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Med One To One is a Med One Group publication consisting of editorials, a message from our owners, testimonials, information regarding our solutions, employee spotlights, and more. Quarterly issues include the most recent and exciting news from Med One. If you are reading this edition of Med One To One, you are a part of our team. Med One owes all our success to our valued customers and supporters.

www.medonegroup.com

med one

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Customer Service

A priority, or thing of the past?



I recently had two experiences that made me ask... "Are companies still concerned with creating a high level of customer service?" I know it is something we aspire for at Med One. Maybe working here has created an unrealistic expectation of what customer service should be. I really do wonder if high levels of customer service, in general, are something that will continue or slowly become a thing of the past.

My first example provides strong evidence that there are still companies out there who really value their customers and want to make sure they are happy. After all, it is best to retain customers and build loyal relationships versus constantly trying to find new customers. In this example, my daughter received a pair of shoes as a Christmas present. She was very excited as this was something she really wanted. When she put the shoes on for the first time, a small strap broke making it very difficult to tie the shoe. Needless to say, she was pretty disappointed.

All that disappointment quickly went away when she contacted the company who sold the shoes – Shoetopia through www.jane.com. Without question, they apologized and said they would immediately ship out a new pair of shoes. They said she didn't need to return the broken pair and again apologized for any inconvenience. This was all done after a simple email message with a picture of the broken shoe. I was blown away. First, by the quick response during the holidays, and second the fact that they didn't make any excuses. They simply provided a quick solution. My daughter was very happy and jane.com/shoetopia now has a very loyal customer. The best part is she continues to share this story and is helping promote the company in a very positive way.

The second example is one I would consider negative in the sense of customer service. It may be what is right for the company, but definitely not a direction I would take. On December 2nd, our Kenmore Elite refrigerator broke. This would

be the 5th major issue with our fridge in less than three years. Fortunately, we purchased the Master Protection Plan. We called and they did a quick evaluation over the phone and determined that the main board had gone out. They scheduled to send a technician out on December 7th to verify. At that appointment, the technician verified the issue and then explained the part would need to be ordered. So, he left and we waited to hear when the repair would be made. Finally, on December 26th, the part arrived and the next available appointment to come install it would be January 5th. Just 36 days after the fridge broke (ps. It isn't fun going through the holidays without a fridge – especially when you have 65 people attending a Christmas party at your home).

With the new part installed we thought we were good to go. Unfortunately, that wasn't the case. We called back again on the 6th reporting that our fridge was still broken. We were told that the soonest they could get someone out to check was January 15th. So, we continued to wait. On this visit it was determined that the main board was not actually the problem, and that it could be a leak in the refrigerant system, or the compressor– he couldn't really tell. This was something he couldn't repair and will require another technician to come out on January 23rd to confirm this is the issue and order the parts to make the repair.

January 23rd. The problems are confirmed and now we wait for parts to arrive and have a new repair date of February 8th.

January 29th, we get a call saying the parts are on back-order and won't ship from Korea until February 17th. We can call after the 25th and – assuming the parts arrive - schedule a new appointment. Needless to say, we were very frustrated. After a few days, I made another call to the customer service department – at this point I had their number on speed dial. I again expressed my frustration about the entire situation and now we were having to wait again for parts that may or may not fix the problem. The customer service person agreed, saying the whole situation was handled poorly and agreed the best solution was a new fridge. We were finally authorized to get a new fridge and on February 9th, we were up and running.

I think it is safe to say, my wife and I will never purchase a Kenmore product again. Which is sad because we have always had Kenmore products in our homes. We will also never purchase from Sears

and we will do all we can to prevent anyone we know from going through the hassle we have gone through. We have both expressed our displeasure through several social media sites and actually had quite a few people follow our daily updates. It has been a series of frustrating phone calls with no one ever being able to give an answer.

This is a situation that could have been resolved by simply taking the time to do things right the first time. In this case, they knew on our original call back on December 2nd, that there were several units with this same issue. They knew the fridge had a history of problems. They knew the parts were never going to arrive and they were simply going through their "process" of eliminating all possible scenarios before finally approving the new fridge. Seventy days later, the only thing they eliminated was a customer.

"Med One may not be perfect, but we are trying to be perfect in our effort to improve and provide the highest level of customer service."

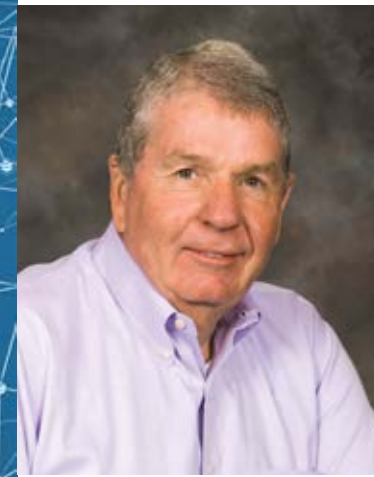
I know for every customer who has a bad experience, there are several who have had a positive experience, and it is usually a case by case situation. I look at companies like Med One, *Shoetopia* and *jane.com* – along with several others – who not only claim they care about their customers but, take measures to make sure the customer is taken care of. Med One may not be perfect, but we are trying to be perfect in our effort to improve and provide the highest level of customer service. It makes me sad that there are companies out there who simply don't give as much concern or focus on creating loyal customers and rely on simply acquiring new customers. In my opinion, those are the companies who will soon find themselves on the short end of the stick.

I would be curious to know if you have recently had a positive or negative experience with a company that you would be willing to share for a follow up story on customer service. If so, please send your story to me via email – ttait@medonegroup.com.

New Dimensions

LETTER FROM THE OWNERS

WRITTEN BY: LARRY STEVENS



When we opened the doors of Med One in April of 1991, we believed we had a simple strategy to offer hospitals a better way to acquire equipment through the use of equipment leasing.

Leasing was then as it is now, a standard way for businesses to acquire the use of equipment and because of significant changes that had been enacted as it relates to Medicare reimbursement policy, hospitals were beginning to embrace this tool in their business philosophies as well.

Then as now, our approach to equipment leasing was built upon three significant pillars.

- Creativity
- Simplicity
- Responsiveness

Our thought process back then was that since we were going to concentrate on a single type of lessee, and be somewhat selective in the type of equipment we were going to lease, we could remove a lot of the barriers that existed in our industry and simplify the process beyond what anyone could have imagined. Some of the innovations that we introduced to our prospective customer base included:

1. We did away with credit applications. Our belief was that if we could establish that we were dealing with a legitimate acute care hospital with an established track record in business – then we didn't need to require our customers to fill out a form to prove to us that they "qualified."

2. We eliminated doing credit checks, and we established an automatic credit approval policy for acute care hospitals. This allowed us the ability to provide unqualified lease approvals in a matter of minutes, rather than a matter of days.

"For the first time ever,
we have embarked
upon the course of
taking our leasing story
directly to the market."



- 3. We substantially trimmed our lease agreement by eliminating many redundant clauses, making our agreement language more user friendly. We also simplified the remaining clauses of the document.
- 4. We eliminated many of the ancillary back up documents that were (and continue to be) required as part of a traditional lease documentation package.
- 5. We instituted "purchase order only" leases, with no lease agreement to sign - for certain types of equipment.
- 6. We integrated the concept of short term rental with our leasing programs and introduced the Equity Rental program which offers our customers the ability to obtain some types of new equipment with the ease and flexibility of rental, combined with the ability to allow our customers to absolutely control their rental dollars by gaining equity credits toward the eventual purchase of the equipment.

