



The Impact of TennCare: A Survey of Recipients 2010

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Method

The Center for Business and Economic Research at the University of Tennessee contracted with the Department of Finance and Administration of the State of Tennessee to conduct a survey of Tennessee residents in order to ascertain their insurance status and use of medical facilities. Given the necessity of obtaining accurate estimates for subpopulations, a target sample size of 5,000 was agreed upon. The survey instrument was prepared in cooperation with personnel from the Bureau of TennCare.

The survey was conducted by telephone between May and July 2010. The survey was conducted with a Computer Assisted Telephone Interviewing System, utilizing a random-digit dialing based sample. Five calls were made to each residence, at staggered times, to minimize nonrespondent bias. The design chosen was a “Household Sample,” and the interview was conducted with the head of the household. The University of Tennessee Social Work Office of Research and Public Service administered the survey.

Approximately 52 percent of those contacted agreed to participate in the survey. The large sample size allowed the weighting of responses by income and age to provide unbiased estimates for the entire population. For all statewide estimates of the uninsured, a correction factor was used to adjust for the degree to which the sample over- or under-represented Tennesseans grouped by household income and head of household age. In prior years, the sample has been adjusted by household income using the 2000 Census. This year, the sample is adjusted by household income and head of household age using the 3-year American Community Survey (ACS).

This is a follow-up to previous surveys of 5,000 Tennessee households conducted annually since 1993, the last year of Medicaid before Tennessee adopted TennCare. Throughout this report, comparisons are made to findings from the earlier surveys.

Head of Household Age and Household Income

Age-Householders	Proportion in 2010 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
Under 25	1.3	4.8	3.6
25-44	21.2	36.2	15.0
45-64	47.7	38.4	-9.3
65+	29.9	20.6	-9.2

Household Income Level	Proportion in 2010 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
<10000	10.5	9.2	-1.2
10,000-14999	9.8	6.6	-3.2
15,000-19,999	8.4	6.3	-2.1
20,000-29,999	13.6	12.3	-1.3
30,000-39,999	10.6	11.6	1.1
40,000-49,999	8.7	10.0	1.3
50,000-59,999	8.4	8.7	0.2
60,000-99,999	17.7	20.8	3.1
100,000+	12.3	14.4	2.1

*Census Bureau, 2006-2008 American Community Survey 3-year Estimates

Estimates for Insurance Status

Estimates for the number of Tennesseans who are uninsured are presented below (Table 1). The estimated 618,445 uninsured represent 9.9 percent of the 2010 population (6,144,104¹). This is slightly lower than the 2009 estimate, though the difference is not statistically significant. The uninsured rate for children is 3.9 percent, a slight increase from last year's rate of 3.7 percent. The rate for adults also slightly increased to 12.0 percent from the 2009 rate of 11.9 percent (Table 1a). The slight decrease in the total uninsured rate, despite slight increases in both the adult and children's rates, is attributable to the change in weighting scheme and the increased number of children in the sample.

Table 1: Statewide Estimates of Uninsured Populations (1993–2010)

	1993	1994	1995	1996	1997	1998	1999
State Total	452,232	298,653	303,785	333,268	319,079	335,612	387,584
Percent	8.9	5.7	5.8	6.3	6.1	6.2	7.2

	2000	2001	2002	2003	2004	2005	2006
State Total	372,776	353,736	348,753	371,724	387,975	482,353	649,479
Percent	6.5	6.2	6.1	6.4	6.6	8.1	10.7

	2007	2008	2009	2010
State Total	608,234	566,633	616,967	618,445
Percent	10.0	9.3	10.0	9.9

