



Montgomery General Hospital (MGH) **Community Benefits FY2009 Narrative Report**

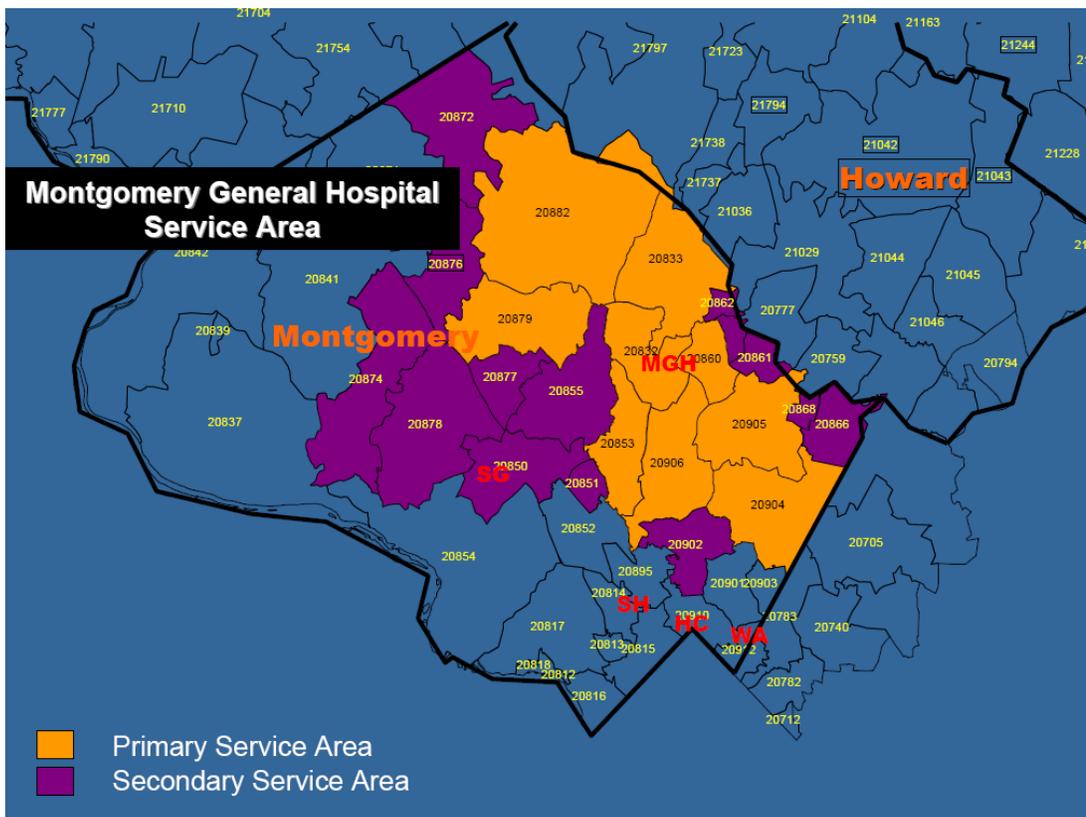
Serving the greater Baltimore and Washington, D.C. metro areas, Montgomery General Hospital (MGH) is a 165 bed, not-for-profit community hospital. It also is the newest member of the MedStar Health network. Founded in 1920 by Jacob Wheeler Bird, M.D., the original hospital had 28 beds and was the first acute care facility in Montgomery County. Nearly nine decades later, MGH remains committed to improving the health and welfare of the communities it serves and is dedicated to providing high quality care.

While the provision of high quality care is an imperative, the hospital has also devoted itself to prevention. Throughout the year many MGH medical staff take part in projects that not only improve the community but enhance the lives of residents. Staff takes great pride in its outreach efforts and collaboration with community organizations.

In FY2009, of the 11,189 inpatient admissions, 75% of MGH patients traveled from within MGH's total service area (as listed below). All of MGH's primary and secondary service area zip codes fall within Montgomery County, MD.

