

TRANSCRIPT OF CCI MONTHLY STAKEHOLDER UPDATE

62 MINUTES

>> -- EVERYONE, AND THANK YOU FOR JOIN US. BEFORE WE STARTED. I WANTED TO DO A QUICK SOUND CHECK. SO IF YOU CAN HEAR ME, PLEASE PRESS THE NUMBER THREE ON YOUR PIN PAD. OKAY, GREAT. IT LOOKS LIKE THE AUDIO IS WORKING FINE.

SO AGAIN, THANK YOU, EVERYONE, FOR JOINING US FOR THE CCI MONTHLY STAKEHOLDER UPDATE. FOR THOSE OF YOU WHO HAVE NOT YET DOWNLOADED THE ENROLLMENT CHART THAT WE WILL BE WALKING THROUGH DURING THIS CALL, THE ENROLLMENT CHART IS POSTED ON CALDUALS.ORG, AND YOU CAN ACCESS THE CHART THROUGH TWO WAYS. THE FIRST WAY IS UNDER THE CALDUALS "LATEST NEWS" ON THE HOME PAGE. AND SO IF YOU GO TO THE HOME PAGE, IT WILL BE ON THE FAR RIGHT-HAND SIDE OF THE SCREEN. AND THEN YOU CAN ALSO ACCESS THE CHART BY GOING TO THE "NEWS" TAB, WHICH IS LOCATED TO THE HOME SCREEN AS WELL.

SO AS FAR AS Q AND A, WE WILL BE OPENING UP FOR Q AND A AFTER MARGARET ENDS HER SPEAKING PORTION. AND I THINK WITH THAT, WE CAN GO AHEAD AND HAND IT OVER TO MARGARET TATAT, WHO IS THE ACTING DEPUTY DIRECTOR OF HEALTH CARE DELIVERY SYSTEMS HERE AT THE DEPARTMENT OF HEALTH CARE SERVICES.

>> THANK YOU, COURTNEY. AND THANK YOU, EVERYONE, FOR JOINING US THIS MORNING. AS ALWAYS, WE ARE VERY GRATEFUL FOR YOUR COLLABORATION WITH US AND YOUR JOINING THESE CALLS. IT MEANS A GREAT DEAL TO US. SO AGAIN, THANK YOU.

AS ALWAYS, WE HAVE LOTS TO DISCUSS TODAY. SO I'M LOOKING FORWARD TO A GOOD CONVERSATION. FIRST OF ALL, WE HAVE SOME MILESTONES TO MARK. AND THEN OF COURSE WE WILL PROCEED WITH SOME PROGRAM UPDATES.

SO IN TERMS OF OUR MILESTONES, WE HAVE SOME SPECIFIC MILESTONES THAT WE REACHED TOGETHER YESTERDAY, ON APRIL 1. SO APRIL 1, 2014 MARKED AN IMPORTANT MILESTONE FOR THE COORDINATED CARE INITIATIVE. IT WAS THE FIRST DAY THAT CAL MEDICONECT COVERAGE TOOK EFFECT IN SEVERAL OF OUR EIGHT CCI COUNTIES. SO SPECIFICALLY, IT WAS THE FIRST DAY OF ENROLLMENT IN SAN MATEO COUNTY, WHERE WE ARE PLEASED TO REPORT THAT 3,200 BENEFICIARIES ARE NOW ENROLLED IN THE HEALTH PLAN OF SAN MATEO'S CAL MEDICONECT PLAN. SO AGAIN, A MILESTONE, A MAJOR MILESTONE IN SAN MATEO COUNTY. 3200 BENEFICIARIES NOW ENROLLED IN THE CAL MEDICONECT PROVIDED BY THE HEALTH PLAN OF SAN MATEO.

AS YOU ALL KNOW, CAL MEDICONECT IS OPTIONAL AND OPEN FOR ENROLLMENT IN OTHER COUNTIES. SO SPECIFICALLY, ANOTHER 300 BENEFICIARIES HAVE VOLUNTARILY OPTED IN TO CAL MEDICONECT PLANS SERVING OTHER COUNTIES AND ARE NOW ENROLLED IN CAL MEDICONECT COVERAGE. SO VOLUNTARY OPT IN IS NOW AVAILABLE IN LOS ANGELES, RIVERSIDE, SAN BERNARDINO, AND SAN DIEGO COUNTIES. AND AS OF OUR LAST CHECK, AGAIN, 300 BENEFICIARIES IN THOSE COUNTIES HAVE ELECTED TO RECEIVE CAL MEDICONECT COVERAGE FROM HEALTH PLANS IN THOSE COUNTIES.

APRIL 1 ALSO MARKED ANOTHER MILESTONE IN CONNECTION WITH THE COORDINATED CARE INITIATIVE, AND SPECIFICALLY IT MARKED THE COMMENCEMENT OF MANAGED LONG TERM SERVICES AND SUPPORT AS A COMPONENT OF THE COORDINATED CARE INITIATIVE. SO AGAIN, YESTERDAY ABOUT 48,000

BENEFICIARIES WHO ARE ALREADY ENROLLED IN MEDI-CAL MANAGED CARE PLANS IN LOS ANGELES, RIVERSIDE, SAN BERNARDINO, SAN DIEGO, AND SAN MATEO COUNTIES NOW HAVE THEIR LONG-TERM SERVICES AND SUPPORTS DELIVERED TO THEM THROUGH THEIR MEDI-CAL PLANS.

