We Stand for Children.

2013 Annual Report
We begin every day with a question:

“What’s right for children?”
When I became President and CEO two years ago, I asked the Children's National family to believe, to re-imagine, and to think differently. Since then, we've seen a lot of change — changes in the market, changes in the practice of medicine, even in how our country thinks about healthcare.

In the midst of all this uncertainty, there is one thing that does not change: our commitment to those we care for. For 143 years, we have served children in our nation's capital, across the country, and around the world. And in the process, we have grown from a small organization with a big vision to a national and international leader in clinical care, advocacy, research, and education.

With a new leadership team firmly in place, this was the year we began to hit our stride.

We've undertaken critically important work to drive operational excellence and discipline in the organization. We've forged new partnerships and alliances, and been recognized as an innovative business leader in healthcare. And we ended the year with a strong balance sheet bolstered by increased market share, volumes, and philanthropy.

This report highlights the work we've done to implement new ideas, introduce new business models, strengthen our national voice, and increase our value to payors, partners, and the patients we serve.

Of note: we opened state-of-the-art, multidisciplinary centers for children living with chronic pain and another for diabetes; we welcomed two seasoned pediatric experts as Chief Medical Officers; we hosted an international symposium dedicated to innovation in pediatric surgical device development; and we served as an expert source and a national voice for reporters and policymakers on pressing issues that affect children, including mental health. Finally, we worked to refresh and reintroduce Children's National (and our beloved Dr. Bear) to our home market, and to actively promote the value of our singular focus on the health and well-being of children.

Without question, these are challenging times in healthcare. The climate is uncertain and the landscape is difficult to navigate. But our organization is strong, our path forward is clear, and our focus is resolutely on doing what's best for the children of the region, the nation, and the world. Together, we stand for children.

Kurt D. Newman, M.D.
President
A National Voice for Children

There is no greater place to advocate on behalf of children than within striking distance of Capitol Hill. But proximity is not enough to establish a national voice for pediatric healthcare. Children’s National Health System staff have dedicated their careers to children’s medicine and are passionate champions for children. As a result, they are often first at the table when national pediatric healthcare policy is developed.

This year, when the tragic shootings in Newtown, Conn., occurred, experts at Children’s National understood that the incident was not merely an instance of senseless violence, but that it pointed to a larger issue: mental health as a child’s health concern. While leaders focused on gun control, President and CEO Kurt Newman, MD, with mental health specialists on staff at Children’s National, elevated the conversation to include children as a central concern. In a Washington Post op-ed published on December 27, 2012, and re-used nationally, “The Treatment of Mental Conditions Must Start Early,” Dr. Newman argued for early mental health screening, expanded access to care, and individualized treatment. Shortly thereafter, Paramjit Joshi, MD, appeared on “PBS NewsHour” to discuss the troubling statistics that show few children who need mental health treatment actually receive it.

Improving the health of children also takes us beyond our borders. The Critical Congenital Heart Disease (CCHD) Screening Program has quickly evolved from the regional and national platform to an international stage. This year, with assistance from Baby’s First Test, the CCHD team produced videos in six languages. English, Arabic, Chinese, French, Russian, and Spanish, to help expectant and new parents understand CCHD screening.

Finally, Children’s National made headlines this year in the New York Times, BBC, and CNN with the debut of first-of-its-kind technology that blends video gaming technology with clinical treatment and physical therapy. Chronic pain affects up to 46 percent of all children, yet many do not receive adequate treatment. As part of the Sheikh Zayed Institute for Pediatric Surgical Innovation, Children’s National opened the Pain Medicine Care Complex, one of a few programs in the country dedicated to managing pain for children. The care complex uses multisensory therapy based on the concept of re-educating how the brain perceives pain.

What’s right for children? Leveraging our expertise and experience to raise our voice for those who cannot.

01 | 02
Champion  Ally  Promoter  Ambassador  Caregiver  Friend  Innovator  Dreamer
New Models

Children's medicine is not part of what we do, it's all we do. We believe that focus allows us to think more creatively, to be innovative, and to see new opportunities others would never think of. In fact, by putting kids first, we believe new — and potentially better — business models can follow. This was a year where we put the theory to the test.