MGH's Total Service Area

Zip Code	City
20833	Brookeville
20879	Gaithersburg
20882	Gaithersburg
20832	Olney
20853	Rockville
20860	Sandy Spring
20904	Silver Spring
20906	Silver Spring
20905	Silver Spring
20861	Ashton
20862	Brinklow
20866	Burtonsville
20872	Damascus
20855	Derwood
20877	Gaithersburg
20878	Gaithersburg
20874	Germantown
20876	Germantown
20850	Rockville
20851	Rockville
20902	Silver Spring
20868	Spencerville



Montgomery County is situated just north of Washington, D.C. and is considered a part of both the Washington and the Baltimore-Washington Metropolitan Area. It's also one of the most affluent counties in the nation. As of 2008, it was the second richest county per capita in the State of Maryland and 8th richest in the nation, with a median household income of \$87,624.¹ Three of MGH's primary service area zip codes fall within Silver Spring, Rockville, and Gaithersburg which are three of the county's most populous areas.²

As part of its annual rating of "America's Best Places to Live," *Money Magazine* has ranked Montgomery County first among the "Best places for a long life" citing a life expectancy at birth of 81.31 years.³

Montgomery County may be one of the wealthiest counties in the nation, but it is important to note that alongside this wealth, there is also poverty. According to the Montgomery County Department of Health and Human Services (MCDHHS), an estimated 50,982 individuals in the county lived in poverty. The unemployment rate in June 2009 reached 5.7 %⁴ up from 2.7% in May of 2007⁵ with 5.1% of people living below poverty level⁶.

In 2004, the federal government set the official Federal Poverty Level for a family of three with one adult, one pre-school child and one school-age child at \$15,260. However, the Self-Sufficiency Standard, which MCDHHS describes as a more accurate measure of poverty, calculates the amount of

¹ http://www.forbes.com/2008/01/22/counties-rich-income-forbeslife-cx_mw_0122realestate_slide_9.html?thisSpeed=15000

² <http://quickfacts.census.gov/qfd/states/24/24031.html>

³ http://money.cnn.com/galleries/2008/moneymag/0809/gallery.bestplaces_lifeexpect.moneymag/

⁴ <http://www.bls.gov/ro3/mdlaus.htm>

⁵ U.S Bureau of Labor Statistics

⁶ <http://quickfacts.census.gov/qfd/states/24/24031.html>

income that the same family would need to meet its basic needs. In 2004, the Self-Sufficiency Standard for the county was \$51,086.⁷

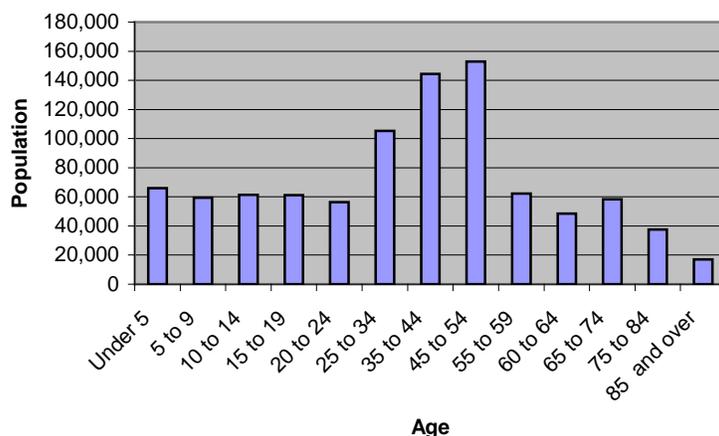
In addition to individuals living at or below the Federal Poverty Level, it is also estimated that 42,565 Montgomery county families had incomes between \$15,000 and \$49,999 in 2003, according to the American Community Survey⁸. With an average family size of 3.19 in Montgomery County, these statistics indicate that a large number of families in the county are low income, if not below the poverty level.

Although, the population of Montgomery County as a whole is financially stable as compared to many other counties in the United States, there are still community members in need. Of MGH’s inpatient population in FY09, 17% of them are made up of Medicaid and Self Pay patients.

Demographics

Montgomery County has experienced continuous growth over the years. As of 2008, 950,680 people live in Montgomery County.⁹ Since 2000, Montgomery County has experienced a population increase of 8.9 percent according to the U.S. Census Bureau. The most recent estimate puts the average age in the county at 38.7. More than half of the population is female.