We have always felt that we have created a winning strategy and over the years we gained significant acceptance and received numerous accolades for our Creativity, Simplicity and Responsiveness. On many occasions we have had new customers ask incredulously - "Is this is really all I have to sign?" We even had the CEO of a major US hospital reach out to us and said, "if your story ever gets out no one should ever want to lease equipment from anyone else except Med One."

From the beginning days of Med One, and for most of our history, our emphasis has been placed on working with the manufacturers who produce and sell moveable medical equipment to acute care hospitals. Our sales efforts were focused directly upon serving, supporting, training, and helping an impressive group of equipment vendors who saw the value of using Med One to help their customers acquire their equipment. Virtually all our

sales efforts have been directed toward our equipment vendors and convincing that segment of the market to enhance and increase their sales through using what we have to offer.

This strategic business plan has served us well for 26 years. We have been able to work with some of the world's most impressive equipment manufacturers. We have seen our lease business flourish and grow to impressive heights. However, always in the back of our minds was the thought that we needed to develop the capability to tell our story directly to the market, so that we didn't have to rely upon others to promote our business.

In recent years, we have developed the capability to "speak directly" to our market in various other segments of our business. Our folks in the equipment sales division have always "told their own story to the market." We have seen this division take hold and progress since its inception. Because of this experience we are confident in being able to look to our equipment sales division to develop as a major contributor to Med One's total top line revenue in the future.

Our rental division definitely "tells their own story to the market." In the areas where our distribution centers are located, we have sales reps, drivers, customer service reps, and many others who have direct and almost daily contact with our customers and prospective customers. At customer locations, our trucks are regularly coming and going to deliver or pick up equipment. Our sales reps and customer service reps are in the hospitals to assess needs, as well as our service, and to ensure that our rental relationships are strong and long lasting.

Our leasing business, however, has largely remained a vendor focused service business. Opportunities to "tell our own story" have been limited at best. That being

said, leasing is the preponderance of what we do, and we have been very successful operating in the "world of vendors." Our leasing division is our most seasoned and mature entity, it contributes the bulk of our revenue and profitability. We have lease relationships with over 2,500 different hospitals - our customer base comprises 40% of the hospitals in the United States. Still, we often only have a single transaction with any given hospital, and we have relied upon someone else's (Vendor) sales people to bring the opportunities to us.

In 2016 (25 years after starting the business) we launched a major effort to fortify our business and sales strategy for Med One Capital Funding - our leasing entity. For the first time ever, we have embarked upon the course of taking our leasing story directly to the market. Our efforts are predictably modest to begin with. We have established well-seasoned and qualified professionals to represent our interests in key areas of the country where we have a strong concentration of existing business, and significant opportunity to attract new leasing customers.



Originally from Eastern Pennsylvania, Brian Nappi lives in the northern part of the San Diego area. Brian works with present customers and prospective customers throughout California. He has traveled all over the world and has worked in many different industries including capital equipment sales in the hospital space. He enjoys riding dirt bikes, beach volleyball, skiing, and many other outdoor activities.



Al Mugno is located in Long Island, New York, and covers the Northeast United States for Med One. He has an extensive background of selling capital equipment into hospitals in New York, and values greatly the relationships he has developed over the years

during his time at Alaris, and CareFusion (now Becton Dickinson). Al's family is his #1 priority and much of his non-work time is spent with his sons who play hockey and baseball at a high level.



Amy Vizanko headquarters in Jacksonville, Florida, and covers the Southeast United States. Originally from Minnesota, Amy spent several years representing CareFusion (BD) in North Florida and found great success connecting with customers based on

her biomedical engineering background. Her past customer relationships developed at CareFusion are paving the way for early success as she is now reconnecting with many people in Florida, Georgia, and South Carolina.

We have very high expectations that these folks will become "trailblazers" for Med One and help us to establish a strong capability to better control our own destiny and chart our own course into the future. We are extremely proud of the record that we have established in the leasing industry and the outstanding lease portfolio we have created over the past 27 years. As I stated above, we have leased equipment directly to over 40% of the hospitals in the US. We are among the largest independent leasing companies in the United States. We believe that we have been able to create a unique and attractive offering of leasing products and programs that provide real and long-term benefits for our customers. We are confident that as we concentrate on telling our story more proactively and more directly to our prospective customers, our company will grow and reach heights that we never would have dreamed of.

This is a change that has been a long time coming to pass. As a management group we have debated and discussed this issue for several years. As a company, we are committed to this change and we believe that it will have a dramatic impact in the years to come.

I recently read an article that discussed some of the worlds most recognized and successful companies and analyzed fundamental strategy changes they have had to make. The take away from the article was this:

"The lesson is that changes in business strategies were not incidental footnotes in the histories of these businesses. Rather, in each case, the changes that were made unlocked new dimensions of revenue and profitability - heights that would never have been reached by staying the course. Making such changes requires both the foresight to know that existing strategies are ill-suited for future opportunities and the discipline to enact fundamental shifts in corporate focus."

I am not of a mind to say that our existing strategy has been ill-suited for future opportunities, nor that we must make fundamental changes to save our company. But this new initiative feels right to us. We are thrilled with the quality of the people we've been able to attract to help us lead this change. We are hopeful that as a company we can execute this strategy in a way that will benefit Med One and its present and future employees in ways that today we can't even imagine.

Changed FOR GOOD



I recently heard someone say that Med One is a little different now, that our story has changed, and was talking about this in, perhaps not a completely positive manner, I am here to *COMPLETELY AGREE* that some things have changed and they have changed for the better. The changes that have been made at Med One are extremely positive. We have adapted and as a niche oriented entity it is extremely significant that Med One stays nimble, adapts to change, and most importantly, that we don't just rest on our laurels, but instead move forward with confidence and do things that will make Med One an improved company. By continuing to do this we will increase our customer service to our wonderful customer base of over 2,000 different medical entities. We recently have grown to over 100 employees, when I began my employment here nearly 11 years ago, I was employee #37.



WRITTEN BY: JEFF EASTON

For the last 27 years, since 1991, Med One has done a good job of demonstrating how we bring value to our market place, what makes us important to the market place, and what has allowed us to stay in the niche that has been created. I have now been with Med One for nearly 11 years and it has been a great experience. We have had all had challenges that each of us have had to face over the last 11 years, we here at Med One have decided to take what could be a time of uncertainty and to seek new opportunities to excel. We have decided to lift ourselves and others as well, by developing an attitude of optimism and refusing to remain in the realm of discouraging thoughts.

We have been able to adapt, understand the market, and what our vendor partners and customers need. We have developed NEW fantastic capital partners who allow us to do what we do best and that is "Making Medical Equipment Available." We have developed a rental capability with eight locations throughout the nation. We have become a much stronger company as we have recognized the value that we bring to the niche that we work in.

The first 27 years of Med One have been fantastic, we have gone from a company that started with just a few transactions on the books to one that now has thousands; a company that started by servicing just a couple of customers to a company that has and does service thousands and provides services with leasing, rental, services and repair; a company that started with only a couple of vendors to one that now does transactions with many different vendors with multiple core vendors; and a company that has true fantastic capital partner relationships.

