized; none issued	-	-
Common stock, \$.01 par value per share, 300,000,000 shares authorized; 136,802,806 shares issued and outstanding at June 30, 2023, and 134,703,717 shares issued and outstanding at December 31, 2022	1	1
Additional paid-in capital	2,049	2,084
Accumulated other comprehensive loss	(19)	(21)
Accumulated deficit	(3,520)	(3,431)
Total Community Health Systems, Inc. stockholders' deficit	(1,489)	(1,367)
<i>Noncontrolling interests in equity of consolidated subsidiaries</i>		
	86	92
Total stockholders' deficit	(1,403)	(1,275)
Total liabilities and stockholders' deficit	\$ 14,648	\$ 14,669

For footnotes, see pages 13, 14 and 15.

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COMMUNITY HEALTH SYSTEMS, INC. AND SUBSIDIARIES
Condensed Consolidated Statements of Cash Flows
(In millions)
(Unaudited)

	Six Months Ended June 30,	
	2023	2022
<i>Cash flows from operating activities</i>		
Net loss	\$ (18)	\$ (268)
Adjustments to reconcile net loss to net cash provided by operating activities:		
Depreciation and amortization	255	261
Deferred income taxes	29	221
Stock-based compensation expense	10	8
Impairment and (gain) loss on sale of businesses, net (f)	(35)	6
Loss from early extinguishment of debt	-	5
Other non-cash expenses, net	88	95
Changes in operating assets and liabilities, net of effects of acquisitions and divestitures:		
Patient accounts receivable	(2)	61
Supplies, prepaid expenses and other current assets	(73)	(72)
Accounts payable, accrued liabilities and income taxes	(130)	(63)
Other	(33)	(100)
Net cash provided by operating activities	91	154
<i>Cash flows from investing activities</i>		
Acquisitions of facilities and other related businesses	(15)	(4)
Purchases of property and equipment	(227)	(191)
Proceeds from disposition of hospitals and other ancillary operations	111	3
Proceeds from sale of property and equipment	24	7
Purchases of available-for-sale debt securities and equity securities	(99)	(55)
Proceeds from sales of available-for-sale debt securities and equity securities	137	41
Purchases of investments in unconsolidated affiliates	(7)	(8)
Increase in other investments	(29)	(30)
Net cash used in investing activities	(105)	(237)
<i>Cash flows from financing activities</i>		
Repurchase of restricted stock shares for payroll tax withholding requirements	(4)	(8)
Deferred financing costs and other debt-related costs	-	(73)
Proceeds from noncontrolling investors in joint ventures	3	1
Redemption of noncontrolling investments in joint ventures	(1)	(1)
Distributions to noncontrolling investors in joint ventures	(83)	(73)
Other borrowings	29	34
Issuance of long-term debt	-	1,535
Proceeds from ABL Facility	1,527	-
Repayments of long-term indebtedness	(1,457)	(1,493)
Net cash provided by (used in) financing activities	14	(78)
<i>Net change in cash and cash equivalents</i>	<i>-</i>	<i>(161)</i>
<i>Cash and cash equivalents at beginning of period</i>	<i>118</i>	<i>507</i>
<i>Cash and cash equivalents at end of period</i>	<i>\$ 118</i>	<i>\$ 346</i>

For footnotes, see pages 13, 14 and 15.

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Footnotes to Financial Highlights, Financial Statements and Selected Operating Data

- (a) Both financial and statistical results include the operating results of divested or closed businesses for the periods prior to the consummation of the respective divestiture or closing. Same-store operating results and statistical information include operating results of businesses operated in the comparable current year and prior year periods and exclude businesses divested or closed in 2022 and the six months ended June 30, 2023. There were no discontinued operations reported for 2023 and 2022.
- (b) The following table provides information needed to calculate loss per share, which is adjusted for income attributable to noncontrolling interests (in millions):