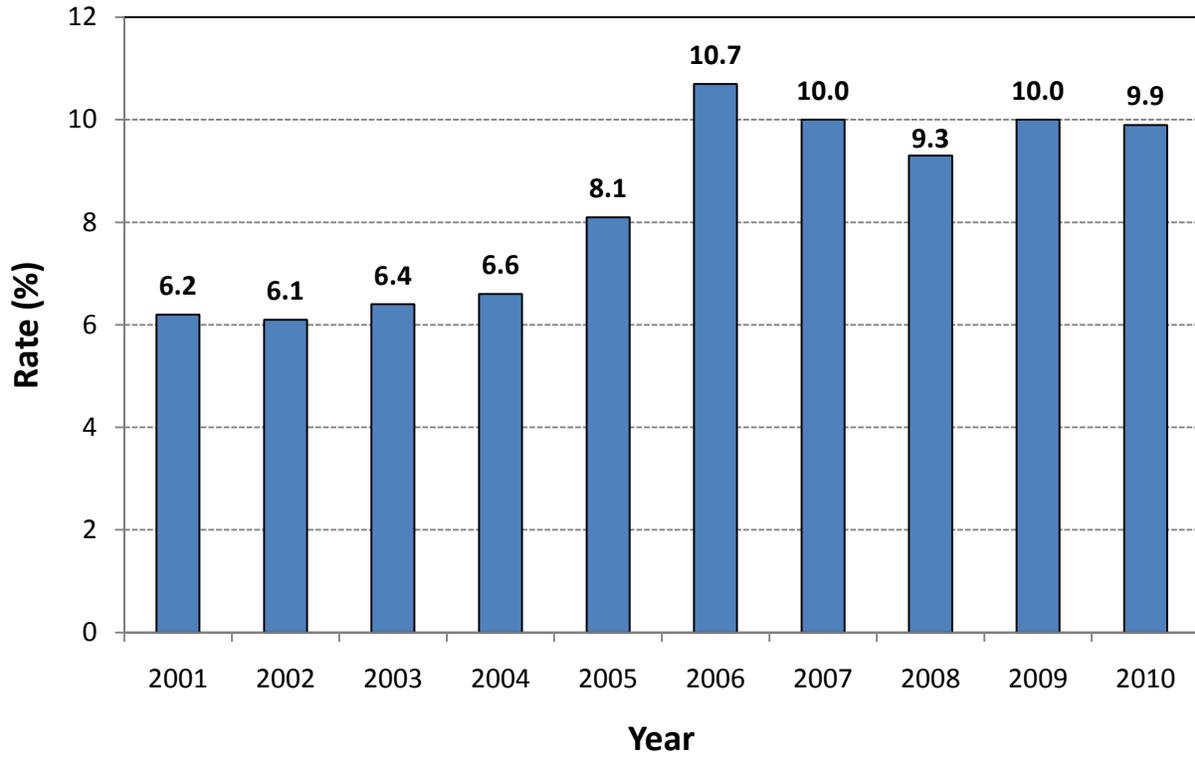
Table 1a: Uninsured Tennesseans by Age (1999–2010)

	1999	2000	2001	2002	2003	2004	2005
Under 18 Total	56,332	56,691	56,141	54,552	46,999	67,772	72,387
Under 18 Percent	4.2	4.1	4.0	3.9	3.3	4.9	5.0
18+ Total	331,252	316,053	297,595	297,779	324,725	320,203	409,965
18+ Percent	8.2	7.4	6.9	6.9	7.4	7.2	9.1

	2006	2007	2008	2009	2010
Under 18 Total	82,484	70,096	72,258	54,759	57,912
Under 18 Percent	5.7	4.8	4.9	3.7	3.9
18+ Total	566,955	538,138	494,375	562,208	560,532
18+ Percent	12.1	11.7	10.6	11.9	12.0

¹ United States Census Bureau, 2006-2008 American Community Survey. In all prior years, population figures were found using the "Interim State Population Projections," also part of the United States Census Bureau.

Figure 1: Rate of Uninsured Populations (2001-2010)



Reasons for Failure to Obtain Medical Insurance

The underlying reason for a lack of insurance has changed somewhat over the period since TennCare was implemented in 1994, though the percentages have shifted somewhat. The major reason that people report remaining uninsured continues to be their perceived inability to pay, and the percent indicating this is a major reason has risen sharply since 2005 (Table 2). In 2010, 91 percent indicate that this is a major reason for not having insurance, a decrease from 2009. Still, it is the third highest number since TennCare’s inception, though it has been slightly decreasing since 2008. Though there is some variation from one year to the next, the difference among income groups has been consistently large, with those in the highest income group considerably less likely to consider it a major reason (Table 3). Some increases or decreases occur across income levels in 2010 but the results are always within the range of responses in recent years. While financial pressures continue to limit people from obtaining coverage, 5 percent indicate that they just did not get around to securing it, and 6 percent indicate that a major reason is that they do not need insurance. The percentages citing these two reasons are lower than in early years of the survey.