SO AGAIN, ANOTHER MAJOR MILESTONE. 48,000 BENEFICIARIES IN LOS ANGELES, RIVERSIDE, SAN BERNARDINO, SAN DIEGO, AND SAN MATEO COUNTIES, NOW RECEIVING THEIR LONG-TERM SERVICES AND SUPPORTS THROUGH THEIR HEALTH PLAN. SO WE ARE VERY PLEASED THAT BENEFICIARIES ARE NOW, EFFECTIVE YESTERDAY, ABLE TO TAKE ADVANTAGE OF THE NEW BENEFITS OF CAL MEDICONECT AND THE COORDINATED CARE INITIATIVE. AND AS YOU CAN IMAGINE, WE ARE GOING TO BE OF COURSE CONTINUING TO MONITOR ALL TRANSITIONS RELATING TO THE IMPLEMENTATION OF THE COORDINATED CARE INITIATIVE VERY CLOSELY TO ENSURE THE CONTINUED SMOOTH TRANSITION FOR THE PROGRAM IN THE EIGHT CCI COUNTIES.

APRIL 1ST MARKED ANOTHER MILESTONE IN CONNECTION WITH THE COORDINATED CARE INITIATIVE. SO SPECIFICALLY APRIL 1ST MARKED THE COMMENCEMENT OF THE CAL MEDICONECT OMBUDS PROGRAM. SO AS PART OF OUR ON GOING WORK ON THE COORDINATED CARE INITIATIVE AND THE CAL MEDICONECT PROGRAM, WE ARE VERY EXCITED TO REPORT THAT THE CAL MEDICONECT OMBUDS PROGRAM OPENED FOR BUSINESS YESTERDAY ON SCHEDULE. THIS NEW PROGRAM IS DESIGNED TO PROVIDE OMBUDS SERVICES SPECIFIC TO THE NEEDS OF BENEFICIARIES WHO ARE ENROLLED IN A CAL MEDICONECT PLAN. IT IS AVAILABLE FOR THOSE BENEFICIARIES, THEIR FAMILY MEMBERS, AND CAREGIVERS.

PURSUANT TO PLANNING THAT WE HAVE UNDERTAKEN FOR MANY MONTHS NOW, DMHC CONDUCTED A PROCUREMENT AT THE END OF 2013, THE TOP OF 2014. AND PURSUANT TO THAT RIGOROUS REQUEST FOR PROCUREMENT PROCESS, THE DMHC SELECTED THE LEGAL AID SOCIETY OF SAN DIEGO AS THE PRIMARY INDEPENDENT ENTITY THAT WOULD BE RESPONSIBLE FOR ADMINISTERING OMBUDS SERVICES, AGAIN IN THE EIGHT CCI COUNTIES TO THOSE BENEFICIARIES BEING SERVED IN CAL MEDICONECT PLANS.

THE LEGAL AID SOCIETY OF SAN DIEGO HAS PARTNERS WITH LOCAL ORGANIZATIONS IN EACH OF THOSE CCI COUNTIES, IN EACH OF THE EIGHT CCI COUNTIES. SO THESE LOCAL ORGANIZATIONS WERE CHOSEN FOR THEIR HIGH LEVEL OF EXPERTISE AND EXPERIENCE PROVIDING OMBUDS SERVICES TO BENEFICIARIES PROGRAMS SUCH AS CAL MEDICONECT, AND THEY HAVE BEEN TRAINED ON TOPICS SPECIFIC TO THE CAL MEDICONECT PROGRAM. SO AGAIN, IN TERMS OF ANOTHER VERY SIGNIFICANT MILESTONE, WE ARE PLEASED TO ANNOUNCE THE COMMENCEMENT OF THE CAL MEDICONECT OMBUDS PROGRAM.

WE TOUCHED BASE THIS MORNING WITH OUR COLLEAGUES AT THE DMHC TO SEE IF IT WOULD BE POSSIBLE TO GET ANY INFORMATION ABOUT CALL VOLUME, ET CETERA, YESTERDAY. SO I UNDERSTAND THAT CALL VOLUME YESTERDAY, WITH THE NEW CAL MEDICONECT OMBUDS PROGRAM, WAS ABOUT 170 CALLS. AND OF THOSE 170 CALLS, THE OMBUDS SERVICES – THE PROVIDER WAS ABLE TO DO WARM TRANSFERS, PROVIDE LOTS OF INFORMATION FOR THE MOST PART. AS I UNDERSTAND IT, THE CALLS WERE INFORMATION SEEKING AND CLARIFICATION ABOUT THE PROGRAM, AND AGAIN, RESULTED IN LOTS OF WARM HAND OFFS TO THE PLANS. SO WE ARE VERY PLEASED AND THANK OUR PARTNERS AT THE DEPARTMENT OF MANAGED HEALTH CARE AND OF COURSE THE LEGAL AID SOCIETY OF SAN DIEGO FOR THIS INCREDIBLY VALUABLE AND IMPORTANT SERVICE TO THE CAL MEDICONECT PROGRAM.