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Net loss attributable to Community Health Systems, Inc. stockholders:				
Net income (loss)	\$ 2	\$ (298)	\$ (18)	\$ (268)
Less: Income attributable to noncontrolling interests, net of taxes	40	28	71	59
Net loss attributable to Community Health Systems, Inc. stockholders — basic and diluted	<u>\$ (38)</u>	<u>\$ (326)</u>	<u>\$ (89)</u>	<u>\$ (327)</u>

- (c) EBITDA is a non-GAAP financial measure which consists of net income (loss) attributable to Community Health Systems, Inc. before interest, income taxes, and depreciation and amortization. Adjusted EBITDA, also a non-GAAP financial measure, is EBITDA adjusted to add back net income attributable to noncontrolling interests and to exclude loss (gain) from early extinguishment of debt, impairment and (gain) loss on sale of businesses, expense from third-party consulting costs associated with significant process and systems redesign across multiple functions (the “Business Transformation Costs”) as part of the Company’s multi-year initiative to modernize and consolidate technology platforms and associated processes, gain on sale of equity interests in Macon Healthcare, LLC, expense related to government and other legal matters and related costs, income during the fourth quarter of 2021 associated with the settlement of litigation for the recovery of amounts of certain professional liability claims settled in 2020 covered by third-party insurance policies, expense related to employee termination benefits and other restructuring charges, the impact of a change in estimate to increase the professional liability claims accrual recorded during the fourth quarter of 2022 with respect to claims incurred in prior years related to divested locations and the gain on sale by HealthTrust of a majority interest in CoreTrust completed during the fourth quarter of 2022. The Company has incurred and will continue to incur expenses, including but not limited to the Business Transformation Costs, associated with the Company’s multi-year, transformative initiative to modernize and consolidate its technology platforms and associated processes, including the implementation of a core enterprise resource planning (“ERP”) system and the redesign of associated processes. The Company has included the Business Transformation Costs as an adjustment in the calculation of Adjusted EBITDA as a result of the fact that such costs are discrete third-party consulting costs associated with this multi-year technology initiative, which costs will not continue once this initiative has been completed. The Company believes that the Business Transformation Costs are not reflective of the Company’s underlying results of operations and that adjusting for the Business Transformation Costs is consistent with the intended purpose of Adjusted EBITDA in assessing the Company’s operational performance and enhancing comparability of the Company’s operational performance between periods. The Company has from time to time sold noncontrolling interests in certain of its subsidiaries or acquired subsidiaries with existing noncontrolling interest ownership positions. The Company believes that it is useful to present Adjusted EBITDA because it adds back the portion of EBITDA attributable to these third-party interests. The Company reports Adjusted EBITDA as a measure of financial performance. Adjusted EBITDA is a key measure used by management to assess the operating performance of the Company’s hospital operations and to make decisions on the allocation of resources. Adjusted EBITDA is also used to evaluate the performance of the Company’s executive management team and is one of the primary metrics used in connection with determining short-term cash incentive compensation and the achievement of vesting criteria with respect to performance-based equity awards. In addition, management utilizes Adjusted EBITDA in assessing the Company’s consolidated results of operations and operational performance and in comparing the Company’s results of operations between periods.

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Footnotes to Financial Highlights, Financial Statements and Selected Operating Data (Continued)

The Company believes it is useful to provide investors and other users of the Company's financial statements this performance measure to align with how management assesses the Company's results of operations. Adjusted EBITDA also is comparable to a similar metric called Consolidated EBITDA, as defined in the Company's asset-based loan facility (the "ABL Facility") and the Company's existing note indentures, which is a key component in the determination of the Company's compliance with certain covenants under the ABL Facility and such note indentures (including the Company's ability to service debt and incur capital expenditures), and is used to determine the interest rate and commitment fee payable under the ABL Facility (although Adjusted EBITDA does not include all of the adjustments described in the ABL Facility). Adjusted EBITDA includes the Adjusted EBITDA attributable to hospitals that were divested during the course of such year, but in each case solely to the extent relating to the period prior to the consummation of the applicable divestiture.