In February, we announced a joint venture to increase access to pediatric specialty care to kids and families in Northern Virginia. We partnered with Inova Children's Hospital — historically a competitor — to create an organization that brings together specialists from both organizations to better serve the children of the region. The Washington Post called the partnership unique. "Among only a few of its kind in the nation, it is aimed at giving young families living in one of the fastest-growing areas of the country more convenient access to a scarce resource: pediatric specialists."

Innovative thinking also is behind a new model of leadership adopted in 2013. The Affordable Care Act is shifting the healthcare market from an emphasis on inpatient care toward a broader focus on better outcomes and more preventive, community-based care. These ideas are sometimes referred to as population health. Population health isn't new to Children's National — our roots are in the community, and keeping kids healthy is our mission. But the changing climate prompted CEO Kurt Newman to implement a dual chief medical officer (CMO) model, allowing the institution to focus both on excellence in our specialty and inpatient care and a growing ambulatory and primary care footprint.

As a result, Children's National now has two highly qualified physician leaders who oversee the clinical operations of the enterprise: Denice Cora-Bramble, MD, is the Chief Medical Officer of Ambulatory and Community Health Services, and David Wessel, MD, is the Chief Medical Officer of Hospital and Specialty Services. The dual CMO model demonstrates Children's commitment at the highest level to addressing the changing landscape in the healthcare marketplace and building and sustaining system-wide care for children — from preventative primary care visits to complex subspecialty care.

What's right for children? An organization that thinks bigger, thinks differently, and puts children at the center.
Champion  Ally  Promoter  Ambassador  Caregiver  Friend  Innovator  Dreamer
More Than a Hospital

At no point in history has pediatrics been so important to the future of medicine. The health of society has its origin in the health of children. Our ability to understand the origins of disease, and anticipate or even prevent them, will allow more kids to have the best chance at a bright future.

We embarked on an ambitious project to define and validate the core ideas that are compelling, believable, and unique about the Children’s National brand. We gathered input from consumers, referring physicians, patient families, donors, payors, staff, and board members. The result was a strong brand positioning framework that would reinforce the organization’s vision and inform and unify our message.

Among the important findings: participants looked to Children’s National as the organization with the highest level of recognized expertise in children. They also saw great value in a comprehensive approach — from primary care to intensive care — to address the needs of kids. Respondents valued the idea of a special place designed with kids in mind. Finally, Children’s National is seen as an advocate for all children — here in Washington, DC, across the nation, and around the world.

For this reason, we made a deliberate decision to move our name from Children’s National Medical Center to Children’s National Health System to fully represent the breadth and depth of care we provide to children. We also embarked on an ad campaign to reintroduce ourselves to our home market. And last but certainly not least, we gave Dr. Bear a fresh new face, making him warmer and more timeless.

The “more than a hospital” idea is borne out in the growth of our primary care and ambulatory services, our partnerships with peer institutions in the region, and in the message we consistently deliver: we stand for children.
We’re more than a hospital, we’re a health system for kids.

From primary care to intensive care, we provide nationally ranked pediatric medicine serving Maryland, Virginia, the District of Columbia, and beyond. Call 888-884-BEAR or visit JustRightForChildren.com.
New Thinking in Medicine

In medicine and medical research, economic and regulatory pressures often mean that innovation occurs primarily in the adult arena. Drug discovery, medical device development, and therapeutic research is typically first targeted and tested for adults and eventually adapted for pediatric patients. At Children's National Health System, we take a leadership role in moving the research focus — and its benefits — toward children first.

With that in mind, Children's National hosted the first Pediatric Surgical Innovation Symposium in June 2013. The event brought together global leaders in pediatric surgical innovation and device development, including researchers, surgeons, policymakers, lawyers, regulatory agencies, and bioethicists. The symposium created dialogue around the balance between safety and regulation and innovation and rapid development.

What's right for children? Gathering the best and brightest minds in pediatric medicine to foster innovation that benefits kids.

and collaborative white paper that will outline a consensus on recommended priorities and changes to speed advances in pediatric surgical innovation and device development.

New thinking also is evident in the way that researchers at Children's National are employing existing technology to assist our patients. This year, a team from the Sheikh Zayed Institute for Pediatric Surgical Innovation began using a 3D printer to make full-sized replicas of patients' hearts that can be used by surgeons. The 3D version of the heart can be used to plan and practice procedures, in some cases reducing the time it takes to complete complicated cardiac surgeries. Covered in the Washington Post and Fox National Business News, Children's use of 3D printing is still new, and researchers are continuing to investigate additional applications of the technology in pediatrics.