Table 2: Reasons for Not Having Insurance (1997–2010) (Percent)

Reason	Can’t Afford			Didn’t Get to It			Don’t Need		
	Major Reason	Minor Reason	Not a Reason	Major Reason	Minor Reason	Not a Reason	Major Reason	Minor Reason	Not a Reason
1997	79	7	14	15	18	67	9	15	76
1998	73	10	17	12	17	72	13	13	74
1999	71	10	19	15	22	63	10	16	74
2000	76	8	16	6	21	73	7	12	81
2001	78	9	13	11	20	69	12	16	72
2002	74	10	17	11	16	74	8	14	78
2003	82	8	10	10	20	70	8	15	77
2004	82	7	11	8	19	73	8	16	76
2005	82	7	10	9	16	75	8	15	77
2006	87	4	9	12	14	74	12	14	74
2007	89	6	4	9	11	79	5	13	82
2008	93	4	4	7	11	82	5	8	87
2009	92	3	4	3	15	81	5	10	85
2010	91	5	4	5	13	82	6	15	80

Table 3: “Cannot Afford” Major Reason for No Insurance: by Income (1997–2010) (Percent)

Major Reason	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Less \$10,000	83	79	75	76	82	82	86	97	90	92	93	97	96	96
\$10,000 - \$14,499	87	86	76	84	84	90	84	88	82	96	95	97	96	95
\$15,000 - \$19,999	74	80	75	84	89	77	93	92	91	87	93	88	93	88
\$20,000 - \$29,999	69	73	69	80	74	70	83	87	81	90	89	96	92	94
\$30,000 - \$39,999	65	78	64	80	82	72	84	84	78	76	90	88	90	87
\$40,000 - \$49,999	80	63	73	45	69	62	82	70	64	84	88	93	92	92
\$50,000+	46	46	39	47	46	36	67	47	67	68	76	81	80	76

Evaluations of Medical Care and Insurance Coverage

The quality of medical care ratings for TennCare remain high, with about two-thirds of heads of households rating their care “good” or “excellent” and almost 90 percent rating their children’s care “good” or “excellent.” Tennesseans’ overall perception of the quality of care they and their children have been receiving has been relatively stable in recent years but is up considerably since 1995. Overall perception of children’s healthcare increased from 2009 to 2010, with 46 percent giving children’s medical care an “excellent” rating in 2010. Ratings of medical care quality for the TennCare head of household population gradually increased from TennCare’s inception in 1994 to 2005; however, in 2010, the perceived medical care quality for TennCare heads of households dropped from the 2009 high of 29 percent to 24 percent, the same as the 2008 level; 41 percent rate their quality as “good,” while 29 percent rate their quality as “fair.” Perceptions of quality of medical care for their children remain high in 2010, with only 12 percent rating the quality of care as “fair” or “poor” and 43 percent rating the quality as “excellent.”

Table 4: Quality of Medical Care Received by Heads of Households (1996–2010) (Percent)

All Heads of Households	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Excellent	20	22	22	23	21	22	22	25	25	26	29	28	28	28	32	32
Good	51	52	51	52	50	50	48	51	50	50	48	48	47	46	46	46
Fair	23	22	22	22	22	21	23	19	19	18	17	18	18	18	16	16
Poor	6	4	5	3	7	7	7	5	6	6	6	7	7	8	6	6
Medicaid/TennCare	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Excellent	14	15	19	18	18	18	20	21	21	23	28	21	23	24	29	24
Good	48	49	47	42	47	43	41	46	45	47	40	43	44	43	47	41
Fair	28	28	26	31	25	27	28	24	25	23	26	27	27	25	18	29
Poor	10	8	8	9	10	12	11	9	9	7	6	10	6	8	6	6