Adjusted EBITDA is not a measurement of financial performance under U.S. GAAP. It should not be considered in isolation or as a substitute for net income, operating income, or any other performance measure calculated in accordance with U.S. GAAP. The items excluded from Adjusted EBITDA are significant components in understanding and evaluating financial performance. The Company believes such adjustments are appropriate as the magnitude and frequency of such items can vary significantly and are not related to the assessment of normal operating performance. Additionally, this calculation of Adjusted EBITDA may not be comparable to similarly titled measures disclosed by other companies.

The following table reflects the reconciliation of Adjusted EBITDA, as defined, to net loss attributable to Community Health Systems, Inc. stockholders as derived directly from the condensed consolidated financial statements (in millions):

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Net loss attributable to Community Health Systems, Inc. stockholders	\$ (38)	\$ (326)	\$ (89)	\$ (327)
Adjustments:				
Provision for income taxes	38	200	65	223
Depreciation and amortization	124	133	255	261
Net income attributable to noncontrolling interests	40	28	71	59
Interest expense, net	207	218	414	435
Loss from early extinguishment of debt	-	-	-	5
Impairment and (gain) loss on sale of businesses, net	(13)	-	(35)	6
Expense from government and other legal matters and related costs	-	-	10	-
Expense from business transformation costs	6	-	6	-
Expense related to employee termination benefits and other restructuring charges	9	-	10	-
Adjusted EBITDA	\$ 373	\$ 253	\$ 707	\$ 662

(d) The following table sets forth components reconciling the basic weighted-average number of shares to the diluted weighted-average number of shares (in millions):

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Weighted-average number of shares outstanding - basic	131	129	130	128
Add effect of dilutive securities:				
Stock awards and options	-	-	-	-
Weighted-average number of shares outstanding - diluted	131	129	130	128

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Footnotes to Financial Highlights, Financial Statements and Selected Operating Data (Continued)

The Company generated a net loss attributable to Community Health Systems, Inc. stockholders for each of the three and six-month periods ended June 30, 2023 and 2022, so the effect of dilutive securities is not considered because their effect would be antidilutive. If the Company had generated net income, the effect of stock awards and options on the diluted shares calculation would have been an increase of 202,182 shares and 1,152,737 shares during the three months ended June 30, 2023 and 2022, respectively, and 335,188 shares and 1,675,586 shares during the six months ended June 30, 2023 and 2022, respectively.

- (e) The following supplemental table reconciles net loss attributable to Community Health Systems, Inc. stockholders, as reported, on a per share (diluted) basis, to net loss attributable to Community Health Systems, Inc. stockholders per share (diluted) with the adjustments described herein (total per share amounts may not add due to rounding). The Company believes that the presentation of non-GAAP adjusted net loss attributable to Community Health Systems, Inc. stockholders per share (diluted) presents useful information to investors by highlighting the impact on net loss attributable to Community Health Systems, Inc. stockholders per share (diluted) of selected items used in calculating Adjusted EBITDA which may not reflect the Company's underlying operating performance and assisting in comparing the Company's results of operations between periods.

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Net loss per share (diluted), as reported	\$ (0.29)	\$ (2.52)	\$ (0.68)	\$ (2.54)
Adjustments:				
Loss from early extinguishment of debt	-	-	-	0.11
Impairment and (gain) loss on sale of businesses, net	(0.02)	-	(0.13)	0.04
Expense from government and other legal matters and related costs	-	-	0.06	-
Expense from business transformation costs	0.04	-	0.04	-
Expense related to employee termination benefits and other restructuring charges	0.05	-	0.06	-
Net loss per share (diluted), excluding adjustments	<u>\$ (0.22)</u>	<u>\$ (2.52)</u>	<u>\$ (0.65)</u>	<u>\$ (2.40)</u>

- (f) Both income from operations and net income (loss) included a net non-cash income of \$13 million for the three months ended June 30, 2023, and a net non-cash income of \$35 million and expense of \$6 million for the six months ended June 30, 2023 and 2022, respectively, primarily from gains on the sale of certain businesses during such periods and also impairment charges to reduce the value of certain long-lived assets at businesses the Company identified for closure, sale or sold. These impairment charges do not have an impact on the calculation of the Company's financial covenants under the ABL Facility.
- (g) The maximum aggregate principal amount under the ABL Facility is \$1.0 billion, subject to borrowing base capacity. At June 30, 2023, the Company had outstanding borrowings of \$150 million and approximately \$764 million of additional borrowing capacity (after taking into consideration \$85 million of outstanding letters of credit) under the ABL Facility.