LASTLY, IN TERMS OF MILESTONES, I WANTED TO ANNOUNCE THAT WE HAVE ANOTHER RECENT MILESTONE FOR THE COORDINATED CARE INITIATIVE. AND THAT WAS CMS'S APPROVAL OF CALIFORNIA'S AMENDMENT TO OUR SECTION 1115 WAIVER. SPECIFICALLY ON MARCH 19TH LAST MONTH, CMS APPROVED OUR AMENDMENT TO THE 1115 BRIDGE TO REFORM WAIVER. THIS AMENDMENT TO THE WAIVER AUTHORIZES COVERAGE UNDER THE COORDINATED CARE INITIATIVE. MOREOVER, THE AMENDMENT REFLECTS A GREAT DEAL OF WORK BY STAKEHOLDERS, THE STATE, OUR PARTNERS IN THE FEDERAL GOVERNMENT, RELATED TO THE CAL MEDICONECT PROGRAM AND THE COORDINATED CARE INITIATIVE. WE ARE VERY PLEASED TO LET YOU KNOW THAT THAT WAIVER AMENDMENT IS NOW AVAILABLE ON OUR WEBSITE AS WELL AS AVAILABLE ON CALDUALS.ORG.

SO AGAIN, AS WITH ALL OF OUR MILESTONES, VERY PLEASED WITH THE COLLABORATIVE PROCESS IN THIS PARTICULAR AREA AND IN THIS PARTICULAR MILESTONE, AND WANT TO MAKE SURE THAT WE PUBLICLY ACKNOWLEDGE OUR PARTNERS AT CMS AND THANK THEM FOR THEIR COLLABORATION IN TERMS OF REACHING THIS PARTICULAR MILESTONE.

SO WITH THAT I'LL MOVE INTO THE PRIMARY TOPIC FOR TODAY'S CONVERSATION, AND THAT IS UPDATES IN CONNECTION WITH THE CAL MEDICONECT PROGRAM AND THE COORDINATED CARE INITIATIVE.

IN THE FIRST CATEGORY OF UPDATES FOR THIS MORNING, I WANTED TO TALK ABOUT AN INITIATIVE AND A CHANGE, A MODIFICATION TO OUR PROCESSES RELATING TO ALIGNMENT. SO I THINK THAT ALL OF YOU HAVE AVAILABLE, OR IF YOU DON'T HAVE IT FRONT OF YOU, ITS AVAILABLE ON CALDUALS.ORG, AN UPDATED CCI ENROLLMENT CHART. WE HAVE PUBLISHED AN UPDATED CCI ENROLLMENT CHART WITH AN EFFECTIVE DATE OF APRIL 1, THAT REFLECTS THE ENROLLMENT TIMELINE THAT I WILL WALK THROUGH RIGHT NOW TODAY. AGAIN, IT'S BEEN CIRCULATED AHEAD OF TODAY'S CALL. SO HOPEFULLY YOU HAVE IT FOR REFERENCE AS WE WALK THROUGH THESE CHANGES.

SO IF YOU HAVE THE CHART IN FRONT OF YOU – AND EVEN IF YOU DON'T, WE WILL STILL WALK THROUGH THE CHANGES AND HOPEFULLY IT WILL BE CLEAR. AS I SAID AT THE OUTSET, THE COORDINATED CARE INITIATIVE IS STARTING ON THE TIMELINES THAT WE HAVE ALREADY – THAT I ALREADY WALKED THROUGH AT THE OUTSET. SO SPECIFICALLY, ON APRIL ONE SAN MATEO COUNTY COMMENCED WITH CAL MEDICONECT, AND CAL MEDICONECT ENROLLMENT MOVED FORWARD YESTERDAY IN THE SAN MATEO COUNTY, SPECIFICALLY THE HEALTH PLAN OF SAN MATEO.

ALSO YESTERDAY THE MLTSS BENEFIT TURNED ON FOR – TURNS ON FOR FULL DUAL BENEFICIARIES WHO ARE ALREADY IN MEDI-CAL MANAGED CARE IN LOS ANGELES, RIVERSIDE, SAN BERNARDINO, SAN DIEGO, AND SAN MATEO COUNTIES. THE MLTSS BENEFIT FOR PARTIAL DUALS AND MEDI-CAL ONLY BENEFICIARIES ALREADY IN MEDI-CAL MANAGED CARE IN THOSE FIVE COUNTIES WILL COMMENCE IN JULY OF THIS YEAR.

NEXT MONTH'S PASSIVE ENROLLMENT FOR CAL MEDICONECT AND MLTSS FOR MEDI-CAL FEE FOR SERVICE BENEFICIARIES BEGINS IN RIVERSIDE, SAN BERNARDINO AND SAN DIEGO. BENEFICIARIES, BY WAY OF BACKGROUND AND UPDATE, BENEFICIARIES WITH APRIL AND MAY BIRTH MONTHS IN THOSE COUNTIES – AGAIN, RIVERSIDE, SAN BERNARDINO, AND SAN DIEGO – ARE GOING TO BE ENROLLED IN THAT FIRST MONTH, AND THEN ENROLLMENT WILL CONTINUE BY BIRTH MONTH. SO WE ARE FOLDING BIRTHDAYS IN APRIL AND MAY INTO MAY, AND THEN ENROLLMENT THERE AFTER WILL BE BY BIRTH MONTH.

A COUPLE OF THINGS ABOUT LOS ANGELES COUNTY. YOU KNOW, AS YOU ALL KNOW, ENROLLMENT IN CAL MEDICONECT IN LOS ANGELES COUNTY WILL BE VOLUNTARY. AGAIN, STARTING IN APRIL IT WILL BE VOLUNTARY FOR THREE MONTHS IN LOS ANGELES COUNTY PURSUANT TO THE MOU AND OUR ENROLLMENT STRATEGIES IN GENERAL.