The Age Distribution of People in Montgomery County



Source: U.S. Census Bureau, 2005-2007 American Community Survey

Persons under the age of 5 make up 6.9 percent of the population. Persons under 18 make up 24.1 percent and persons 65 and older account for 12.5 percent of the population.¹⁰

Montgomery County is racially diverse and very rich with culture. The county’s racial breakdown is 61.2 percent caucasian, 16.2 percent black or African American, and 13 percent Asian. Including all races, 14 percent of the population is of Hispanic origin. Lastly, 29.4 percent of county residents are foreign-born.¹¹

⁷ Self-Sufficiency Standard for Montgomery County, MD, 2002/2003, Department of Health and Human Services, Community Action Agency.

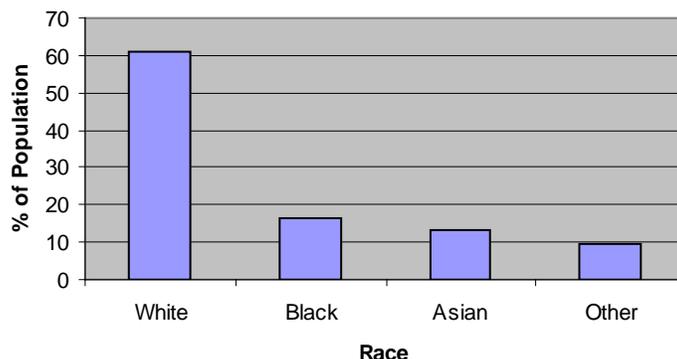
⁸ U.S. Census Bureau, American Community Survey, 2003.

⁹ U.S. Census Bureau, <http://quickfacts.census.gov/qfd/states/24/24031.html>

¹⁰ U.S. Census Bureau, 2005-2007 American Community Survey

¹¹ ibid

The Racial Distribution of People in Montgomery County

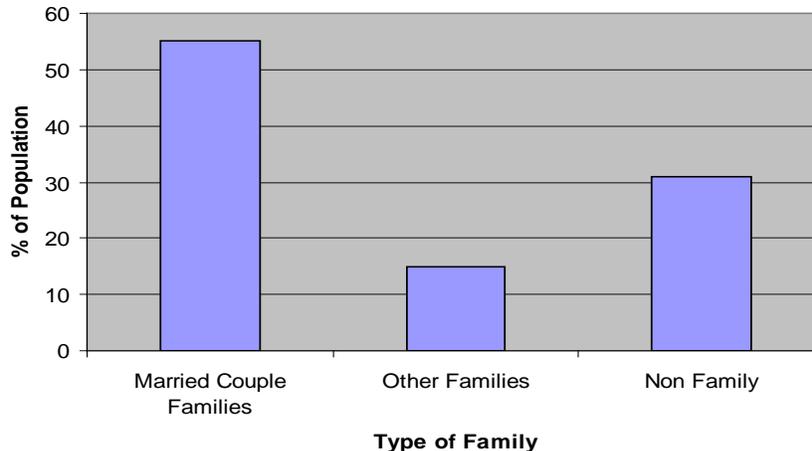


Source: U.S. Census Bureau, 2005-2007 American Community Survey

Social Characteristics

In 2007 there were 343,000 households in Montgomery County. Of the 343,000 households, 69 percent were families. That includes both married-couple families (55 percent) and other families (15 percent). Nonfamily households made up 31 percent of all households in the County. Most of the nonfamily households were people living alone, but some were composed of people living in households in which no one was related to the householder.¹²

Households in Montgomery County



Source: U.S. Census Bureau, 2005-2007 American Community Survey

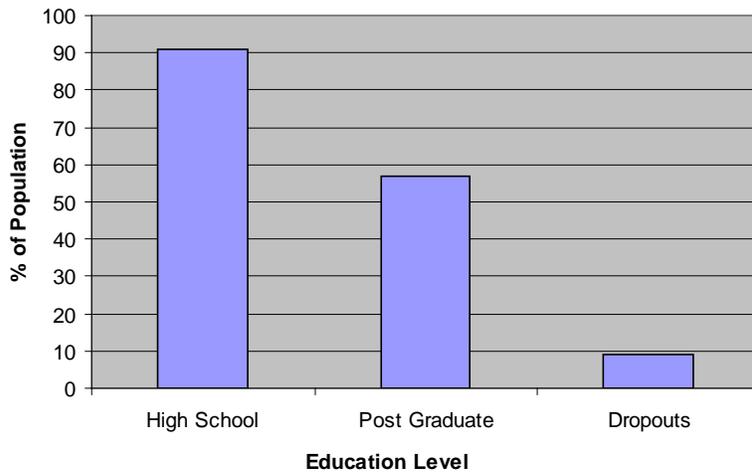
Education

In Montgomery County, 91 percent of people 25 years and over have at least graduated from high school and 57 percent have a bachelor's degree or higher. Nine percent were dropouts, meaning they were not enrolled in school and had not graduated from high school.¹³