The next 27 years and how we react will become even more important than the first 27 years as we will not be allowed to rest. We will continue to generate new transactions, develop new customer relationships and continue to improve our current customer relationships. We will continue to develop new vendor relationships and continue to fortify our existing vendor relationships, and to develop new capital partners as well as strengthen even more so our exiting capital partner relationships. Over the past few years we have evolved from a technological stand point as well. We have been able to handle our large increase of business over the past few years without any issues, as we have implemented new systems, processes, and key employees. In addition, we have already put in place the ability to even transact more business than we currently do without affecting the flow of our normal business process. We are now ready to just take advantage of economies of scale.

Med One has put and will continue to put key customer, vendor and capital partner relationships, internal personnel, systems, and processes in place to serve the market and niche that we work in.

As we have grown and increased our customer, vendor, and capital partner relationships we have become a stronger partner for everyone that we work with, this is advantageous for everyone. It is now more important than ever that Med One stay tuned-in to the market and what is needed by our customers and vendors so the next 27 years will be even more successful than the first 27 years.

With an emphasis in the medical industry Med One has an understanding of the specific challenges healthcare professionals face. The Med One philosophy is simple: determine and exceed the needs of our customers. With every deal, our focus is to provide for our customers' needs by helping them acquire equipment when they lack the funds to pay for it. Whether it's equipment financing or rental, equipment sales or services, Med One has solutions that work.

Equipment Financing

Creative financing options available with ability to customize for each specific customer.

Equipment Rentals

Peak need, long term, equity rental, and rent-to-own options available.

Equipment Sales

Off-lease inventory of pre-owned equipment and new equipment directly from leading manufacturers.

Equipment Service and Repair

Authorized service provided by our certified biomed team using OEM parts.

We are dedicated to our customers and vendors and to listening to them and working with them to become even more improved partners. I am so grateful to be part of a wonderful company that truly does care about all of our customers, vendors, capital partners, and employees. It is refreshing to come to work every day and it makes you want to work even more diligently to service the needs of all of those whom we have the privilege of working with. May the next 27 years be a time where Med One makes even a larger impact on the niche in which we service in "Making Medical Equipment Available."

"If you want something you've never had, then you've got to do something you've never done."

Trusted? OR Loved?



WRITTEN BY: ROBB STEVENS

UNDERSTANDING THE PITFALLS IN EQUIPMENT LEASING

Years ago, when I was working in a different capacity, the organization I was with had a motto: **“It is better to be trusted than to be loved.”** An immediate reaction to that might be to think: If you love someone, don’t you also trust them? That may be true, but if you think about it long enough, certainly you can identify people in your life that you love but don’t necessarily trust completely. Trust is not freely given and does not come in a moment, but over the course of time and is earned by continual credible actions. Trust generates respect, admiration, and appreciation. To be worthy of another’s trust is truly one of the highest aspirations anyone can have.

In our last edition, I introduced the notion that a trusted leasing partner can be a great advantage to those involved in equipment purchasing decisions. The same can be said of a sales person on the vendor side. As a sales person, it can be a tremendous benefit to have quick access to a trusted leasing professional that not only understands equipment financing, but in many cases already knows your customers! We have endeavored at Med One over the years to build a solid reputation based on reliability, responsiveness, creativity, and a solutions-minded approach to equipment leasing. In this process, we believe (and we hope) that our customers and vendor partners have also found Med One to be fair and honest in all our dealings as well.

As I’ve pointed before, an equipment lease of any size is a significant commitment for any organization. For all the benefits and advantages of equipment leasing, (of which we believe there are many) there can also be several unknowns and potential risks to be mindful of as the lease plays out. If you know and trust your lease provider, the risks are presumably reduced or at very least, known and accounted for. By knowing and trusting your lessor you are able to predict, manage and even control some of the variables and unknowns. This is a tremendous advantage to any entity that utilizes leasing on a regular basis. With all of potential advantages that come with leasing equipment, why wouldn’t you want the empowering assurance that your lessor of choice is worthy of your trust?

Med One’s objective in every situation is to win not just a single deal, but to win a customer for years to come! We believe strongly in the value that our industry can provide to consumers, so we seek to help customers experience that value in every way possible.

To gain trust in your lease provider warrants some level of awareness and understanding of potential pitfalls that exist in the leasing world. Whether or not your lessor of choice creates these pitfalls in their normal course of business can

and should have a considerable impact on how much you trust and utilize them in the future. A trusted leasing partner should at minimum, understand an organization’s needs and expectations and be ever-ready to present fair, honest leasing solutions to them. Beyond that, help can be provided in a variety of other ways too. Understanding the evaluation of lease pricing, structures, contract language, and the best use of financing solutions in an organization’s overall asset management strategy are key in tapping into the full value and power of equipment leasing solutions.

Some of the pitfalls in leasing are more obvious than others, but in one way or another, they will all cost a buyer more frustration, work, and ultimately money than they may have anticipated. Over the years we have come to realize that customers aren’t always aware of what these pitfalls are. The following are some of the more common ones to be aware of:

READ THE CONTRACT

In fairness, terms and conditions in any lease contract are intended to first protect the interests of the lessor. The assumption or at least the hope though, is that lease language also protects the customer and does not burden them with unforeseen costs and

obligations. When a lease payment is unrealistically low, it is good practice for a buyer to thoroughly review the lease document for potential hidden costs. If contract language is excessively wordy and/or ambiguous, there could very well be hidden costs lurking that an unsuspecting lessee may not catch. If there is unclear language, the buyer should not proceed without a good understanding of the meaning and intent of the contract language.

It is generally a good sign when a lessor is willing to discuss, explain and negotiate items within their agreement that the lessee may see as challenging, unclear or even risky. On the other hand, if a lessor is inflexible or unwilling/unable to give clarity to their contract terms, that may be a good time to seek a competitive quote from another source.

It is also good practice to negotiate the equipment price separately from the lease payments. If a buyer focuses first on getting the best purchase price from the equipment

supplier, they can then devote their attention to getting the best lease deal possible as a separate conversation. If the two conversations are blended, a supplier and lessor which may even be in cahoots, could take unfair advantage of a customer without them even realizing it.

ADDITIONAL FEES – BEYOND THE MONTHLY PAYMENT

Fees are commonplace in the consumer world. Often when we make purchases for things like sporting events or movies, there’s a small processing fee. Many airlines have baggage fees and hotels have tourist taxes or fees that are slapped on your hotel bill. Sometimes these fees are clearly stated and even expected, but other times they are revealed only when it’s too late to contest or they are simply part of the “price of admission.”

Fees are commonly accepted in many types of lending transactions from ATM fees to mortgages, business loans, and car leases. While this may be the case, fees are not as readily accepted in equipment lease transactions in some business sectors – especially coming from independent, non-bank entities.

If a lessor charges fees outside of the monthly payment, it can quickly become a nickel-and-dime way to enhance yield at a lessee’s expense. This becomes especially misleading and even

tilts the playing field against competitors if a lessor quotes a low payment / low rate that does not factor in additional fees they may bill the customer later. That scenario could easily result in a customer choosing the lease quote with the lowest payment when in reality, extra fees may make the low payment option the more expensive option in the long run.

While there may be nothing inherently wrong with this practice, it’s not exactly up front and certainly not customer friendly to charge additional money while at the same time selling a low-balled payment. Extra fees cost the customer additional money, but as yield enhancing devices for a lessor, they are intentionally left out of the monthly payment and do not impact the customer’s perceived interest rate.