VOLUNTARY ENROLLMENT THEN IN CAL MEDICONECT HAS BEGUN IN LOS ANGELES FOR L.A. CARE AND HEALTH NET. THERE ARE, AS WE HAVE ANNOUNCED ON PREVIOUS CALLS, GOING TO BE THREE OTHER PLANS IN LOS ANGELES. THEY ARE CONTINUING TO WORK ON READINESS REVIEW, AND THEY ARE NOT YET OPEN FOR VOLUNTARY ENROLLMENT. SO AGAIN, IN LOS ANGELES RIGHT NOW, L.A. CARE AND HEALTH NET ARE OPEN FOR VOLUNTARY ENROLLMENT.

THE THREE OTHER PLANS WHICH WE ANTICIPATE COMPLETING READINESS REVIEW ARE CARE MORE, CARE FIRST, AND MOLINA. AND AGAIN, THEY ARE NOT YET OPEN FOR VOLUNTARY ENROLLMENT IN LOS ANGELES COUNTY.

I WANT TO PAUSE FOR JUST A MOMENT TO EXPLAIN A LITTLE BIT ABOUT HOW WE ARE GOING TO BE PROVIDING NOTICES TO BENEFICIARIES IN CONNECTION WITH THE L.A. VOLUNTARY PROCESS. WE HAVE HEARD FROM STAKEHOLDERS, HEARD A LOT OF CONCERNS ABOUT NOW THE NOTICES FOR THIS L.A. VOLUNTARY PERIOD SHOULDN'T GO TO BENEFICIARIES TOO CLOSE TO THE TIME FRAME WHEN THE BENEFICIARIES WOULD OTHERWISE RECEIVE A 90-DAY NOTICE TRIGGERING THE COMMENCEMENT OR THE

PROCESSES RELATED TO PASSIVE ENROLLMENT INTO THE PROGRAM. AND WE ALSO HEARD CONCERNS THAT IF WE SENT TOO MANY NOTICES AT ONCE – AGAIN, THE NOTICES, CALL VOLUME, ET CETERA, COULD PUT A SIGNIFICANT STRAIN ON THE RESOURCES OF THE LOS ANGELES HIGH CAP PROGRAM, WHICH ARE SO VITAL TO ENSURING COMMUNICATION AT THE BENEFICIARY LEVEL WITH REGARD TO THE NOTICES AND THE ENROLLMENT PROCESSES.

SO BASICALLY WE HEARD THAT STAKEHOLDER INPUT, WE AGREED WITH THE STAKEHOLDERS, AND NOW WE ARE GOING TO BE MOVING TO PHASE IN LOS ANGELES VOLUNTARY NOTICE. SO CURRENTLY WHAT WE ARE DOING IS THAT WE ARE SENDING OUT NOTICES TO BENEFICIARIES IN LOS ANGELES WHO HAVE OCTOBER BIRTHDAYS. SO WE ARE GOING TO SEND OUT THIS VOLUNTARY NOTICE TO BENEFICIARIES, CAL MEDICONNECT ELIGIBLE BENEFICIARIES, WHO HAVE OCTOBER BIRTHDAYS.

THEN IN EARLY MAY, WE WILL SEND NOTICES TO CAL MEDICONNECT ELIGIBLE BENEFICIARIES WHO HAVE NOVEMBER AND DECEMBER BIRTHDAYS. AND THEN IN THE SUMMER MONTHS THAT FOLLOW, WE WILL THINK ABOUT A SCHEDULE FOR SUCCESSIVE BIRTHDAYS INTO 2014. AGAIN, WE HOPE THAT BY STAGGERING THE NOTICES THIS WAY, WE WILL MITIGATE CONFUSION AND WE WILL NOT HAVE BENEFICIARIES RECEIVING NOTICES VERY VERY CLOSE IN TIME.

SO BACK TO THE PASSIVE ENROLLMENT TIMELINE IN LOS ANGELES. THE PASSIVE ENROLLMENT PROCESS AND TIMELINE FOR LOS ANGELES IS SCHEDULED TO BEGIN IN JULY FOR ALL PLANS. AGAIN, ANTICIPATING THAT THERE WILL BE THREE ADDITIONAL PLANS WHICH WILL HAVE MET READINESS BY THAT POINT. SO WE ANTICIPATE THAT IN JULY, ALL PLANS IN LOS ANGELES COUNTY OTHER THAN L.A. CARE WILL BE OPEN FOR PASSIVE ENROLLMENT. WE ANTICIPATE THAT L.A. CARE WILL BE OPEN FOR PASSIVE ENROLLMENT AS SOON AS THE PLAN CURES THE LOW PERFORMING ICON, WHICH WE BELIEVE COULD BE AS SOON AS, YOU KNOW, THE END OF THIS YEAR.

SO AGAIN, JUST BY WAY OF BACKGROUND, WE HAVE THE VOLUNTARY NOTICES GOING OUT TO OCTOBER BIRTHDAYS AND THEN LATER TO BIRTHDAYS FOR NOVEMBER AND DECEMBER. PASSIVE ENROLLMENT SCHEDULED ON START IN JULY, ALL PLANS OTHER THAN L.A. CARE. AS I SAID, ALL OF THAT HAS REMAINED THE SAME. AND ALL OF THE NOTICES ARE ON TRACK. SO WE ARE ON TRACK IN TERMS OF NOTICES FOR THOSE ELEMENTS OF OUR ENROLLMENT PROCESS.