Following the day-long symposium, the organizers held a closed session to begin the formation of a
Operational Excellence

Throughout our history, Children’s National Health System has witnessed tremendous growth and change in pediatric healthcare. This year is no different. The current healthcare marketplace is in the midst of unprecedented change, and Children’s National is committed to staying in front of the curve.

In 2013, leaders at Children’s National embarked on a transformative, five-year initiative to examine and improve the effectiveness of how we solve the challenges of the future, and to position us for continued leadership. The effort, called Transformation 2018, focuses on six areas: strategy, financial strength, integration, innovation, patient experience, and our brand. In each of the six areas we are focused on becoming more integrated, efficient, and highly reliable in how we deliver care; improving the value and experience we offer to patients and families, payors and partners; and aligning our strategic and operating priorities with the ultimate goal of developing innovative clinical and research programs seen nowhere else in the world.

Through Transformation 2018, Children’s National is finding creative, fresh, and efficient ways to address the future challenges of pediatric healthcare delivery. By developing a unified strategic plan that delivers a more integrated, efficient, and highly reliable health system, we will be poised to serve children and their families for years to come.

What’s right for children? Finding new and better ways to address the challenges of pediatric healthcare delivery.
Expertise in Research and Education

Research
In the face of a tightening economic climate, the Children's Research Institute surpassed expectations. In 2013, Children's Research Institute expanded faculty and staff, increased grant funding and the number of research projects.

What’s right for children? Recruiting the best and brightest minds to help lead pediatric medicine.

Highlights of the past year include:
- Completion of philanthropic efforts to raise funds for a Chair in Nursing Research
- Recruitment of five internationally known researchers and more than 40 faculty and staff members with their associated research projects
- Construction of the Good Manufacturing Practice level stem cell facility that will expand the treatment modalities we offer in our Blood and Marrow Transplantation (BMT) program
- Filing of 30 initial patent applications
- Appearance of Francis S. Collins, MD, Director of the National Institutes of Health, as the keynote speaker for Research Week
- Completion of the Children's Research Institute Summer Research Internship Program for 115 research trainees

Education
In 2013, Children's pediatric residency program grew to include 117 residents. Our program is one of the most competitive in the nation, receiving 2,700 applications for 40 open intern positions. Each year, Children's National has 150 subspecialty fellows in 30 fellowship programs, 117 pediatric residents, 750 rotating residents, and 300 medical students.

The Children's Academy of Pediatric Educators (CAPE) received the "Teaching Program Award," the highest programmatic honor at the Pediatric Academic Society meeting. The prestigious Ray E. Helfer Award for Innovation in Medical Education was awarded to a group of CAPE members for a study submitted this year.

Children’s National sponsors 30 nationally recognized fellowship programs. New programs formally approved in 2013 include:
- Pain Medicine
- Neurocritical Care
- Cardiac Intensive Care Medicine
- Cardiac Anesthesia

The Sheikh Zayed Institute for Pediatric Surgical Innovation at Children's National welcomed a diverse group of students from Abu Dhabi, United Arab Emirates into the Student Innovators Summer Program. Student Innovators from Khalifa University and the Higher Colleges of Technology spent two months working with mentors on biomedical innovation theory and practice projects.
Champion  Ally  Promoter  Ambassador  Caregiver  Friend  Innovator  Dreamer
The Children's Experience

In 2013, philanthropy enabled Children's National to dramatically improve the experience of children who need care.

**Pain Medicine Care Complex**
As part of the Sheikh Zayed Institute for Pediatric Surgical Innovation, made possible by a historic gift from the Government of Abu Dhabi in 2009, Children's National opened a one-of-a-kind Pain Medicine Care Complex that revolutionizes the way children are treated for pain.

**Dream Clinic**
Thanks to many donors, the Dream Clinic will improve clinical care and the experience for children undergoing cancer treatment. The 2013 Heroes Curing Childhood Cancer Gala, chaired by Elizabeth and Lee Blalock, raised $695,000 to support this important initiative.