Table 5: Quality of Medical Care Received by Children of Heads of Households (1996–2010) (Percent)

All Heads of Households	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Excellent	28	30	30	30	30	33	30	34	36	36	38	39	35	34	39	46
Good	51	50	50	51	51	48	50	51	48	48	49	47	48	51	49	43
Fair	17	17	15	15	15	15	16	12	13	12	9	11	12	11	9	9
Poor	4	3	5	4	4	4	4	4	3	4	4	3	4	4	3	3
Medicaid/TennCare	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Excellent	27	21	27	27	29	25	24	28	32	31	34	39	30	32	41	43
Good	44	55	48	49	49	47	50	48	45	47	49	38	49	49	48	45
Fair	21	19	19	18	18	20	19	17	17	16	12	17	19	14	8	6
Poor	8	6	6	7	4	8	7	7	6	5	5	6	2	6	3	6

Satisfaction with Quality of Care Received from TennCare

TennCare recipients continue to show high levels of satisfaction with quality of care received from TennCare (Table 6), and the 94 percent expressing satisfaction (responding “somewhat satisfied” or “very satisfied”) represents the highest level of satisfaction since TennCare’s inception. The previous high, in 2005, was 93 percent. This new level exceeds the satisfaction reported by Medicaid recipients in 1993 by 12 percent and is considerably higher than when TennCare began in 1994.

Table 6: Percent Indicating Satisfaction with TennCare (1993–2010) (Percent)

1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
82	61	75	82	81	83	81	78	79	85	83	90
2005	2006	2007	2008	2009	2010						
93	87	90	89	92	94						

Behavior Relevant to Medical Care

Each respondent was asked a series of questions regarding his or her behavior when seeking medical care (Table 7). The proportion of TennCare heads of households initially seeking care at hospital emergency rooms in 2010 is higher than it was in 2009, increasing from 4 percent to 7 percent. This is the highest it has been since 2006 but is generally in the range of responses during the 2000s. A 3 percent increase also occurred in the number of TennCare parents who seek initial medical care for their children from hospitals (Table 8). The share of TennCare/Medicaid adults initially seeking care at a doctor's office is 77 percent, while it is 82 percent for all heads of households. The decrease in Medicaid/TennCare recipients' visits to the doctor's office, a 6 percent decrease from 2009, has resulted in comparable increases in initial clinic and hospital visits. The share of Medicaid/TennCare parents initially seeking medical care at a doctor's office for their children has also decreased in 2010, from 85 percent in 2009 to 82 percent in 2010. The proportion initially seeking care at hospitals has been reduced by more than one-third since 1994 for heads of household and has been reduced by three-quarters for children on TennCare in 1994.

Table 7: Head of Household: Medical Facilities Used When Medical Care Initially Sought (1995–2010) (Percent)

All Heads of Households	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Doctor's Office	80	82	81	81	81	83	81	84	85	85	83	83	83	83	83	82
Clinic	11	11	12	12	12	11	12	10	9	9	11	11	11	11	12	12
Hospital	7	6	6	6	6	5	6	5	5	5	5	5	4	4	4	4
Other	1	1	2	1	1	1	2	1	1	1	1	1	2	2	2	2
Medicaid/TennCare	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Doctor's Office	71	73	74	74	78	76	78	77	80	77	78	76	79	80	83	77
Clinic	18	18	17	19	15	17	14	15	12	14	14	15	15	13	12	15
Hospital	10	9	7	6	6	6	7	7	7	8	7	7	4	6	4	7
Other	1	0	1	1	1	1	2	1	1	1	1	1	2	<1	1	<1

Table 8: Children: Medical Facilities Used When Medical Care Initially Sought (1995–2010) (Percent)

All Heads of Households	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Doctor's Office	81	82	81	83	81	84	81	85	85	85	86	87	88	88	86	87
Clinic	12	13	13	13	12	12	14	10	9	11	10	10	9	10	10	11
Hospital	5	5	5	4	6	3	4	4	5	3	3	3	2	2	3	2
Other	2	1	1	1	1	1	1	2	1	1	1	<1	1	<1	<1	<1
Medicaid/TennCare	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Doctor's Office	74	68	75	76	79	76	77	77	80	78	79	82	83	83	85	82
Clinic	18	24	17	18	15	17	16	17	12	16	13	12	14	14	15	15
Hospital	7	8	7	5	5	6	7	5	7	6	8	6	3	3	0	3
Other	1	0	1	1	1	1	1	1	1	0	0	1	0	<1	0	0