SO AT THIS POINT, LET'S TALK ABOUT WHAT WE HAVE CHANGED. SO WE HAVE – WE HAVE ADJUSTED ENROLLMENT DATES FOR A COUPLE OF VERY SPECIFIC PURPOSES. AND AT THE OUTSET OF THE UPDATE SESSION, I TALKED IN TERMS OF ALIGNMENT. SO WE HAVE REALLY DONE THESE ADJUSTMENTS TO INCREASE CLARITY, PREVENT THE NEED FOR MULTIPLE TRANSITIONS FOR A GIVEN SET OF BENEFICIARIES IN A GIVEN YEAR, AND ENSURE SUFFICIENT TIME FOR NOTICING FEE FOR SERVICE POPULATIONS, AND OF COURSE ALWAYS TO ENSURE PLAN READINESS.

SO THE FIRST CHANGE WE ARE MAKING IS TO AGAIN, BETTER ALIGN ENROLLMENT IN THE TWO MAJOR COMPONENTS OF THE COORDINATED CARE INITIATIVE. THE TWO MAJOR COMPONENTS OF THE COORDINATED CARE INITIATIVE ARE OF COURSE CAL MEDICONNECT AND MANAGED LONG TERM SERVICES AND SUPPORT. ENROLLMENT IN CCI HAS EVOLVED. AND AS OUR THINKING HAS EVOLVED, WE CERTAINLY TRY TO GIVE BENEFICIARIES ACCESS TO COORDINATED CARE AND TO COORDINATED CARE SERVICES AS SOON AS POSSIBLE.

AN UNINTENDED CONSEQUENCE, HOWEVER, OF SOME OF THE ADJUSTMENTS TO THE CAL MEDICONNECT ENROLLMENT TIMELINE TOOK IT OUT OF ALIGNMENT WITH ENROLLMENT INTO MANAGED LONG TERM SERVICES AND SUPPORTS. THE RESULT WAS THAT THERE WAS A POTENTIAL, VERY REAL POTENTIAL, FOR BENEFICIARIES TO GET A SERIES OF NOTICES LEAD TO BE ENROLLMENT IN MANAGED LONG TERM SERVICES AND SUPPORTS, AND THEN IN VERY SHORT ORDER GET ANOTHER SERIES OF NOTICES FOR THEIR ENROLLMENT INTO CAL MEDICONNECT.

SO BY WAY OF A CONCRETE EXAMPLE TO HELP SORT OF VISUALIZE THIS, THINK OF BENEFICIARIES WHO ARE IN MEDI-CAL FEE FOR SERVICE BUT HAVE FOR EXAMPLE A MEDICARE ADVANTAGE PLAN. SO FOR

THOSE OF YOU WHO ARE FOLLOWING ALONG AND ARE LOOKING AT YOUR CHART, THIS IS THE CATEGORY OF BENEFICIARY CAPTURED THE THIRD BLUE COLUMN IN THE ENROLLMENT CHART FROM THE LEFT. SO BEFORE THIS POLICY CHANGE, A BENEFICIARIES IN THAT CATEGORY WHO HAD AN AUGUST BIRTHDAY WOULD HAVE STARTED RECEIVING MANAGED LONG TERM SERVICES AND SUPPORTS NOTICES IN MAY, 90 DAYS AHEAD OF THAT BIRTHDAY. AND THEIR MLTSS COVERAGE WOULD HAVE STARTED IN AUGUST.

THAT SAME BENEFICIARY – AGAIN, PURSUANT TO THE ENROLLMENT STRATEGIES WE HAD IN PLACE PRIOR TO WHAT WE ARE ANNOUNCING TODAY – THAT SAME BENEFICIARIES ENROLLED INTO MLTSS COVERAGE IN AUGUST WOULD HAVE IN OCTOBER STARTED RECEIVING NOTICES RELATING TO THE IMPENDING CAL MEDICONECT ENROLLMENT SCHEDULE. AND AT THAT POINT, THE BENEFICIARY WOULD HAVE TO – OR THE ENROLLEE WOULD HAVE YET ANOTHER HEALTH CARE COVERAGE CHOICE TO MAKE, AGAIN PURSUANT TO THE SERIES OF NOTICES FOR CAL MEDICONECT.

SO WE CERTAINLY AGREED THAT THIS SITUATION CREATED A POTENTIAL FOR BENEFICIARIES CONFUSION, AND WE BELIEVE THAT THAT POTENTIAL FOR BENEFICIARY CONFUSION IN TERMS OF THE ENROLLMENT PROCESS WAS TOO SIGNIFICANT FOR THE BENEFICIARIES AND UNNECESSARY. SO OUR PROPOSAL AND WHAT WE ARE OUTLINING TODAY IS THAT WE ARE GOING TO ALIGN ENROLLMENT IN CAL MEDICONECT AND MLTSS SO THAT BENEFICIARIES ON ARE DEMO ELIGIBLE – THAT IS TO SAY, CAL MEDICONECT BENEFICIARIES – WILL RECEIVE ONE SET OF NOTICES.

SO AGAIN, SAID ANOTHER WAY, MOVING FORWARD, BENEFICIARIES WHO ARE IN MEDI-CAL FEE FOR SERVICE WON'T TRANSITION TO MLTSS AHEAD OF THEIR CAL MEDICONECT ENROLLMENT SCHEDULE AND WILL ALIGN THOSE SCHEDULES AND PROCESS. SO HOPEFULLY REDUCING THE NUMBER OF PLANS CHOICES A BENEFICIARIES WOULD NEED TO MAKE AND REDUCING CONFUSION FOR THE BENEFICIARIES, THEIR CAREGIVERS, AND THEIR FAMILIES. BENEFICIARIES WILL FIRST HAVE AN OPPORTUNITY TO ENROLL INTO CAL MEDICONECT. IF THEY DON'T JOIN, THEN THEY WOULD MAKE THAT DECISION AND THAT CHOICE ABOUT MLTSS.