FEES ABOVE AND BEYOND THE LEASE PAYMENT MAY INCLUDE:

Application Fee: This is a charge just for applying for a lease and may be as much as \$1,000! It’s quite possibly the most excessive charge a lessee could face. Application fees vary

“ TRUST IS BUILT OVER THE COURSE OF TIME AND IS EARNED BY CONTINUAL CREDIBLE ACTIONS. ”

widely and are charged solely for the purpose of reviewing and then processing a loan or lease application. This fee may also appear as a type of non-refundable deposit. Application fees are an unnecessary cost that a lessee should not have to pay.

Origination Fee: An upfront fee charged for processing a new loan or lease application, used as compensation for putting the deal in place. The amount is typically 1% of the total equipment cost.

Commitment Fee: A fee that is charged to compensate a lender or lessor for its commitment to lend.

UCC (Uniform Commercial Code) Filing Fee: A UCC-1 is a legal form that a lessor typically files to give legal notice to the state where the lessee resides that it has or may have an interest in an asset being used by a lessee. The filing cost varies by state and some lessors charge this nominal fee to the end user of the equipment.

Document Preparation Fee: This fee which can vary widely, is charged by some lenders and covers the expenses associated with the preparation of lease/loan documents.

Processing Fee: A fee of a few hundred dollars that covers the cost of processing a loan or lease.

While some or even all of these extra charges may not be enough to deter a customer from moving forward, why should a lessee be required to cover a lessor’s minor operational costs? When a lessor is chosen on the merits of quoted payment or rate only, it’s best for a buyer to confirm that all-in costs are genuinely low compared to other bids. A simple question like: “What other charges will be billed for after the lease commences?” can quickly level the playing field during the quoting phase of a lease conversation.

**DOWN PAYMENT OR LEASE DEPOSIT
(AKA FIRST/LAST PAYMENT DUE UP FRONT)**

Lease deposits are quite common in equipment leasing and are not necessarily a bad thing if done fairly and transparently – meaning the deposit is applied to or deducted from the principal. If a lease includes a lease deposit, a lessee will want to look closely at how it impacts their quoted rate. If the equivalent of two monthly payments are required as a down payment and the quoted rate is 5% for 60 months, the down payment will impact that 5% rate - with two payments due up-front, the actual rate becomes 5.25%. If the lease deposit is not counted as the first monthly lease payment, then the actual rate inflates to over 8 percent!

A lease deposit is not mandatory, especially if a customer’s credit is solid. It’s just a way to enhance a lessor’s up-front yield on a deal. If this is being required and more importantly if an

artificially low rate is hidden within it, a lessee should push back to see if it can be waived or seek an alternative solution.

ADVANCE VS. ARREARS BILLING AND LATE FEES

A buyer reads the lease contract and understands full-well the standard late fee. Not to worry though, if they always pay on time – it will never be an issue, right? That’s a safe assumption IF it’s well understood when billing will occur. If the lessor is billing in advance (payment owed the month prior to equipment use) vs. arrears (payment owed on the current month of equipment use), this small detail could easily trigger a late charge the lessee never saw coming. How flexible and/or forgiving is the lessor in the event of a late charge? Some are notoriously rigid and inflexible. So regardless of how unclear or unfair it may seem, the lessee will be stuck with a late charge. All leases have late fees generally around 5% of monthly payment, but some lessors are more fair, flexible, and forgiving on enforcement. Some companies impose late fees even if the customer is only one day late! A grace period and even a notification may be non-existent, and some late fees can be as high as 10 percent. Onerous late fees are another sneaky way for a low-rate lessor to recapture low yield at a lessee’s expense once the deal is signed.

EARLY PAYOFF PENALTIES

Many leasing companies have prepayment penalties. In a contract it may be referred to as a “yield maintenance clause.” Sometimes the prepayment penalty is a fixed percent of the total lease amount which decreases as the lease progresses (5% in year one, 4% in year two, etc....). The most excessive form of prepayment penalties is when a lessee is contractually required to pay the sum of all future payments in order to pay off the lease. This means the lessee must pay all future projected finance charges and principal payments even if they pay the lease off early! Prepayment penalties can inflate the total amount paid by 20-30 percent. Be very careful to understand early payoff penalties and be especially wary of “sum of all future payments” prepayment language in a lease contract. If a lease contract includes such language, an astute lessor will be better off to pay the lease through to the end of the term rather than incur unnecessary charges by paying it off early.

One of the most important roles of any organization is to help educate and inform its customers and potential customers. By so doing, our hope is that you will come to see Med One as a valuable partner to your own organization and worthy of your trust. We value greatly the business relationships we have established over the years and we continually seek to strengthen them through our own credible and ethical business practices. Our mission is to make equipment acquisitions as simple as possible and in fact, to make a lease transaction even easier than a cash purchase! If we do that, everybody wins. We welcome and appreciate input that can lead to better outcomes and a smoother process for all.



Press Release

Med One Group Appoints **Andy D’Ascenzo** to Board of Directors.

POSTED ON **MARCH 27th 2018**

Med One Group has expanded their Board of Directors by appointing Andy D’Ascenzo. His addition provides years of sales and management experience and is sure to be instrumental in the direction of the company.

Med One Group, a medical equipment leasing, rental, and sales company headquartered in Sandy, Utah welcomes Andy D’Ascenzo to the Board of Directors. The Med One Board of Directors is comprised of prominent local business leaders. This board helps in the governance of the company as it continues to develop and expand.

Mr. D’Ascenzo brings an extensive background in sales development and structure to Med One. He is currently serving as the Global Vice President of Sales at Qualcomm Life. At Qualcomm Life his responsibilities include: global sales strategy, sales process, training, and organizational design. During his career, Andy has specialized in helping sales teams effectively sell and succeed. Mr. D’Ascenzo has wide-ranging experience in the medical device industry with multiple executive sales positions within Alaris Medical Systems, Cardinal Health, CareFusion Corporation, and Becton Dickinson (BD).

With nearly 30 years in business, Med One has served over half of the nation’s acute care hospitals and many other healthcare facilities with leasing, rental, sales, and service solutions. As Med One’s presence has expanded across the country there have been new additions to the rental and leasing sales teams.

The ability for Med One to offer customized solutions to healthcare facilities in each part of the country continues to increase. With this growth of sales resources, the Board of Directors will continue to assist in the guidance and direction of the company.

The Board of Directors includes Med One President and CEO Larry R. Stevens, Med One Executive Vice President and Co-Owner Brent H. Allen, Robert C. Gross, Lane A. Summerhays, Randy C. Emery, Tricia L. Schumann, William J. Brady and Richard H. Madsen. Med One welcomes Mr. D’Ascenzo and looks forward to the great value and insight he will bring within his new responsibilities.



Setting Employees Up For Success

Med One Corporate Wellness 2018

WRITTEN BY: GRADY BROWN

A few years ago, movie goers were given free popcorn as part of an experiment. Both medium and large buckets were offered. Some of the popcorn was fresh and tasty, and some of the popcorn had been left out for 5 days, making it good and stale (although still safe to eat).

After the movie they were asked to return the containers with any uneaten popcorn and fill out a satisfaction survey. The leftover popcorn was then weighed. The movie goers that were given large buckets of fresh popcorn ate 43% more than those who were given medium containers. Interestingly, those provided with a large bucket of stale popcorn still ate 33.6% more than those who received medium buckets, even though their surveys described their popcorn experience as “eating styrofoam.”