A similar change has occurred over the past decade in the frequency of visits to physicians. TennCare/Medicaid recipients continue to see physicians on a more frequent basis than the average Tennessee household. Eighty-two percent of TennCare heads of households see a physician at least every few months (Table 9), as do 67 percent of TennCare children (Table 10). This represents a slight decrease for children, where 69 percent reported they visited a doctor at least every few months in 2009; the figure decreased from 85 percent for adults in 2009 to 82 percent in 2010. Only 48 percent of adults saw a physician this often prior to TennCare’s inception in 1994. The increase in visits is much less pronounced for children than for TennCare adults. More frequent usage of physicians may indicate increased preventative medical care through annual visits but may also reflect that the population of TennCare adults is one that has greater need for medical services.

Table 9: Frequency of Visits to Doctor for Head of Household (1996–2010) (Percent)

All Heads of Households	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Weekly	2	2	2	2	2	3	2	3	3	2	2	2	3	2	2
Monthly	8	10	11	12	11	13	11	11	11	11	12	13	12	12	11
Every Few Months	36	39	39	41	39	41	41	42	44	46	44	46	46	49	45
Yearly	31	27	27	25	27	25	27	27	26	26	25	23	22	22	24
Rarely	23	22	21	20	21	19	19	17	16	15	18	16	17	15	18
Medicaid/TennCare	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Weekly	5	4	4	5	5	7	6	8	7	6	7	8	7	6	6
Monthly	20	24	21	25	26	24	24	29	28	30	30	33	33	30	29
Every Few Months	37	39	44	45	41	44	44	42	46	46	45	45	47	51	47
Yearly	21	14	14	13	13	12	14	10	9	11	8	6	8	7	7
Rarely	18	19	19	12	15	13	13	12	10	7	10	8	4	6	12

Table 10: Frequency of Visits to Doctor for Children (1996–2010) (Percent)

All Heads of Households	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Weekly	2	2	2	2	2	2	2	2	1	2	1	2	2	1	2
Monthly	12	12	11	11	11	11	11	12	10	11	10	11	9	9	9
Every Few Months	55	52	55	54	52	52	51	52	53	53	52	50	50	51	51
Yearly	21	23	22	24	24	24	23	26	26	23	28	27	29	31	29
Rarely	10	12	10	9	11	11	13	8	10	11	10	10	10	8	9
Medicaid/TennCare	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Weekly	4	3	3	4	3	3	2	4	3	2	2	4	1	1	3
Monthly	19	15	12	14	16	14	17	17	14	21	16	14	16	18	13
Every Few Months	58	54	57	56	53	56	56	53	53	49	51	54	55	50	51
Yearly	12	16	19	18	18	16	17	17	22	17	23	16	21	27	24
Rarely	7	12	9	8	10	11	9	8	9	11	8	11	7	4	9

Appointments

The time required to obtain an appointment is comparable to the 2009 findings, with about the same percentages reporting a wait of a week. The percent of TennCare recipients obtaining a doctor appointment on the same day that the request is made or the next day, however, decreased to 39 percent in 2010. The number reporting having to wait longer than three weeks is 17 percent, which is lower than last year (Table 11). TennCare recipients are waiting 65 minutes on average to see their physicians once they reach the office (Table 12). This is an increase from the 2009 time of 52 minutes, and is slightly higher than previous wait times in the TennCare era, excluding the high in 2006.