¹² ibid

¹³ ibid

Educational Attainment of People in Montgomery County

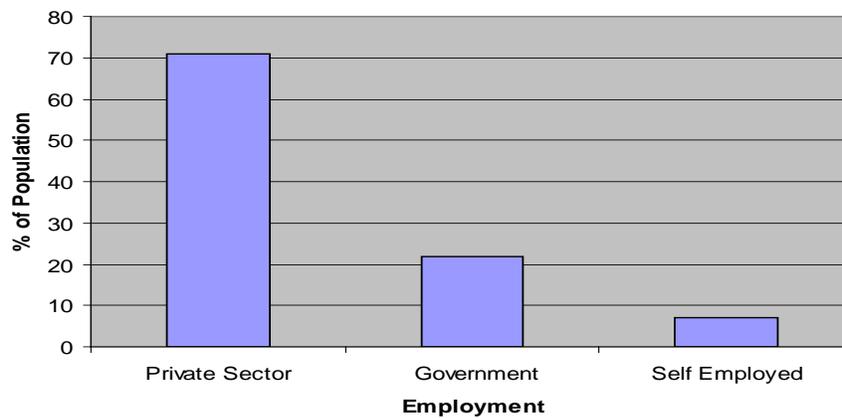


Source: U.S. Census Bureau, 2005-2007 American Community Survey

Employment

The private sector accounts for approximately 71 percent of employment in the county followed by the government, which employs roughly 22 percent. The remaining 7 percent are self-employed.¹⁴

Employment of People in Montgomery County



Source: U.S. Census Bureau, 2005-2007 American Community Survey

Identification of Community Needs:

Community Health Improvement Process, part of the Montgomery County Department of Health and Human Services, recognized the need to conduct a comprehensive needs assessment. Montgomery General Hospital, along with other Montgomery County hospitals, is participating in this collaborative community driven effort. Results are expected to be available in FY2011.

¹⁴ ibid

In the interim, MGH's Director of Marketing & Strategic Planning along with the Community Outreach Coordinator have identified community needs based on the Montgomery County Department of Health and Human Services Strategic Plan 2006-2011 (listed below).

Community Needs for Montgomery County:

Increase Access to Quality Health Care (Physical, Oral and Behavioral Health)

Improve the Public's Health

Protect the Health and Safety of the Public through Emergency Preparedness and Response

Addressing Community Needs:

1. Increase Access to Quality Health Care (Physical, Oral and Behavioral Health)

Proyecto Salud Clinic-Community residents without health insurance have a place to go in Olney for primary care thanks to the new partnership between Montgomery General Hospital and Proyecto Salud Clinic.

Proyecto Salud, an independent primary care clinic in Wheaton, has opened a satellite operation on the campus of Montgomery General Hospital. The satellite clinic was arranged as part of Montgomery Cares, a program that provides primary healthcare to medically uninsured, low-income adult residents of Montgomery County and is funded in part by the county government to help support a network of independent, nonprofit clinics. Montgomery Cares formed in 2005 to respond to the growing number of county individuals without insurance, estimated at 80,000. The organization aimed to serve at least half, about 40,000, and area hospitals were encouraged to support the effort.

Under the terms of the three-year agreement, Montgomery General Hospital provides the clinic office space to Proyecto Salud free of charge as well as funded start-up operations and marketing support. A team of MGH employees have also been designated to attend quarterly meetings with Proyecto Salud as well as work with them throughout the year to improve the referral process and plan strategically. The clinic's services focus on primary adult healthcare including physical examinations, health counseling and education, and basic laboratory services. In addition, the clinic offers a seasonal flu clinic focused on prevention with vaccinations. Prescription medications are made available through the Montgomery Cares program. The clinic also provides referrals for county specialty services, STD, HIV programs/WCCP, FP/maternity and affordable alcohol treatment and rehabilitation. The most common conditions currently treated include chronic illnesses, such as diabetes and hypertension.