Brian Wansink, a Cornell professor and the author of *Mindless Eating: Why We Eat More Than We Think*, ran this experiment in 2005. He’s replicated the results in similar experiments involving plate size, glass size, etc. He makes a strong case that eating the right amount is much less about will power and more about your situation.

With this principle in mind, senior leadership at Med One met during the fall of 2017 and thoroughly reviewed the existing employee benefit offering. With the aim of closing any gaps in overall employee coverage, a number of enhancements have been adopted and implemented in 2018. Med One employees now have insured protection in all aspect of their lives from the time they become eligible for benefits, through the life events of physical/mental health, disability, and even loss of life. In addition, the company has implemented new activity incentives which are designed to reward employees who are active on a regular basis. Also included in our corporate wellness goals are company paid annual meetings, regular company purchased lunches and treats, holiday celebrations, birthday and employment anniversary recognition, and paid time off.

By putting these benefits in close proximity, Med One employees are in a better position to make good choices and experience personal and thereby, organizational success. Operating a quality, well run business is a by-product of engaged, competent and motivated employees. Med One is doing business the right way.



SECURING YOUR Passwords

WRITTEN BY: NATE DAVIS

Do you often get frustrated because you don't remember your password? Has there been times when setting up a new password that you find you need to add a 'special character'? We have all been there, and it is frustrating.

Recently I was given a password protected file that needed to be unlocked. The owner of the file didn't know the password. They had an idea but couldn't seem to get it to work. It was critical that we figured out the password, so I started to search for some sort of brute force password utility. For those readers who don't know, a brute force password cracker is a computer program that uses a dictionary of words (generally around 40 million possible words) and tries plugging them in against the file. Generally, these password utilities replace “O's” with “0's”, and “L's” with “1's” to try all possibilities.

I found a brute force password cracker and began running it on the locked down file. The computer I was running it on had a very good video card, and as such, was able to try 30,000 passwords per second. So, within about 10 minutes it had found the correct password for the locked down file.

So this got me thinking, what makes a password secure against a dictionary or brute force attack? How secure are my passwords?

After doing some research I learned that it's the length of a password that makes it more secure, and not necessarily the complexity of the password. So for example, let's say we used the following password: “complex”

The site you enter it into says you need a capital letter, a lowercase letter, a symbol and a number. Ok, here we go: “**C0mpl3x!**” Pretty secure right? Turns out not so much.

With an 8-character password that was completely random, such as that example, it would take your standard computer at home 9 hours to figure it out. If you have a super computer, it could be found in minutes. Either way, your password is not as secure as you would think.

So, what can we do to make our passwords more secure? Turns out the easy solution would be adding more characters onto the password. For example: “**Itreallyiscomplex!1**”

It would take a computer 552 QUADRILLION YEARS to go through all the possible combinations to find your password. When working to protect your password, it's the length that matters. The longer your password is, the harder it is for a computer to figure it out.

One recommendation for creating a more secure password would be to pick 4 words that may or may not have meaning together. For example: “apple”, “pie”, “sky”, “in”, “the” Then put them together, “**Applepieinthesky!**”

Now you have an easy password to remember, and it would take 52 quadrillion years for a computer to crack your password.

So, when creating a new password, pick a few words and put them together in an order that has meaning to you. Then add a capital letter, a number and a symbol. You now have a password that will be easy to remember, but highly secure in protecting your valuable information.

If you want to know how long it will take for someone to crack your password, check these sites out...

<https://howsecureismypassword.net/>
<http://passfault.com/>



MED ONE SALES GROUP

Our Sales Team is comprised of experienced professionals for the specific purpose of Making Medical Equipment Available for hospitals and healthcare facilities across the U.S. We also work with the largest equipment manufacturers in the healthcare industry. Our sales reps are experts in equipment finance, rental and sales.

EQUIPMENT LEASING



Robb Stevens SVP / Director of Equipment Leasing

Robb Stevens began his career at Med One in January 2002 as part of the leasing sales group and was appointed as SVP and Director of Equipment Leasing in 2012. He has been a top contributor to lease originations, vendor development, creating strong relationships with customers, and successfully blending all aspects of the leasing sales process to maximize returns.



Doug Green VP / Manager of Equipment Lease Sales

Doug Green joined Med One in January 2002 as part of the leasing sales team. Prior to Med One, Doug worked in sales and business development at Boise Cascade and Franklin Covey. As Vice President of Leasing Sales, Doug leads a sales team dedicated to providing customer-friendly solutions that allow hospitals and healthcare providers a way to acquire the critical equipment they need.



Spence Tueller Account Manager / Equipment Leasing

Spence Tueller joined Med One as a Leasing Account Manager. He graduated from BYU with a degree in Health Science and Business Administration. Spence also has experience in lease sales as well as a background in general sales and business development.



Quin Campbell Account Manager / Equipment Leasing

Quin Campbell joined Med One as a Leasing Account Manager in 2015. He is a graduate of Utah State with a Bachelor's degree in Marketing. Quin brings 4 years of experience in management and enjoys being a problem solver and making sure customers have a great experience.



Amy Vizanko Equipment Finance Sales Executive

Amy Vizanko joins Med One as an Equipment Finance Sales Executive bringing 15+ years of medical sales knowledge. She graduated from Marquette University, in Milwaukee, Wisconsin with a bachelor's degree in biomedical engineering. Prior to her time at Med One she gained medical sales experience working with both Philips and CareFusion (now BD). She has extensive technical biomedical knowledge and understands the importance of solving complex customer problems. She enjoys being active, and spending time with her family.



Carter B. Allen SVP / Strategic Account Manager

Carter Allen has been in the financial industry for more than 20 years and has been with Med One Group since 2002. He appreciates the opportunity to provide solutions for hospitals that allow them to gain access to much needed equipment. Carter manages strategic accounts that are essential to Med One's success. His experience with healthcare leasing provides customers with valued solutions.



Tim Loftis Account Manager / Equipment Leasing

Tim Loftis joined Med One as a Leasing Account Manager with over 15 years in sales and business development with Morgan Stanley, JP Morgan Chase, and the Economic Development Corporation of Utah. Tim received his MBA from the University of Utah and a BA from Occidental College. He serves our partners in the medical community by providing effective solutions in a responsive and friendly manner.



Al Mugno Equipment Finance Sales Executive

Al joined Med One as an Equipment Finance Sales Executive in August 2017. Al graduated from Iona College with a Bachelor's Degree in Business Administration majoring in Marketing. Al has worked as a sales executive in the healthcare industry for close to 25 years. He has a background in infusion, barcoding, hospital information systems, radioscopy, ultrasound and vital signs monitors.



Brian Nappi Equipment Finance Sales Executive

Brian Nappi joins Med One bringing more than 20 years of experience in medical equipment sales, finance, and business development. He earned his bachelor's degree in Electrical Engineering from Texas A&M University. Brian understands that his customers are busy and prides himself on quietly listening and accurately defining their needs to create simple, satisfying solutions that allow them to quickly acquire the equipment needed. Brian enjoys developing friendly, supportive, long-standing, and fun relationships with his clients.

LEASING / RENTAL / SALES / SERVICE

EQUIPMENT RENTAL



Brad Johnson SVP / Equipment Rental

Brad Johnson is the Senior Vice President of Equipment Rental and has been working at Med One Group since 1994. He works closely with various companies and hospitals in the effort of achieving the highest utilization of our rental equipment as possible. Brad graduated from the University of Phoenix with a Bachelor's degree in Business and Accounting. He enjoys playing golf, fishing, hunting, and spending time with his family.