Table 11: Time between Attempt to Make Appointment and First Availability of Appointment: TennCare Heads of Household (1996–2010) (Percent)

When you last made an appointment to see a primary care physician for an illness in the last 12 months, how soon was the first appointment available?	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Same day	32	29	26	23	22	19	22	20	20	21	22	22	21	18	20
Next day	27	17	21	18	19	15	18	16	17	17	27	20	17	23	19
1 week	23	28	27	27	31	31	29	29	33	31	22	30	27	25	29
2 weeks	8	11	10	12	11	12	9	11	11	10	10	8	10	9	11
3 weeks	5	5	4	5	4	5	5	5	3	5	4	4	4	4	4
Over 3 weeks	5	11	11	15	15	18	18	18	15	16	16	15	22	20	17

Table 12: Wait for Appointments: TennCare Heads of Household (1996–2010) (Minutes)

	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Number of minutes wait past scheduled appointment time?	52	52	49	52	64	61	64	50	63	57	80	57	50	52	65
Number of minutes to travel to physician's office?	22	21	21	22	24	23	23	22	27	32	30	21	25	24	31

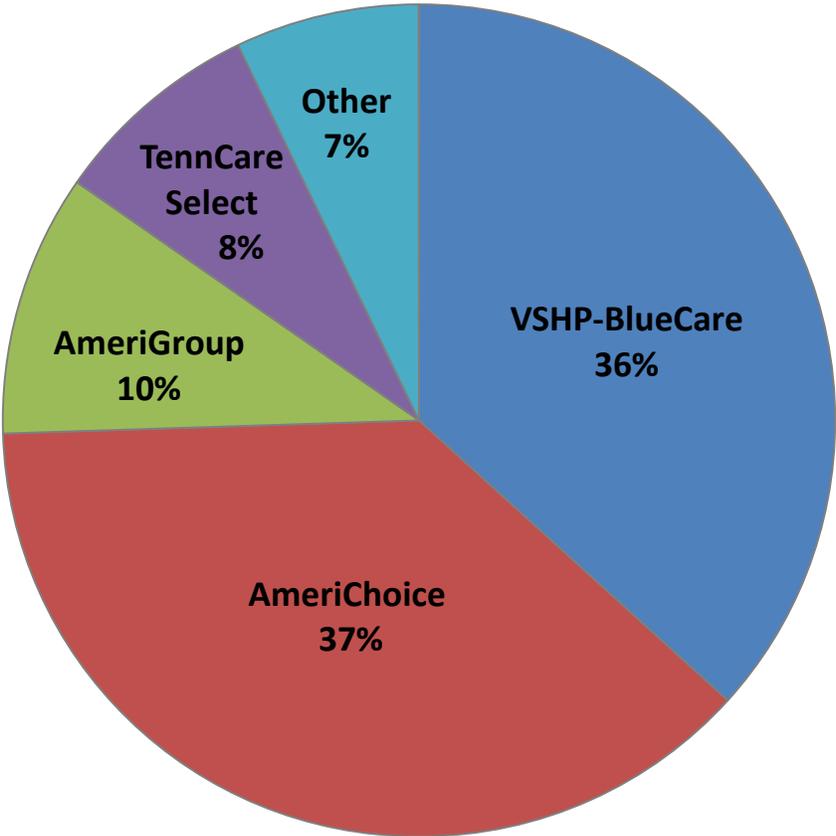
TennCare Providers

The largest number of TennCare recipients (37 percent) report being signed up with AmeriChoice as their TennCare MCO. Volunteer State Health Plan (BlueCare) also accounts for a large percentage of the TennCare recipients (36 percent). Amerigroup accounts for another 10 percent, while 8 percent are represented by TennCare Select. Seven percent report being represented by other providers (Table 13).