Proyecto Salud in Olney was established to provide healthcare services for community residents without health insurance, and to address hospital emergency room wait times that result from community residents using hospitals for primary care services. The clinic provides easy access and enables community members to take advantage of its services at the onset of issues without waiting until they are emergent.

Fees are based on a sliding scale. Approximately 90 percent of patients are members of the Hispanic community, but the clinic is open to all residents of Montgomery County. The clinic employs bilingual

staff (English and Spanish), and other languages are available there including French and Mandarin. In Fiscal Year 2009, 478 patients were seen in the Proyecto Salud Olney clinic.

Addictions and Mental Health Services: An integral component of Montgomery General Hospital for three decades, the Addiction and Mental Health Center (AMHC) has earned a reputation for the efficient and compassionate delivery of a broad range of fully integrated inpatient, outpatient, crisis, and community education and outreach services. Today, the AMHC is the most comprehensive treatment center based at a general hospital in the Baltimore-Washington area.

Through the Addiction and Mental Health Center, MGH maintains a free, 24-hour, mental health help line. This crisis intervention line is staffed around-the-clock, seven days per week by a licensed therapist. On average, the therapists spend six hours a day assisting community members experiencing or affected by a crisis, providing them with information about resources in the community. Staff spent approximately 1,800 hours on the phone during the last fiscal year.

2. Improve the Public's Health

Improving community health among neighbors and friends is important to Montgomery General Hospital. This year MGH contributed \$1,294,408 towards community education and outreach, health screenings, support groups, health fairs, counseling, and self-help and wellness programs.

In November, 2007, MGH joined other hospitals in Montgomery County in establishing a tobacco-free campus. We felt strongly that a tobacco ban was consistent with our mission – to improve the health of the community we serve – and would demonstrate our commitment to healthy living. By going tobacco free, we've eliminated the health and safety risks that the use of the product poses for our patients, employees and visitors.

Community health lectures, workshops and support groups: Community-based education is provided to local residents through free community health workshops and support groups. These events educate the community on health related illnesses. This year's topics included I Can Cope, Look Good and Feel Better for Cancer Survivors, Heart Healthy Living, Prostate Health, Chronic Sinusitis, Head Injuries/Concussions in Sports, Prevention and Treatment of Skin Cancer, Home care for the Elderly, Adolescent Drug Use, Advance Directives and Stroke Signs and Symptoms.

Community education programs: Health education and wellness programs are offered to all members of the community, elementary-aged through seniors. Classes are conducted throughout the year. In 2009, these classes included AARP Driver Safety, ACLS for Healthcare Professionals, Babysitting Plus CPR, Big Brother/Sister, Blood Drive, Cardiac Rehab, Caregivers Support Group, Childbirth, First Aid, Heartsaver & AED, Home Alone, Lamaze Techniques, Mommies with Muscle, Mommy & Me, SIDS, Smoking Cessation, Yoga, Tai Chi and Zumba.

Dare to C.A.R.E. provided free screenings for cardiovascular disease for those age 60 or over, or those age 50 or over with a history of diabetes or smoking. The screening included a non-invasive ultrasound examination of the carotid arteries in the neck, the aorta in the abdomen, and an evaluation of the circulation in the legs. Nutritional counseling, BP screenings, and podiatry evaluations were included in the Dare to C.A.R.E. program. Due to the increasing demand of this event, we more than doubled the number of Dare to C.A.R.E. screenings that were offered in 2008 and served approximately 200 members of the community.

Annual Health EXPO provided free screenings for blood pressure, body fat/waist hip ratio, podiatry, sleep apnea, vision, prostate, breast exam and carotid artery. Up-to-date information on prevention, early detection, treatment, diagnosis and care for various diseases was offered. Attendees enjoyed physician lectures by MGH medical staff, giveaways, and multiple interactive health booths. In 2009, 159 members of the community attended this event.

Cancer screening and treatment: Educating the community about cancer prevention and treatment is a priority at MGH. An oncology certified registered nurse is available to guide patients' families and physicians through the many facets of tests and treatments that often accompany a cancer diagnosis. This "Cancer Care Navigator" is nurse experienced in the care, treatment and education of cancer patients. The Navigator not only educates patients about cancer and treatments but provides emotional support and encouragement. A culturally competent Community Outreach Specialist with a public health specialty improves our reach directly into the communities where the uninsured under served of Montgomery County gather with relevant programs to address their cancer awareness, especially in prostate and breast Cancer.