Brian Smiley Regional Sales Manager

Brian Smiley has been a part of the Med One team since 1999 and serves as a Regional Sales Manager focused on equipment rental. He received his Bachelor's degree in finance from the University of Utah and is also certified on the CareFusion and Smiths Medical equipment that Med One works with. He enjoys watching football and spending time with his family, especially coaching his sons at football and soccer.



Scott Wooster Territory Manager / Northern California

Scott Wooster has over 27 years of experience in medical equipment sales. His specialty is in equipment rentals, asset management, and medical device sales. Scott has also held management positions in several medical companies. Scott enjoys being a customer advocate, helping hospitals find solutions to fulfill their equipment needs, and helping facilities provide the best care possible.



Bryan Dabney Territory Manager / Georgia

Bryan Dabney has over 25 years of experience as a respiratory therapist and comes from Respironics where he worked as a Traveling Clinical Specialist and an Account Manager. Bryan was born in Livermore, California and lived there until advancing his schooling in Rexburg, Idaho at Ricks College. Bryan finished his schooling at Weber State University and graduated with his Bachelor's degree in Respiratory Therapy.



Mark Rogers Territory Manager / Southern California

Mark Rogers joined Med One in early 2017 as a Territory Sales Manager in Southern California. He has been in the healthcare industry for over 25 years. Mark has experience as a business owner manufacturing support surfaces, as well as an independent representative offering capital equipment to acute care facilities. In his spare time, Mark likes to ski in the winter and enjoys water sports in the summer.



Max Iturriaga Territory Manager / Orlando

Max joined Med One as a Client Services Executive in 2017. He started his career in the healthcare industry in 1995. He has background in many different positions including driver technician, trainer, sales executive, and president of a Freedom Medical distribution center. He enjoys knowing he is able to provide a better solution for his clients. Max enjoys spending time with his family, being involved in his church ministries and coaching/playing soccer.



Tom Lindsey SVP / Director of Rental Sales

Tom Lindsey has over 35 years of experience in the medical sales and rental industry, allowing him to successfully and professionally represent and value products, services, and manufacturers. He graduated from Brigham Young University with a degree in Microbiology, was a former EMT, and is CBEST certified. Tom has been involved with Med One since 2001 and continues to be a valuable part of the team.



Bill Varley Regional Sales Manager / West Coast

Bill Varley has over 30 years of experience in marketing and sales. Prior to working at Med One, he worked at several different medical device companies in management positions specializing in imaging applications, cardiology and infusion. Bill has worked all over the U.S. and internationally to provide better solutions to hospitals and healthcare facilities.



Mike Daniels Territory Manager / LA North

Mike Daniels has over 25 years experience in sales and marketing and started in the medical rental arena in 1985. Over his career, Mike has worked with everything from movable medical equipment to specialty support surfaces—both rentals and capital sales. During his off time, he enjoys spending time with his family, church, surfing, and any outdoor activity.



Ali Collins Territory Manager / LA South

Ali Collins joined the Med One team as a Territory Sales Manager in 2017. She graduated from the University of Southern California with a bachelor's degree in Communication/Public Relations/Marketing. Prior to Med One she worked for 12 years as an account manager in the merchant services industry. Ali enjoys playing soccer, boating, watching football and spending time with her family.



Jay Thorley Account Manager

Jay Thorley joined the Med One Team in 2015. Prior to Med One, Jay worked in the mortgage industry for 12 years. He enjoys working with customers to make sure that they have the equipment they need to care for their patients. Jay enjoys spending his time with his wife, son and two boxers.



Skip Horton Territory Manager / Carolinas

Skip Horton joined the Med One Rental Division as a Territory Sales Manager in June 2017. He brings over 30 years of experience in the Healthcare industry, with previous experience at Eli Lilly, DuPont, and BD. Skip graduated from East Carolina University with a bachelor's degree in life science. Skip enjoys working with his customers and making sure that they have the equipment they need to care for their patients.



Creativity.
Simplicity.
Responsiveness.

MED ONE SALES GROUP (CONTINUED)

EQUIPMENT SALES



Jeremy Quick National Sales Manager / Equipment Sales
Jeremy Quick joined Med One in August 2009 with an extensive background in sales and marketing. Jeremy's responsibilities include creating relationships in the non-acute care market to present Med One's products and services. This allows him to reach out to nursing schools, clinics, research facilities, and EMS companies. He enjoys helping these diverse customers acquire medical equipment to aid in the treatment or instruction of those in need.



Jordan Brown Account Manager / Equipment Sales
Jordan joined Med One in June 2015 as part of the equipment sales team. Jordan's market area covers nursing schools, EMS companies, and small hospitals. He is grateful for his customer relationships and the opportunity to help customers with their medical equipment needs. Jordan recently graduated from Utah State University, where he played football and received his Bachelor's degree in Business Marketing.

INTERNATIONAL SALES



Karen Raven VP / Director of International Sales
Karen Raven is the leader of the Med One International Sales Team and has worked in the healthcare industry for over 30 years. Karen has worked in various roles including Direct Sales, National Accounts, and Regional Director. Karen has a background in infusion, vital signs monitors, and enjoys working in healthcare because the products sold save lives every day.



Susan Mingle Director of International Sales
Susan Mingle joined Med One in 2017 as a Director of International Sales bringing 14 years of medical/capital sales experience, with previous experience at BD and Abbot Labs. Susan has a degree in both Education and Nursing. Her Nursing focus was Neonatal Intensive Care. She is passionate about Georgia Football and Gymnastics, and enjoys traveling and spending time with her family.

EQUIPMENT ACQUISITION

INFUSION, RESPIRATORY, MONITORING, OXIMETRY, IMAGING, THERAPY, BEDS, & MORE

LEASING & FINANCE

Capital Lease

Customer commits to a fixed term of rental payments. At the end of the rental term, customer owns the equipment with a \$1.00 buyout. There is no option to return this equipment. Rather, the point of this program is simply to finance the equipment over several months when cash is not available for immediate purchase. Completing a capital lease through Med One is just a matter of signing a simple agreement and issuing a purchase order. Both the signed document and the PO are then sent directly to Med One. This program is also known as a Rent-To-Own or a \$1.00 Buyout Lease.

Equity Rental

Simply issue a renewable purchase order (typically 1-12 months) to Med One, and the customer receives brand new equipment direct from the manufacturer. The customer can rent the equipment on a month to month basis or, if capital budget is allocated, purchase the equipment with 50% of the rental paid going toward the purchase price. There is no paperwork to sign, payments are made from the operating budget, and the customer may return the equipment at any time.

Operating Lease

Customer commits to make monthly payments based on an established term. When the term ends, the equipment can either be purchased based on its fair market value, rented for an additional 12 months, or returned to Med One Group with no further obligation. Completing an operating lease through Med One is just a matter of signing a simple agreement and issuing a purchase order. Both the signed document and the PO are then sent directly to Med One.

MAKE IT CUSTOM

Deferred Payments

Deferred payments allow purchase-minded customers to get their equipment now and pay for it later. Many deals are completed on the basis of a 12-month deferral.

Step-Up Payments

A step-up payment scenario provides a customer with a very low initial payment which increases over time to match the increased flow of revenue generated from the new technology.