Table 13: Company Managing TennCare Plan (1997–2010) (Percent)*

What company manages your TennCare plan?	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Blue Cross / Blue Shield	48	48	50	50	50	40	42	39	36	31	35	37		
VSHP - BlueCare													41	36
AmeriChoice													26	37
AmeriGroup													8	10
Health Net	7	8	2	1										
John Deere (Heritage)	2	3	4	5	4	7	7	6	9	6	7	4	1	
TLC (Memphis Managed Care)	4	4	4	3	5	12	12	13	13	11	7	9	2	
Phoenix (Advantage Care)	4	6	13	8										
Preferred Health Partner	8	6	7	7	4	8	12	10	10	11	8	6	2	
Prudential (Prudential)	0	1	1	1										
Access Med Plus	19	18	20	22	23	5	3	1	1		2	3	<1	
Total Health Plus (THP)	1	1	0	0										
Vanderbilt Health Plan	1	0	0	1	1	0	1	1	1	1	<1			
Omnicare (Affordable)	3	3	4	2	2	7	6		6	9	7	5	2	
Xantus Health Plan				9	8	9	10				<1			
Universal Care					2	9	4	1		1	1	1		
Better Health Plans					1	3	4	2	2	3	1	1	<1	
TennCare Select								21	21	18	6	7	10	8
Premier Behavioral								1		1		<1		
Tennessee Behavioral								1			<1			
VHP Community Care										1		<1		
Windsor Health Plan of TN, Inc.											<1	<1		
Other	0	2	1	1				4	1	6	22	27	7	7

Figure 2: Company Managing TennCare Plan (2010)



In 2010, receipt of information (enrollment card, grievance form, a list of rights and responsibilities, and information on filing grievances) remained nearly the same, but a few categories increased or decreased. Seventy-four percent recall receiving an enrollment card, down from last year's 77 percent (Table 14); 24 percent of respondents indicated that they changed providers, the same level as 2009. Respondents reported receiving a list of rights and responsibilities in slightly less proportion than in 2009, while reporting they receive the name of their assigned provider in the same proportion as 2009. One large year-to-year change was that 35 percent of respondents indicated that they had received a ballot to change providers. This figure is up from last year's 32 percent. The preferred method for receiving information about TennCare remains through the mail, with 72 percent reporting this is the best way they obtain TennCare information (Table 15).

Table 14: Households Receiving TennCare Information for Providers (1996–2010) (Percent)

Please indicate whether or not you or anyone in your household has received each of the following regarding TennCare	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
An enrollment card	71	70	77	76	74	65	70	65	74	70	73	78	78	77	74
A grievance form	33	28	41	39	33	32	34	35	33	24	42	44	40	40	39
Information on filing grievances	35	31	43	44	36	46	39	40	40	26	41	46	41	41	43
A list of rights and responsibilities	66	63	73	70	66	63	70	70	75	71	78	77	73	75	74
Name of provider to whom assigned						72	79	76	81	79	82	81	79	79	79
Ballot to change provider						64	43	29	31	21	25	40	28	32	35
Changed providers						31	32	18	19	32	17	25	27	24	24

Table 15: Best Way to Get Information about TennCare (2002–2010) (Percent)

	2002	2003	2004	2005	2006	2007	2008	2009	2010
Mail	67	75	73	75	75	72	73	71	72
Doctor	7	5	5	6	8	8	5	6	5
Phone	11	10	9	9	5	8	11	10	11
Handbook	8	6	4	4	3	6	6	7	5
Drug Store	1	0	1	1	2	1	1	1	<1
Friends	2	0	1	0	1	1	<1	1	1
TV	0	1	1	1	1	0	1	<1	<1
Paper	0	0	0	0	0	0	<1	1	<1
Other	4	3	3	4	5	4	3	3	4

Conclusion

The survey reveals that from the perspective of the recipients, the TennCare program continues to work as expected. Since the beginning of TennCare, its recipients have continued to see physicians more often, visit emergency rooms less for routine care, and are able to see a physician without excessive travel or waiting time. Tennessee's 9.9 percent rate of uninsured in 2010 is a slight decrease from 10 percent in 2009, and it is below the highest uninsured rate of 10.7 percent set in 2006. Still, the rate is substantially higher than recent years past; just six years prior the rate was 6.6 percent. The total uninsured population is approximately 618,445, including about 57,912 children, a slight increase from last year's number of 54,759 uninsured children.

In 2010, recipients expressed the highest overall satisfaction with TennCare since its existence, with a 2 percent increase over the proportion expressing satisfaction in 2009. The satisfaction rate remains dramatically higher (33 percentage points) than the rate in the program's first year. Additionally, TennCare recipients' experience with medical care remains positive, with the perceived quality of TennCare householder's children's medical care increasing substantially. TennCare continues to receive positive feedback from its recipients, indicating the program is providing health care in a satisfactory manner and up to the expectations of those it serves.