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Forward-Looking Statements

This press release contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, Section 21E of the Securities Exchange Act of 1934, as amended, and the Private Securities Litigation Reform Act of 1995 that involve risk and uncertainties. All statements in this press release other than statements of historical fact, including statements regarding projections, expected operating results, and other events that depend upon or refer to future events or conditions or that include words such as “expects,” “anticipates,” “intends,” “plans,” “believes,” “estimates,” “thinks,” and similar expressions, are forward-looking statements. Although the Company believes that these forward-looking statements are based on reasonable assumptions, these assumptions are inherently subject to significant economic and competitive uncertainties and contingencies, which are difficult or impossible to predict accurately and may be beyond the control of the Company. Accordingly, the Company cannot give any assurance that its expectations will in fact occur and cautions that actual results may differ materially from those in the forward-looking statements. A number of factors could affect the future results of the Company or the healthcare industry generally and could cause the Company’s expected results to differ materially from those expressed in this press release.

These factors include, among other things:

- general economic and business conditions, both nationally and in the regions in which we operate, including the current negative macroeconomic conditions, ongoing inflationary pressures that have significantly increased and may continue to significantly increase our expenses, the current high interest rate environment, ongoing challenging labor market conditions and labor shortages, including the current and/or potential future adverse impact of such economic conditions and other factors on our net operating revenues (including our service mix, revenue mix, payor mix and/or patient volumes) and our ability to collect outstanding receivables, as well as the potential impact on us of financial and capital market instability and/or disruptions to the banking system due to bank failures and other factors, including any potential impact on our ability to access and or obtain the return of cash and cash equivalents, and/or our ability to access credit, liquidity and capital market sources on acceptable terms or at all;
- the impact of current or future federal and state health reform initiatives, including the Patient Protection and Affordable Care Act, as amended by the Health Care and Education Reconciliation Act of 2010 (the “Affordable Care Act”), and the potential for changes to the Affordable Care Act, its implementation or its interpretation (including through executive orders and court challenges);
- the extent to and manner in which states support increases, decreases or changes in Medicaid programs, implement health insurance exchanges or alter the provision of healthcare to state residents through legislation, regulation or otherwise;
- the future and long-term viability of health insurance exchanges and potential changes to the beneficiary enrollment process;
- risks associated with our substantial indebtedness, leverage and debt service obligations, including our ability to refinance such indebtedness on acceptable terms or to incur additional indebtedness, and our ability to remain in compliance with debt covenants;
- demographic changes;
- changes in, or the failure to comply with, federal, state or local laws or governmental regulations affecting our business;
- potential adverse impact of known and unknown legal, regulatory and governmental proceedings and other loss contingencies, including governmental investigations and audits, and federal and state false claims act litigation;