RENTAL, SALES, & SERVICES

Equipment Rental

Our Equipment Rental division is an authorized rental dealer for Alaris Systems and Sigma Pumps. We carry equipment from leading manufacturers and our refurbished medical devices are patient-ready, include a full warranty, and are factory tested. Equipment Available to Rent: Pumps: (Infusion, Syringe, Feeding, Suction) Patient Monitors, Pulse Oximeters, Beds and Support Surfaces, SCDs, Ventilators, Bi-pap Machines and much more.

EACH SOLUTION OFFERED BY MED ONE CAN BE CUSTOMIZED TO BEST FIT THE NEEDS OF A SPECIFIC CUSTOMER. CONTACT US TODAY TO LEARN HOW WE CAN HELP YOUR FACILITY ACQUIRE THE EQUIPMENT IT NEEDS. OUR SIMPLE DOCUMENTATION, QUICK TURN AROUND TIME, AND CUSTOMER SERVICE HAVE NO COMPARISON WITHIN THE INDUSTRY.

Equipment Sales / Services

Our Equipment Services division includes full time OEM certified technicians who can meet the needs of a single department or the needs of your entire facility. We offer service repair options on a wide variety of equipment, including PM services. Additionally, we have patient ready refurbished equipment available for sale or rental that includes a warranty. Available Equipment: Infusion, Respiratory, Oximetry, Monitoring, Support Surfaces and more.

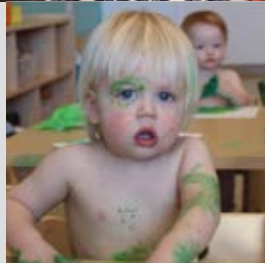
REQUEST A QUOTE AT
WWW.MEDONEGROUP.COM

PHONE 800.248.5882 EMAIL info@medonegroup.com



SPOTLIGHTS

EMPLOYEE



Karen Raven VP Director of International Sales

Although my family roots are from the Deep South, I was born in Maywood, California. I lived in California almost 40 years before taking a position in sales which took me to Alabama. I have two siblings; my half-sister, Carrie who lives in Oklahoma and my identical twin, Vicki who lives about two blocks from me. Even though jobs have taken us in different directions, my twin has always lived close.

I have worked since I was 15 years old. I worked in restaurants, corporate office jobs, medical sales, and several management positions. During my high school and college days I played in a city softball league and traveled from city to city in Los Angeles to play softball. At that time, I held the record for the longest softball throw by any girl at our school, so of course, I always played, pitcher, third base, left field or rover.

I was married in my twenties and I had one daughter, Heather, (34) who is now married and lives in Nashville, TN. My daughter and her husband both graduated with law degrees and have been married for over 10 years. Both are huge fans of Auburn and the New Orleans Saints. I have one grandson, Julian who will be turning three this July.

I remarried about 10 years ago to William (nicknamed-Reggie) who has one daughter, Dana, (42) who is a local realtor. She is married and lives in Henry County, GA. We have two adopted grandchildren, Hannah and Dylan who are from Russia; both are

turning sixteen this summer. Reggie and I enjoy traveling whenever we get the chance, some of our favorite places we have explored are: England, Paris, Italy, Spain, and the Caribbean Islands. We love to be on the lake in our boat where we can spend time relaxing and fishing.

I have been with Med One Group full time for six years this August. I really appreciate the opportunity to work here at Med One. It's a wonderful company with outstanding employees whom I work with every day. There is a sense of pride I get from being able to do a job that I am so passionate about, and see the customer express their appreciation for the service/product we provide.

Garrett Breistig Biomed Repair Technician in Rental Operations

I was born in Riverside California and have lived here my whole life. I am the oldest in my family and have a brother and a sister. I am happily married to my wife Kristi and we just celebrated our 16th anniversary on March 3rd. We have two kids, Zack who is 22 and recently graduated from Cal State, San Bernardino, and Marin, who is 17 and in her junior year of high school. We also have two dogs, Dexter and Luna. I enjoy cooking and spending time with my family and friends.

My hobbies include racing my drag boat, 'Trophy Wife' in the Lucas Oil Drag Boat Racing Series. This is something that I get to share with my father Gary Breistig, and six other close friends.

Michael Triplett Medical Equipment Delivery Driver

I was born in Bremerton, Washington. Growing up my Father was in the Navy, so we moved around a lot. I ended up living the longest in Honolulu, Hawaii. We were there for 10 years. Before that I lived in San Diego, California and Charleston, South Carolina. I have two children. My son Riley, who is turning 16 this year. He loves Magic the Gathering, Star Wars, listening to music, as well as writing short stories. My youngest, Zoey is currently 6 months old. She is growing up quickly and I look forward to seeing her every day.

I spend my spare time with my wife and daughter as much as possible. I love cooking so on the weekends I tend to cook a big meal for my family. Whenever I get some free time I tend to play video games on my laptop or have a date night with my wife Joi. I'm a big geek so I enjoy comic books, comic book movies, and science fiction and fantasy novels. My favorite book



is Hitchhikers Guide to the Galaxy. I also enjoy playing video games whenever I get a chance.

I work as a delivery driver here at Med One. I service the majority of Northern California. I do whatever I can to assist my coworkers with whatever is needed. Sometimes that means starting a few hours early to meet a delivery deadline, or working late to help out when a lot of deliveries come in. My favorite part of my job is that I get to help people in need. Delivering equipment to hospitals or care facilities, even something as minor as physical therapy equipment, makes a difference. I really enjoy the scenic views I get to see when I am driving early in the morning or towards the late night. A lot of the times I see some truly beautiful sights out there on the road. I feel it's very relaxing and helps at times with the stress of traffic.



Our race team 'Those Guys Racing' is well known in the sportsmen's ranks. 'Those Guys Racing' is a three-boat team with Crew Chief Gary Breistig, Dathan Calvert, Mike Noble, Greg Nicholson, Hugo McKinney and Darin Moilanen. My best elapsed time is 5.98 @ 138mph. We recently moved from the Top Eliminator class to Pro Eliminator, which is the second fastest class you can race in an open boat.

In November of 1999 I started my career in the medical field as a DSR with Universal Hospital Services. I left UHS in 2003 to take a Biomed job at Freedom Medical. In 2004 I saw an opportunity and formed a biomedical service company, Express Biomedical

Services. I took over the biomedical service contract for the Freedom Medical Anaheim office. During this time, I worked with Dathan Calvert and Tom Lindsey, and had the pleasure of working with Med One. In 2016 I was giving the opportunity to join Med One Group as a Biomed Technician. This was an easy decision because I had seen over time how well Med One takes care of their customers and employees. What I like most about my job is that I play a part in providing patients and their families with quality equipment when they need it most. In the Corona branch, our manger, Dathan, truly cares about the end user of our equipment. He leads us to be responsive and make the process as simple as possible for our customers and patients. One rule we live by in Southern California is, "sick babies shouldn't have to wait."

POPULATION HEALTH MANAGEMENT

WRITTEN BY: BRITTANI DAY



I was recently reading the article, *Our Top Health Care Predictions for 2018*, written by Rod Hochman - President and CEO at Providence St. Joseph Health. I was intrigued by the predictions made for the new year. The leaders at Providence St. Joseph Health expect that there will be no let-up in the massive changes in American health care in 2018. In this article they listed their top 9 health care predictions for the upcoming year, 2018. One that stood out was a greater focus on population health management.