SO NEXT WE WANT TO TALK A LITTLE BIT ABOUT ADJUSTMENTS IN CONNECTION WITH MLTSS. THE NEXT ADJUSTMENT TO THE TIMELINE IS FOR BENEFICIARIES WHO ONLY ELIGIBLE FOR MLTSS. THOSE EXCLUDED FROM CAL MEDICONECT WHO ARE IN MEDI-CAL FEE FOR SERVICE, AND FOR THOSE FOLLOWING ON YOUR CHARTS, THIS IS THE SECOND BLUE COLUMN FROM THE LEFT. IT IS THE SECOND BLUE COLUMN ON THE LEFT IN THE CHART. IT ALSO APPLIES TO PARTIAL DUALS AND SENIORS AND PERSONS WITH DISABILITIES WHO ARE IN MANAGED CARE – AGAIN, THE FURTHEST RIGHT COLUMN, ALL THE WAY OVER ON THE RIGHT OF YOUR CHART.

SO A COUPLE OF THINGS IN CONNECTION, AND A FEW ADJUSTMENTS IN CONNECTION, WITH ENROLLMENT INTO MANAGED LONG TERM SERVICES AND SUPPORT. TO ALLOW FOR STATE READINESS TO APPROPRIATELY NOTICE THESE BENEFICIARIES, WE ARE GOING TO MOVE BACK MLTSS ENROLLMENT TO AUGUST 1ST FOR THE BENEFICIARIES I JUST MENTIONED. SO DUAL ELIGIBLE BENEFICIARIES – AGAIN, DUAL ELIGIBLE BENEFICIARIES ON THAT BLUE CHART, SECOND BLUE COLUMN FROM THE LEFT – THEY WILL MOVE FROM APRIL TO AUGUST. AND THEN ON THE FAR COLUMN OF THE CHART, THE MEDI-CAL ONLY POPULATION, THEY WILL MOVE FROM JULY TO AUGUST. PREVIOUSLY THEY HAD BEEN SCHEDULED FOR JULY 14TH. WE ARE MOVING BOTH OF THOSE CATEGORIES OF BENEFICIARIES TO AUGUST.

SO FOR BOTH OF THESE CATEGORIES OF BENEFICIARIES, ENROLLMENT WILL COMMENCE IN AUGUST. IT WILL COMMENCE WITH AUGUST BIRTHDAYS, AND IT WILL HAPPEN AND PROCEED ACCORDING TO BIRTH MONTH FOR THE ENROLLMENT INTO MLTSS.

THERE WERE SOME BENEFICIARIES IN THE TWO CATEGORIES OF BENEFICIARY POPULATIONS WHO DID RECEIVE 90-DAY NOTICES IN EARLY MARCH, BECAUSE THEY WERE SCHEDULED TO BE ENROLLED. AS I SAID, THERE WAS SOME SCHEDULED TO BE ENROLLED IN JULY, SO THEY WOULD HAVE RECEIVE THOSE NOTICES IN MARCH. THESE BENEFICIARIES ARE NOT GOING TO RECEIVE 60-DAY NOTICE OR ANY PACKETS. THEY WILL NOT BE ENROLLED IN MLTSS UNTIL THEIR BIRTH MONTH IN 2015. SO AGAIN, WE ARE HOPEFUL

THIS WILL MITIGATE ANY BENEFICIARY CONFUSION. AND AGAIN, WE ARE CONFIDENT AND HOPEFUL THIS MODIFICATION TO THE TIMELINE WILL ALLOW US TO, AGAIN, DO THIS AS THOUGHTFULLY AS POSSIBLE, EASE CONFUSION, AND MAKE SURE THAT EVERYTHING ABOUT THE CCI IMPLEMENTATION CONTINUES TO BE DONE THOUGHTFULLY.

NEXT I WANTED TO GIVE SOME UPDATES IN CONNECTION WITH THOSE BENEFICIARIES WHO ARE RECIPIENTS OF MSSP, THE MULTIPURPOSE SENIOR SERVICES PROGRAM. WE HAVE GOTTEN SOME QUESTIONS ABOUT ENROLLMENT FOR MSSP BENEFICIARIES. SO FOR THOSE LOOKING AT THE APRIL 1 ENROLLMENT CHART, YOU WILL NOTICE THERE ARE HEADERS, THERE ARE COLUMNS TRACKING SPECIFICALLY TO CATEGORIES OF MSSP BENEFICIARIES. AND I'LL WALK THROUGH, AGAIN, A COUPLE OF THE SALIENT ASPECTS OF CCI ENROLLMENT AS THEY IMPACT MSSP BENEFICIARIES.

SO STARTING ON THE LEFT OF YOUR CHART, IN SAN MATEO, FULL DUALS WHO ARE MSSP BENEFICIARIES HAVE ALREADY BEEN ENROLLED INTO CAL MEDICONECT, OR THEY HAVE BEEN ENROLLED INTO MLTSS. SO YOU CAN SEE THAT, AGAIN, ON YOUR CHART IF YOU HAVE IT FRONT OF YOU, FOR SAN MATEO. AGAIN, SAN MATEO, EFFECTIVE YESTERDAY, HAS MSSP BENEFICIARIES ELIGIBLE FOR CAL MEDICONECT ALL ENROLLED INTO THE PLAN IN ONE MONTH FOR APRIL. AND THEN SIMILARLY, FOR MSSP BENEFICIARIES IN MEDI-CAL MANAGED CARE IN SAN MATEO, THEY ARE ALSO ENROLLED FOR MLTSS, AGAIN IN APRIL.