**Philanthropy**
Donors supported Children's National through gifts, in-kind donations, partnerships, and events. The annual Children's Ball raised $2 million under the leadership of chairs Susanna and Jack Quinn. Children's Miracle Network Hospitals remained a vital fundraising partner, as corporations like Costco Wholesale, Walmart, Food Lion, GIANT Foods, Marriott, and others raised and donated $5.9 million for the health system.

The Board of Visitors of Children's National contributed more than $1.6 million for research, care, equipment, and family services. This support was made possible by their annual fundraiser, A Vintage Affair, and the Care for Kids Card. The Child Health Center Board, now the Children's Health Board, raised more than $250,000 to benefit Children's National through the DC Design House and partnerships with retailers and restaurants.

The Children's Circle of Care, which recognizes donors who make an annual gift of $10,000 or more, welcomed 218 members in 2013. We are grateful to all our donors and partners who help us meet the needs of every child.
Children’s National Boards

Children’s National Medical Center
Mark L. Batshaw, MD
Andrew C. Blair
Paul Dougherty
Fred T. Goldberg, Jr.
Evan Jones (Vice Chairman)
Scott Koenig, MD, PhD
James W. Lintott (Chairman)
Kurt D. Newman, MD (President)
Elizabeth A. Singer
Carolyn A. Thornell
Tori G. Verstandig
Michael J. Williams (Secretary-Treasurer)

Children’s Hospital Foundation
Amy Baier
Bret Baier
Susan B. Baker, MD
Stephen T. Baldacci
Kathryn D. Barker (thru 6/30)
Alexander Barron
Mark L. Batshaw, MD
Allan J. Berman
C. Richard Beyda
Andrew C. Blair (Chairman)
Elizabeth Bialack, PhD
Louis G. Christopher
Marcella E. Cohen
Denice Cora-Bramble, MD, MBA
Floyd E. Davis, III (Skip) (Secretary-Treasurer)
Paul Dougherty
Betty G. Ewing
Gail Feagles (eff 6/1)
Norma Lee Fungar
Daniel Gilbert
Wendy M. Goldberg
Bradley Graham
Mae H. Grennan
Eric Hoffman, PhD
Larry D. Ishol
Richard Jonas, MD
Cindy Jones
Kathleen Kies
Pam King Sams
James W. Lintott
Cidalia Luis-Akbar
Natalia Luis-Monteiro
Walter G. Lukens, III

Children’s Hospital
Disonna Abney, MD
Deidre Adkins
Kathryn D. Barker (thru 6/30)
Shanay Barnett-Jones
Denice Cora-Bramble, MD, MBA (eff 7/1)
Elizabeth Duggal
Gail Feagles
Debra L. Friedman (Vice Chairman)
Alberto Gomez
Bonnie Norman (eff 7/1)
Kurt D. Newman, MD (President)
Gregory A. O’Dell (Secretary-Treasurer)
Raul K. Shah, MD
Mary Helen Thompson
Carolyn A. Thornell (Chairman)
David L. Wessel, MD (eff 7/1)
David Whiston, DDS
James A. MacCutcheon
Sara T. Machir
Carrie Marriott
Gerard R. Martin, MD
Alan L. Meltzer
Edward J. Miller, Jr.
Kurt D. Newman, MD (President)
Bonnie Norman (eff 7/1)
Charles K. Nulsen, III
Roger J. Packer, MD
Ramanarayon V. Potarazu
Blair McGee Raber
Anthony Sandler, MD
Richard W. Snowden, III
Tanya Snyder
Maria Lerner Tanenbaum
Laura S. Unger
Toni G. Verstandig (Vice Chairman)
David L. Wessel, MD
Robin R. Wildier
Audrey R. Wolf
Joseph L. Wright, MD, MPH

Children’s Research Institute
Mark L. Batshaw, MD
Kevin M. Fickenscher, MD, PhD
Fred T. Goldberg, Jr. (Vice Chairman)
Ada Sue Hinshaw, PhD
Evan Jones
Scott Koenig, MD, PhD (Chairman)
Alan I. Leshner, PhD
B. Thomas Mansbach
Kurt D. Newman, MD (President)
Mary Alice O’Malley

Jutta K. Parsons
David Schiltz
Jay Schnitzer, MD, PhD
Elizabeth A. Singer
Robert E. Taylor, MD, PhD
Joel Wood (Vice Chairman)