3. Protect the Health and Safety of the Public through Emergency Preparedness and Response

Protecting our Community

In 2009, Montgomery General Hospital invested \$325,981 and dedicated over 8,000 staff hours to improve community building through activities that support systems within the community.

Emergency Preparedness

The Montgomery County Healthcare Collaborative on Emergency Preparedness consists of Montgomery General Hospital, Shady Grove Adventist Hospital, Suburban Hospital, Washington Adventist Hospital, Holy Cross Hospital, Montgomery County Public Health, Montgomery County Fire/Rescue, Montgomery County Dept of Homeland Security, and Kaiser Permanente. It was chartered in November 2001 to help prepare Montgomery County health care providers respond to large-scale emergency events in a coordinated, collaborative manner. To this end, a Memorandum of Understanding was signed by the participating hospitals establishing what is known as EMAS, the Montgomery County Emergency Mutual Aid System.

During the fiscal year, Montgomery General Hospital continued to collaborate with other hospitals and health care providers in the county regarding emergency preparedness. This will allow MGH to provide better urgent care to the community in the event of a local, regional, and/or national disaster. MGH representatives met with other area hospitals and staff to assess the county's overall ability to handle a crisis situation.

The vision at MGH is to increase the hospital's value to the community by continuously offering the best of modern medicine in a caring, professional and ethical environment to patients and their families, professional staff, employees and volunteers. The community comes first and as the community grows, so does the commitment to serving its diverse needs.

Gaps in the Availability of Specialist Providers for the Uninsured

Since joining MedStar in February of 2008, the affiliation has significantly improved MGH's specialty resources.

In 2009 we have been able to access our sister institutions of Georgetown and Washington Hospital Center for emergent neurosurgical cases. The Medstar transfer/transport services are fast, efficient and professional, and have significantly improved the care of any patient requiring emergent neurosurgical care.

We have also been in consultation with another Medstar institution, National Rehabilitation Hospital, to help appropriate patients with orthopedic injuries who can benefit from state of the art acute rehabilitation services.

Emergent facial fractures or severe dental injuries can be problematic to find coverage at times. Although we have one oral maxillary surgeon who is very responsive, most emergent cases are transferred to Washington Hospital Center or Shock Trauma.

Resolution

Diminishing the gaps in specialty services for all patients (uninsured and insured) is very important to MGH. Since joining MedStar, which includes the Franklin Square Hospital Center, Good Samaritan Hospital, Harbor Hospital, Union Memorial Hospital, Georgetown University Hospital, National Rehabilitation Hospital, and Washington Hospital Center, we now have access to MedStar's entire medical staff, including specialty resources.

MGH is currently planning for the third medical office building on its campus. This will allow more physicians to treat and follow-up with patients in close proximity to the hospital.

Our planned 20,000-square-foot Emergency Department will not only allow us to treat more patients but to provide enhanced care, especially to those suffering a heart attack or stroke. When the new ED opens in 2010, our current emergency room will become home to an expanded medical imaging department. As we continue to grow our departments, programs, personnel and facilities, it's important to understand that we do so without losing sight of our roots. We have spent 90 years delivering quality patient care and developing a reputation as one of the most dependable and respected community-based health care institutions in the region. We look forward to continuing to our community, and staying close to our patients.

We will continue to work with MedStar physicians to complement our own staff. In building these relationships with other MedStar physicians we hope to see the gaps in specialty services significantly decrease over the coming years.

Physician Subsidies

Included in MGH's Community Benefit Report are subsidies for losses from physician services. These stem from serving patients that are uninsured or underinsured as well as absorbing the cost of providing on-call specialists 24/7 to our community.

Category 1:

The overall cost of 24/7 Psychiatry physician coverage is disproportionate to the total collections from the patients seen by these physicians during off hours. Many of these patients are also uninsured. Providing 24/7 Psychiatry physicians to serve this patient population ensures that community needs are being met.

Because of the low volumes of specialty surgical volumes that come in through our emergency department, it is difficult to staff with orthopedic and general surgery specialists around the clock. MGH has arranged for on-call surgical specialists. With service offering, our patients do not have to be transported to other facilities to get the services they need.