ENROLLMENT IN CAL MEDICONECT OR MLTSS FOR MSSP BENEFICIARIES HAS BEEN MOVED BACK TO AUGUST IN LOS ANGELES, RIVERSIDE, SAN BERNARDINO, AND SAN DIEGO COUNTIES. SO AGAIN, FOR THOSE FOLLOWING ALONG ON YOUR CHART, THIS IS THE THIRD PURPLE COLUMN FROM THE LEFT AND THE THIRD BLUE COLUMN FROM THE RIGHT. SO AGAIN, ENROLLMENT INTO CAL MEDICONECT OR INTO MLTSS FOR MSSP BENEFICIARIES WILL BE AUGUST FOR LOS ANGELES, RIVERSIDE, SAN BERNARDINO, AND SAN DIEGO COUNTIES.

FOR SANTA CLARA, MSSP BENEFICIARIES ALSO WILL BE ENROLLED INTO MLTSS IN SANTA CLARA IN AUGUST. AND THAT IS ALSO TRACKING ON YOUR CHART AS WELL.

SO THOSE ARE THE KEY ENROLLMENT AND SCHEDULE UPDATES THAT WE WANTED TO TALK ABOUT IN TERMS OF THE ALIGNMENT INITIATIVES, MLTSS MODIFICATIONS, AND THEN SPECIFIC WITH REGARD TO MSSP BENEFICIARIES. WE ALSO WANTED TO MAKE SURE AND SPEND A LITTLE TIME TALKING ABOUT ENROLLMENT AND TIMELINE ADJUSTMENT FOR TWO OTHER COUNTIES IN THE COORDINATED CARE INITIATIVE. SO WE WANT TO TALK ABOUT TIMELINE ADJUSTMENTS FOR ALAMEDA AND ORANGE COUNTY.

SO AS ALL OF YOU KNOW, I HOPE, IN DESIGNING CAL MEDICONECT, YOU KNOW, WE CERTAINLY HERE AT DHCS, ALONG WITH OUR FEDERAL PARTNERS AND THE PARTNERS IN THE OTHER STATE DEPARTMENTS WITH WHOM WE HAVE BEEN WORKING, WE CERTAINLY BUILT ON THE EXISTING MEDI-CAL MODEL OF MANAGED CARE TO MAKE SURE PLANS WERE ALREADY FOR COORDINATED CARE INITIATIVE AND SPECIFICALLY CAL MEDICONECT AND MLTSS. THE STATE AND CMS SET UP MULTIPLE LAYERS OF REVIEW.

PLANS NOT YET READY TO MOVE FORWARD IN CCI WILL ABSOLUTELY NOT MOVE FORWARD UNTIL THEY ARE FULLY DEEMED TO BE READY TO TAKE CARE OF THE POPULATIONS AND THE BENEFICIARIES WHO WILL BE ENROLLED INTO THE COMPONENTS OF CAL MEDICONECT AND MLTSS THAT COMPRISE THE COORDINATED CARE INITIATIVE. THROUGHOUT THE PROCESS, HALF OF THE COUNTIES IN CCI HAVE BEEN PLACED ON A SLIGHTLY LONGER IMPLEMENTATION TIME FRAME.

SO SPECIFICALLY IN CONNECTION WITH ALAMEDA ALLIANCE, ALAMEDA ALLIANCE WAS PREVIOUSLY IDENTIFIED AS HAVING AN ISSUE WITH REGARD TO FINANCIAL RESERVES. AND SO DHCS HAS DETERMINED THAT A DELAY UNTIL JULY WAS NEEDED. WE CONTINUE TO WORK COLLABORATIVELY WITH THE ALAMEDA ALLIANCE. WE NOW HOWEVER BELIEVE THAT THE PLAN WILL NEED MORE TIME TO ENSURE THAT IT'S FULLY READY FOR THE COMPONENTS OF THE COORDINATED CARE INITIATIVE.

SO WE ARE ANNOUNCING TODAY THAT ENROLLMENT IN ALAMEDA COUNTY FOR ALL COMPONENTS OF THE COORDINATED CARE INITIATIVE WILL BEGIN NO SOONER THAN JAN OF 2015. AGAIN, FOR THOSE

FOLLOWING ON YOUR CHART, YOU CAN SEE THAT TRACKED ON THE ROW FOR TRACKING JANUARY 15 – AGAIN, FOR ALAMEDA COUNTY.

DMSC, AS WELL AS THE DEPARTMENT OF HEALTH CARE SERVICES, ARE ACTIVELY WORKING WITH ALAMEDA ALLIANCE TO ADDRESS THE ISSUES THAT HAVE BEEN IDENTIFIED AS BARRIERS TO READINESS, AND WE ARE CONFIDENT THAT THAT COLLABORATION WILL ULTIMATELY ENSURE THAT ALAMEDA ALLIANCE WILL BE READY OF JANUARY OF '15.