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- our ability, where appropriate, to enter into and maintain provider arrangements with payors and the terms of these arrangements, which may be further affected by the increasing consolidation of health insurers and managed care companies and vertical integration efforts involving payors and healthcare providers;
- changes in, or the failure to comply with, contract terms with payors and changes in reimbursement policies or rates paid by federal or state healthcare programs or commercial payors;
- any security breaches, cyber-attacks, loss of data, other cybersecurity threats or incidents, and any actual or perceived failures to comply with legal requirements governing the privacy and security of health information or other regulated, sensitive or confidential information, or legal requirements regarding data privacy or data protection, and the impact of the security breach announced by us on February 13, 2023, including legal, reputational, and financial risks associated with this security breach, existing and/or any future litigation associated with this security breach, any potential regulatory inquiries to which we may become subject in connection with this security breach, and the extent of remediation and other additional costs that may be incurred by us in connection with this security breach;
- any potential impairments in the carrying value of goodwill, other intangible assets, or other long-lived assets, or changes in the useful lives of other intangible assets;
- changes in inpatient or outpatient Medicare and Medicaid payment levels and methodologies;
- the effects related to the implementation of the sequestration spending reductions pursuant to both the Budget Control Act of 2011 and the Pay-As-You-Go Act of 2010 and the potential for future deficit reduction legislation;
- increases in the amount and risk of collectability of patient accounts receivable, including decreases in collectability which may result from, among other things, self-pay growth and difficulties in recovering payments for which patients are responsible, including co-pays and deductibles;
- the efforts of insurers, healthcare providers, large employer groups and others to contain healthcare costs, including the trend toward value-based purchasing;
- the impact of competitive labor market conditions and the shortage of nurses, including in connection with our ability to hire and retain qualified nurses, physicians, other medical personnel and key management, and increased labor expenses as a result of such competitive labor market conditions, inflation and competition for such positions;
- the non-performance of third parties with whom we contract with respect to providing hospital-based physicians and the effectiveness of our efforts to mitigate such non-performance including through acquisitions of outsourced medical specialist businesses, engagement with new or replacement providers, employment of physicians and re-negotiation or assumption of existing contracts;
- any failure to obtain medical supplies or pharmaceuticals at favorable prices;
- liabilities and other claims asserted against us, including self-insured professional liability claims;
- competition;
- trends toward treatment of patients in less acute or specialty healthcare settings, including ambulatory surgery centers or specialty hospitals or via telehealth;
- changes in medical or other technology;

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- any failure of our ongoing process of redesigning and consolidating key business functions, including through the implementation of a new core enterprise resource planning system, to proceed as expected or to be completed successfully;
- changes in U.S. GAAP;
- the availability and terms of capital to fund any additional acquisitions or replacement facilities or other capital expenditures;
- our ability to successfully make acquisitions or complete divestitures, our ability to complete any such acquisitions or divestitures on desired terms or at all, the timing of the completion of any such acquisitions or divestitures, and our ability to realize the intended benefits from any such acquisitions or divestitures;
- the impact that changes in our relationships with joint venture or syndication partners could have on effectively operating our hospitals or ancillary services or in advancing strategic opportunities;
- our ability to successfully integrate any acquired hospitals and/or outpatient facilities, or to recognize expected synergies from acquisitions;
- the impact of severe weather conditions and climate change, as well as the timing and amount of insurance recoveries in relation to severe weather events;
- our ability to obtain adequate levels of insurance, including cyber, general liability, professional liability, and directors and officers liability insurance;
- timeliness of reimbursement payments received under government programs;
- effects related to pandemics, epidemics, or outbreaks of infectious diseases, including the impact of any future developments related to COVID-19 and the COVID-19 pandemic on our business, results of operations, financial condition, and/or cash flows;
- any failure to comply with our obligations under license or technology agreements;
- challenging economic conditions in non-urban communities in which we operate;
- the concentration of our revenue in a small number of states;
- our ability to realize anticipated cost savings and other benefits from our current strategic and operational cost savings initiatives;
- any changes in or interpretations of income tax laws and regulations; and
- the risk factors set forth in our Annual Report on Form 10-K for the year ended December 31, 2022, filed with the Securities and Exchange Commission (the “SEC”) on February 17, 2023 and other filings filed with the SEC.

The consolidated operating results for the three and six months ended June 30, 2023, are not necessarily indicative of the results that may be experienced for any future periods. The Company cautions that the reaffirmation of our guidance for calendar year 2023 (which guidance was originally included in our February 15, 2023 press release) as set forth herein is based on currently available information. The Company undertakes no obligation to revise or update any forward-looking statements (including such guidance), or to make any other forward-looking statements, whether as a result of new information, future events or otherwise.

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