Category 2:

Hospitalists provide 24/7 primary care services which focus on preventive health measures and health status improvement for the community.

Appendix 1

About our Charity Care Policy

Montgomery General Hospital (MGH) is dedicated to serving our community by providing high-quality, personalized healthcare services. In doing so, the hospital pledges to offer accessible services to individuals who do not have the resources to pay for necessary medical care.

MGH will provide access for urgent or emergent medically necessary health care services for free or at a reduced fee to all patients who meet the criteria. The determination of urgent or emergent medically necessary health care services is the sole discretion of MGH. Each applicant for financial assistance or reduced fee arrangements must meet criteria set by MGH. Hospital financial aid is not a substitute for employer-sponsored, public or individually purchased insurance.

Detailed description of how MGH informs patients of the Charity Care Policy:

There are signs in English and Spanish at every registration point in the hospital regarding financial assistance. All registration staff have copies of the financial assistance application in English and Spanish to give to patients.

There are signs in the hospital's main lobby in English and Spanish informing them that MGH has a financial assistance program.



Greeter desks also have copies of the financial assistance application in English and Spanish to give to patients. Billing and Customer Service also have copies of the financial assistance application in English to give to patients. The Financial Assistance policy is posted on our website. Once a year we post a notice of financial assistance availability in our local newspaper for public notice.

For all self-pay patients who come to the Emergency Department a financial assistance application is mailed to the patient within one week of their ED stay.

For all self-pay patients who are inpatients the Customer Service department has the patient speak with our internal Montgomery County Social worker to see if they will qualify for medical assistance or an outside agency that specializes in obtaining medical assistance for hospital patients. If the patient does not meet criteria to apply for medical assistance the patient is referred to the Billing Department for payment or to obtain a financial assistance application.

All inpatients also receive a discharge package/envelope. Within the envelope is a Patient Financial Services brochure which explains MGH's billing policies and financial assistance program. These brochures are housed in several areas of the hospital for patient's convenience.

Financial assistance is granted to the uninsured who reside in Montgomery General Hospital's primary and secondary service area. The patient's household income is reviewed against Federal poverty guidelines. If the patient's income and household size is 200% or less than the Federal poverty guidelines than 100% of the bill is written off to charity. A sliding scale is then used for income and household size greater than 200% and less than 400% of the Federal poverty guidelines.

For self pay patients, billing statements are sent after service is rendered then 21 days later, 15 days later, and then 10 days latter asking them for payment or to contact the Billing Department for further assistance.

Appendix 2

Charity Care Policy FY2008 (has not changed for FY09)

Policy: The Hospital will provide access for urgent or emergent medically necessary health care services free or at a reduced fee to all patients who meet the criteria. The determination of urgent or emergent medically necessary health care services is the sole discretion of Montgomery General Hospital. Each applicant for financial assistance or reduced fee arrangements must meet criteria as set by Montgomery General Hospital. Hospital financial aid is not a substitute for employer-sponsored, public or individually purchased insurance. The Hospital will make an effort to provide Financial Assistance application, policies, procedures, and information available in English, Spanish, and/or any other language that will be understandable to target populations of patients utilizing hospital services.

Procedure: 1. Notice of the availability of charity care shall be published in local news media on an annual basis. Notice will also be posted in the Admissions Office, Business Office, and Emergency areas within the hospital. Such notice will be posted in English, Spanish, and/or any other language that will be understandable to target populations of patients utilizing hospital services.

Individual notice of the availability of charity care, the potential for Medicaid eligibility and the availability of assistance from other government funded programs shall be provided to each person who seeks services in the hospital at the time of community outreach efforts, prenatal services, preadmission or admission. Montgomery General Hospital will make an effort to provide Financial Assistance Application, policies, procedures and information in English, Spanish and/or any other language that will be understandable to target populations of patients utilizing hospital services.

Request for charity or reduced fee arrangements can be made prior to or after service is rendered. To request charity or reduced fee arrangements, the patient must complete a Uniform Financial Assistance Application available from a Montgomery General Hospital representative or via the hospital website. A completed "Uniform Financial Assistance Application" must include a completed demographic section as well as a completed income section. To be considered "complete" MGH will require proof of income and verification of number of dependents based upon the previous year's tax return. If this is not available, the last two months' paycheck stubs will be accepted. Dependents must meet IRS definition of dependents to qualify as household members. Photo id and/or proof of residency is required.