Safe Kids Worldwide
Kathleen S. Carr
John H. Cluster (Chairman)
Sarah L. Colamarino (Vice Chairman)
Elizabeth Flury
Edwin D. Fuller
Eric Markgraf
Kurt D. Newman, MD (President)
Stephen E. O’Toole (Secretary-Treasurer)
Dana Points
Michael J. Robinson
Carmine Schiavone
Raymond S. Sczudlo, Esq.
Orly E. Silbinger
Nicole A. Smith
Matthew Thornton, III
James Ward

Safe Kids Worldwide, LTD.
Douglas T. Myers, MBA, CPA
Kurt D. Newman, MD (Chairman of the Board & President)
Raymond S. Sczudlo, Esq. (Secretary-Treasurer)
Children’s National Boards

Children’s National Health Network
Dianna Abney, MD
Jeffrey A. Becker, MD (Secretary-Treasurer)
Denice Cora-Bramble, MD, MBA
Linda Goldstein, MD
Michael Hopper, MD
William P. Madigan, Jr., MD
James Mattey, MD (Chairman)
Kurt D. Newman, MD (President)
Lisa Rainey, MD
William C. Rees, MD
John Snyder, MD
Eugene K. Sussman, MD (Vice Chairman)
Elizabeth Watts, MD
David L. Wessel, MD

Children’s National Advocacy and Public Policy, Inc.
Cory B. Alexander
Lisa Bernstein
Kathleen S. Carr
Elizabeth Flury
Wendy M. Goldberg (Chairman)
Artencia Hawkins-Bell (Secretary-Treasurer)
Julissa Marenco (Vice Chairman)
Kurt D. Newman, MD (President)
Bonnie Norman
Margaret K. O’Byron
Kate S. Schecter, PhD
Joseph L. Wright, MD, MPH

Children’s Pediatricians & Associates
Gretchen Brandon
Denice Cora-Bramble, MD, MBA
Dinea DeSouza, MD
Melvin L. Feldman, MD (Chairman)
Ellen K. Hamburger, MD (Secretary-Treasurer)
Douglas T. Myers
Kurt D. Newman, MD (President)
Mark Weissman, MD

Children’s School Services
Denice Cora-Bramble, MD, MBA
Wendy M. Goldberg
Kurt D. Newman, MD (President)
Raymond S. Szczyglis, Esq. (Secretary-Treasurer)
Elizabeth A. Singer (Chairman)

Bearacuda RE Board
Norman A. Barker
Diana L. Goldberg
Fred T. Goldberg, Jr.
James W. Jones (Chairman)
James A. MacCutcheon
Douglas T. Myers, MBA, CPA
Nellie C. Robinson
Raul Shah, MD
Carolyn A. Thornell

Hearing and Speech Board
Jill J. Bruno, DMD
Kerry Fortune Carlsen (Co-Vice Chair)
Samantha W. Corrigan (Co-Vice Chair)
Burton C. Gray, Jr.
Wendy C. Maksim
Jan E. O’Neil (Chairman)
Stephanie O’Neil
John D. Richardson
John J. Rosenthal
Nicholas Seidenberg
Mary Stuart Travers
Jennifer C. Urquhart
Executive Management

Kurt D. Newman, MD
President and Chief Executive Officer

Roberta Alessi
Vice President, Operations

Mark L. Batshaw, MD
Executive Vice President, Physician-in-Chief, and Chief Academic Officer
Director, CRI

Kathleen S. Carr
President and CEO, Safe Kids Worldwide

Denice Cora-Bramble, MD, MBA
Executive Vice President and Chief Medical Officer for Ambulatory and Community Health Services

Elizabeth Flury
Executive Vice President and Chief Strategy Officer

Kathleen E. Chavanu Gorman, MSN, RN, NEA-BC
Executive Vice President, Patient Care Services and Chief Operating Officer

Mary Anne Hilliard, Esq.
Chief Risk Counsel

Brian R. Jacobs, MD
Executive Director, Center for Pediatric Informatics and The Children's IQ Network, Vice President, Chief Medical Information Officer, and Chief Information Officer

Carol Keese
Vice President, Public Relations and Marketing

Pam King Sams
Executive Vice President and Chief Development Officer, Chief Operating Officer, Children's Hospital Foundation

Michelle McGuire
Chief of Staff, Office of the President

Gerald Martin, MD
Senior Vice President, Center for Heart, Lung, and Kidney Disease
Acting Senior Vice President, Center for Cancer and Blood Disorders