What is Population Health Management?

The World Health Organization defines health as “the state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” Population health can be defined as the health outcomes of a group of individuals, including the distribution of such outcomes within the group. Population health connects health outcomes, patterns of health factors, and policies and interventions that link the outcomes and patterns of the overall health of the group.

People can be in multiple different health populations. For instance, you could be part of a specific population as an employee, a community member, a student, etc. Your demographic, social,

and economic status also play into what population you are a part of. One way you may see a greater focus on population health this year is through a wellness program being incorporated into your company’s benefits package. Another example you may see could be the addition of mental wellness classes added to the lineup of classes taught in your community center, or a homeless shelter being built in your city.

Why is Population Health Important?

Population health management is critical to the overall health of the U.S. Despite having one of the costliest medical care systems in the world, Americans are not particularly healthy. In the *Consensus Study Report, For the Public’s Health - The Role of Measurement in Action and Accountability*, it explains that “recent international comparisons show that life expectancy in the U.S. ranks 49th among all nations, and infant mortality rates are higher in the U.S. than in many far less

affluent nations. While these statistics are alarming, the bigger problem is that we do not know how to reverse this trend. Our lack of knowledge is due in large part to significant inadequacies in the health system for gathering, analyzing, and communicating health information about the different populations.”

Therefore, the purpose of putting a greater focus on population health in 2018 is to improve the gathering, analyzing, and communicating health information about the different populations throughout our country. In addition, these results should guide the collection of data for the future.

With a greater focus on population health this year, researchers and policy makers will be better able to prioritize the way they analyze and present population health data.

One company that is working to improve population health management is Lyft, the ridesharing company based in San Francisco, California. In a recent article by Med City News, Lyft Business Vice President Gyre Renwick, said “its deal with Allscripts (A company that provides physician practices, hospitals, and other healthcare providers with practice management and electronic health record technology.) will help to integrate its services with hospitals and physician practices to impact healthcare costs. ‘Over the next two years, we believe we can cut in half the 3.65 million Americans missing medical appointments due to transportation issues,’ he said.”

The article goes on to say that “A new partnership with Allscripts will help Lyft further integrate its service into electronic health records so that booking the car service can be a seamless part of making healthcare appointments. It also extends the company’s service to 45,000 physician practices, 180,000 physicians and 2,500 hospitals that use Allscripts EHR, according to an emailed company statement.” Lyft is actively working to improve health management for populations around the country.

Sources:

<https://www.nap.edu/catalog/13005/for-the-publics-health-the-role-of-measurement-in-action>

<https://www.prnewswire.com/news-releases/providence-st-joseph-healths-top-health-care-predictions-for-2018>

<http://www.countyhealthrankings.org/take-action-to-improve-health>

<http://www.improvingpopulationhealth.org/blog/what-is-population-health.html>

What Can You Do To Help Improve Population Health?

No one single group can be responsible for the improvement of population health. In his prediction about population health, Rod Hochman, President and CEO at Providence St. Joseph Health said “Health systems help entire communities stay healthy and population health management will soar in importance this year. For those providers truly committed to improving population health, we’ll see more partnerships that involve care management, housing (especially for the homeless), community services opportunities and increased access – particularly in ambulatory care, home, and virtual settings. More emphasis will also be placed on the measurable outcomes achieved through these important alliances.”

Anyone can take part in improving population health. Visit the Roadmaps section of countyhealthrankings.org to see what you can do to move your community’s health forward.





My Personal Career Path

WRITTEN BY: **IBBY SMITH STOFER**

Career advice can come from many different sources. My career has been fun and rewarding but has also had its share of challenges. Whether you have invested years in your field, are new to the workplace, or are considering changing fields, there is always room for career growth. The following is a summary of my career up to this point, it shows how crucial one particular skill was through my experience.

The choices I made in college demonstrate some of my earliest need to use this particular skill. I was determined to be a college counselor who could help others find their right path. My business administration major was a good foundation, however, going into counseling would require another year of study. Frankly, I did not have access to the funds that were required to pursue my desire.

What was I supposed to do? I was fortunate to be offered my first job with a company that to many was known as “Ma Bell.” There I worked as a customer service trainer and it was a close fit considering what I initially thought I would do. I helped new employees as they began their new career. The only hitch was

that this job required me to move to the Big Apple. Now being a country girl, New York was a significant change that caused me to pause. It caused my mother severe concerns but, I reached into my bag of skills and off I went. Was the skill that led me to New York confidence? Honestly no. I was scared to death, so it was certainly not confidence.

I had no knowledge or experience in training so those were not the skills that help me through the beginning stages. I did have curiosity and a desire to learn, but those alone were not the reason I willingly changed my career direction.

After a brief stay in NYC, once again that mysterious skill led me to my next adventure. Because of my previous job I could easily transfer anywhere within the vast network of AT&T, so I packed my bags and headed to San Diego.

Surprise! When I went to Pacific Bell in San Diego, I found they had no openings and all my experience and top ratings meant nothing. Since I had little money and needed food and housing, the search for a new

position began in earnest. In the early 70’s there was not a lot of industry in San Diego and one trip to Los Angeles convinced me it was once again time to change my vision of what my career would be.

After some not so great jobs, that included selling advertising space over the phone and working in an employment agency, a friend suggested that I apply for a customer service job with IVAC.

I was offered the job at IVAC, and so, my next 30 plus years of working involved me relying heavily on that same skill over and over as my role and responsibilities, as well as the company, changed on what seemed like a semiannual basis.

With IVAC I had found the ideal combination for fulfilling my need to work for a company that provided healthcare products and services (my Mom was an RN), my need to help others, as well as my need for working for a company that provided opportunity to their employees.

I had the opportunity to be an individual contributor, to manage others, and to become the voice of corporate to our customers. I really enjoyed working with our sales team members to finalize contract terms and pricing. That responsibility emphasized my personal need to use the skill that had accompanied, if not led, me throughout my career.

Surprise hit again following a corporate acquisition. While I had survived and sometimes thrived through previous transitions, this time it was not to be. I again asked myself, what now?

Throughout my career I had the good fortune to work with many wonderful people who stood by my side as I found my way to Med One, my current company. Now after nearly eight years I can easily say that the skill (I have yet to name) has stayed with me and led me on adventures and into fields I never would have explored otherwise.

I attribute this skill to my career success and hope it will remain a constant companion in both my personal and professional life.

Have you identified it?
Flexibility and an open mind.

The definition of my secret weapon, just in case I have confused you is:

A ready capability to adapt to new, different, or changing requirements.

A quote by author Deborah Day that says it best: It “requires and open mind and a welcoming of new alternatives.”

While there are many different opinions of what the most important career skills are, I find that an open mind, along with one or two words of wisdom from my wonderful Mom have been key to both my personal and job satisfaction.

There is a song that often plays in my head. It reminds me of the skill I have been referring to throughout this story. It was by Dean Martin as I recall. It was something like this. “Catch a falling star and put it in your pocket. Never let it go.” I like to think of flexibility and an open mind as my falling star that I want to never let go. It has been with me and helped me in ways too numerous to count. It has been my secret weapon.

I would love to know what you deem as your personal skill that you depend on. Please let me know. You can email me at ismithstofer@medonegroup.com or call me at 800-248-5882 or find me on LinkedIn. I am flexible! Hope to hear from you.



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