MGH staff will then review the application for the following:

- a. If patient is a Maryland resident and the patient lives in MGH's primary or secondary service area as defined by the following zip codes: 20832, 20833, 20850, 20851, 20853, 20855, 20860, 20861, 20866, 20868, 20872, 20874, 20876, 20877, 20878, 20879, 20882, 20886, 20902, 20904, 20905, 20906, 20910, then the individual is eligible for consideration for charity care. If no, then charity or a reduced fee will not be granted.
 - b. P.O. Box addresses will not be accepted.
6. Determination of probable eligibility for financial assistance will be reviewed on a weekly basis. A letter will be mailed to patient via certified mail notifying of the review results within 3 business days of the initial decision.

7. Patients may appeal any denial or partial fee payment arrangements. The appeal process will include the entire completed Uniform Financial Assistance Application along with accompanying documents of proof of Liquid Assets, Other Assets, and Monthly Expenses. Appeals must be received within 30 days of the patient receiving his/her letter of denial or partial fee payment arrangement. Appeals must be submitted in writing to the Senior Vice President/Chief Financial Officer (CFO). The appeal will be reviewed by the CFO that person and the President.

8. The patient who is appealing will be notified in writing of the appeal decision within 5 business days of MGH receiving appeal. Again, notification will be sent by certified mail.

There is no second level of appeal.

If an account was not classified as charity following the steps above it will be classified as charity for financial statement purposes if an outside collection agency determines the account is “uncollectible” and the patient or guarantor is considered destitute. In this scenario, the charity amount will be entered into the accounting system as a journal entry reclassifying from bad debt to charity.

As a MedStar facility Montgomery General will follow the MedStar Financial Assistance for Uninsured Policy statement.

Training &

Education: All Patient Financial Services employees (Billing, Registrars and Customer Service) will be oriented to this policy as part of their initial training, annually and throughout the year as necessary.

Auditing &

Monitoring: The Patient Financial Services Director monitors financial assistance applications to ensure that all employees of PFS are offering the application in an appropriate and timely manner. Additional education will be provided as needed.

Appendix 3

Montgomery General Hospital's mission is to enhance our community's health and well being by offering high quality, compassionate, and personalized care.

Our mission statement was originated as part of the development of our FY09 - FY11 strategic plan. It was meant to blend the MGH's goals and strategies with that of our new parent company. Our management team was instrumental in crafting the statement which was approved and endorsed by MGH's board.

In developing our mission statement, it was important to include "a proud member of MedStar Health" in the language which was key in blending our goals and strategies with those of our new parent company. Through focus group work, "compassionate and personalized care" were adjectives used to describe MGH. The management team also agreed these were traits that are evident in our culture and should continue to be part of the mission of the hospital. "High quality" is a priority as part of our focus.

Appendix 4

MedStar Health and each entity (hospital and diversified business) share a common vision and set of values. MedStar Health's common vision is to be the trusted leader, caring for people and advancing health. MedStar Health's common set of values are services, patient first, integrity, respect, innovation and teamwork. Each entity has a unique mission, or purpose for which it exists. MedStar Health's mission is to serve our patients, those who care for them and our communities. Montgomery General Hospital's mission is to enhance our community's health and well being by offering high quality, compassionate, and personalized care.

Below is an illustration of MedStar Health's mission, vision and values for reference.



MedStar Health

Vision

*The Trusted Leader
in Caring for People
and Advancing Health.*

Mission

*To Serve Our Patients, Those
Who Care For Them, and
Our Communities.*

Values

Service
We strive to anticipate and meet the needs of our patients, physicians and co-workers.

Patient first
We strive to deliver the best to every patient every day. The patient is the first priority in everything we do.

Integrity
We communicate openly and honestly, build trust and conduct ourselves according to the highest ethical standards.

Respect
We treat each individual, those we serve and those with whom we work, with the highest professionalism and dignity.

Innovation
We embrace change and work to improve all we do in a fiscally responsible manner.

Teamwork
System effectiveness is built on the collective strength and cultural diversity of everyone, working with open communication and mutual respect.