Douglas T. Myers, MBA, CPA
Executive Vice President and Chief Financial Officer

Mary Ottolini, MD, MPH
Vice Chair of Medical Education

Roger Packer, MD
Senior Vice President, Center for Neuroscience and Behavioral Medicine

Anthony Sandler, MD
Senior Vice President, Joseph E. Robert, Jr. Center for Surgical Care, and Surgeon-in-Chief

Raymond S. Sczudio, Esq.
Executive Vice President and Chief Legal Officer

Carl H. Spatz
Corporate Affairs Manager

Linda Talley, MS, BSN, RN, NE-BC
Vice President and Chief Nursing Officer

Mendel Tuchman, MD
Chief Research Officer, CRI

Darryl W. Varnado
Executive Vice President and Chief People Officer

David L. Wessel, MD
Executive Vice President and Chief Medical Officer for Hospital and Specialty Services

Joseph L. Wright, MD, MPH
Senior Vice President, Community Affairs and Child Health Advocacy Institute
Fiscal Year 2013 Financial Highlights

Assets as of June 30, 2013 in thousands:

Cash and short-term investments on hand ............................................ $89,267
Amounts owed by insurance companies, government agencies, patients, and other entities ......................................................... 166,782
Inventory on hand to meet the needs of our patients .............................. 6,911
Net value of property, plant, and equipment ........................................ 538,626
Investments to be held longer than one year ........................................ 324,103
Proceeds from the sale of bonds to pay for capital expansion, renovation, and equipment ................................................................. 28,413
Funds contributed over the years by our friends in the community to pay for specific projects .............................................................. 138,328
Other assets .......................................................................................... 158,667
Total assets, the strong financial base that ensures our ability to continue to care for sick children ....................................................... $1,451,097

Liabilities as of June 30, 2013 in thousands:

Amounts owed to vendors, employees, and other third parties .................. $307,479
Amounts borrowed to fund the projects and purchase the equipment needed to serve our patients, payments due within a year ................ 4,129
Amounts borrowed to fund the projects and purchase the equipment needed to serve our patients, payments due in the future ................. 463,946
The difference between what we own (our assets) and what we owe (our liabilities), representing the community’s interest in Children’s National .............................................................. 675,543
Our current liabilities, plus the community’s interest, equals our total assets .................................................................................. $1,451,097

Sources of income for delivering quality healthcare services to our community come from as of June 30, 2013 in thousands:

Services provided for inpatients and outpatients, including physician care, diagnostic and therapeutic procedures, nursing care, and room and board ............................................................ $1,949,162
Because government and other insurance carriers do not pay the total charges on the care delivered, we did not collect ................................ (1,067,435)
Because we provide care to the indigent and children with families unable to pay their full bill, we did not collect ........................ (46,213)
We received additional income from other sources, including research grants and other programs sponsored by outside support .......................................................... 114,505
The use of restricted charitable gifts to support operations ....................... 30,391
Contributions from our friends in the community who understand and support our mission to care for children ......................... 23,680
Total revenues and support to care for the children who need our special services ................................................................. 1,004,082

From our income we paid for as of June 30, 2013 in thousands:

Salary and benefits for our medical, professional, and support staff .......................................................... $632,740
Operating supplies and services .............................................................. 268,441
Depreciation and interest on plant and equipment .................................... 75,435
Professional liability protection ............................................................... 17,912
Total expenses required to meet the needs to support our patients and mission ................................................. 992,528

Excess of revenues from operations to support our mission .................... 11,554
Total Philanthropic Support .................................................................. 62,700
Children's National Medical
Center Corporate Entities

Children's Hospital
Children's Hospital Foundation
Children's National Advocacy and Public Policy, Inc.
Children's National Health Network
Children's National Specialists of Northern Virginia, LLC
Children's Pediatricians and Associates
Children's Research Institute
Children's School Services
Safe Kids Worldwide

We would like to thank all of our donors, volunteers, employees, parents, and children who graciously give their time in support of our organization and our mission.

Circle120
Design and Production

Gwin's Printing
Printing

The 2013 Annual Report is published by
Children's National Health System
111 Michigan Ave., NW,
Washington DC 20010-2970
202-476-5000
www.ChildrensNational.org