THE OTHER COUNTY THAT I WANTED TO TALK ABOUT IS ORANGE COUNTY. SO IN JANUARY CMS ANNOUNCED THE RESULTS OF A PROGRAM AUDIT OF THE COUNTY ORGANIZED HEALTH SYSTEM PLAN THAT SERVES ORANGE COUNTY, IS CAL OPTIMA, AND IT'S SPECIAL NEEDS PLAN ONE CARE. AS A RESULT OF THIS AUDIT BY OUR FEDERAL PARTNERS, THERE WERE SEVERAL FINDINGS ISSUED TO THE PLAN. AND OUR FEDERAL PARTNERS INDICATED THAT CAL MEDICONNECT WOULD NOT MOVE FORWARD IN ORANGE COUNTY UNTIL CAL OPTIMA HAD ACHIEVED SUCCESSFULLY AND COMPLETED SUCCESSFULLY ALL OF THE NECESSARY ACTIONS REQUIRED BY CMS PURSUANT TO THAT SPECIAL NEEDS PLAN PROGRAM AUDIT.

DHCS, OUR DEPARTMENT, WAS CONCERNED ABOUT THE ISSUES THAT WERE IDENTIFIED THAT PROGRAM AUDIT. AND ACCORDINGLY, DHCS AND DMHC HAVE CONDUCTED AND HAVE COMPLETED AN AUDIT OF CAL OPTIMA'S MEDI-CAL PROGRAM. THE RESULTS OF THAT AUDIT ARE BEING PUT TOGETHER RIGHT NOW, BUT WE VERY EXPEDITIOUSLY MOVED TO AGAIN CONDUCT AN AUDIT OF THE MEDI-CAL PROGRAM TO ENSURE THAT THE PLAN IN THIS INSTANCE IS FULLY READY TO COMMENCE THE CCI PROGRAM.

SO UNTIL CMS AND DHCS ARE CONFIDENT IN CAL OPTIMA'S READINESS, ENROLLMENT GOING TO BE POSTPONED IN ORANGE. WE ARE CONFIDENT, THOUGH, THAT WE CAN LIKELY PLAN ON COMMENCING IN ORANGE IN JANUARY '15. SO AGAIN, OUR SCHEDULE THAT WE WILL BEGIN SO SOONER THAN JANUARY OF '15 FOR ALL ASPECTS OF CCI ORANGE COUNTY. AND AS I SAID IN CONNECTION WITH ALAMEDA ALLIANCE, DHCS AND DMHC ARE ACTIVELY WORKING WITH CAL OPTIMA TO ADDRESS THE ISSUES AND BARRIERS TO READINESS AND WILL CONTINUE TO DO SO SO THAT WE CAN ENSURE A SUCCESSFUL LAUNCH OF ALL ASPECTS OF CCI IN THE EIGHT CCI COUNTIES.

SO THAT WAS A LOT OF INFORMATION TO GO THROUGH. FOR YOUR PATIENTS, THANK YOU VERY MUCH. AND FOR YOUR ATTENTION, THANK YOU VERY MUCH. AS I SAID, I HOPE THAT ALL OF YOU HAVE THE REVISED CHART THAT WE ISSUED ON APRIL 1ST. CERTAINLY IF YOU HAVE IT OR NOT, AT THIS POINT WE WOULD LIKE TO MAKE TIME FOR QUESTIONS AND ANSWERS. THANK YOU.

>> THANK YOU, MARGARET. SO FOR THOSE OF YOU ON THE LINE THIS HAVE A QUESTION, PLEASE PRESS THE NUMBER THREE, AND WE WILL GET TO AS MANY QUESTIONS AS WE CAN TODAY.

OKAY. SO FIRST WE HAVE ELAINE WONG EAKIN, FOLLOWED BY JANELLE LIM. ELAINE, YOUR MIC IS OPEN.

>> OKAY, GREAT. THANK YOU. CAN YOU HEAR ME?

>> YES, WE CAN HEAR YOU. THANK YOU VERY MUCH, ELAINE.

>> OKAY. YES. THANKS FOR TAKING MY QUESTION. I JUST WANT TO MAKE SURE I HEARD THIS CORRECTLY. WHAT I HEARD WAS THAT L.A. CARE IS OPEN FOR VOLUNTARY ENROLLMENT NOW, BUT STILL BEING REVIEWED FOR PASSIVE ENROLLMENT?

>> YES. SO L.A. CARE IS OPEN FOR VOLUNTARY ENROLLMENT NOW. AND A BENEFICIARIES, A DEMO ELIGIBLE BENEFICIARIES IN LOS ANGELES COUNTY WOULD BE ABLE TO OPT IN AND SELECT L.A. SCARE FOR HIS OR HER CAL MEDICONNECT PLAN.

>> BUT THE OTHER PART OF IT, THAT IT IS STILL BEING REVIEWED FOR PASSIVE ENROLLMENT? I GUESS I WAS MISSING THAT PART.

>> ELAINE, THIS IS AMY TURNIPSEED. AND THE REASON BEHIND US WORKING WITH CMS – AND WE UNDERSTAND L.A. CARE HAS A LOW PER FORMING ICON, SO WE WILL NOT PASSIVELY ENROLL ANYONE IN L.A. CARE – HOWEVER, IF A BENEFICIARIES CHOOSES L.A. CARE, WE WANT TO GIVE THEM THE ABILITY TO

CHOOSE THAT PLAN. SO THAT IS WHERE WE HAVE – WE WILL NOT PASSIVELY ENROLL ANYONE INTO L.A. CARE UNLESS THEY HAVE REMEDIATED THEIR LPI. BUT IF A BENEFICIARY DOES CHOOSE L.A. CARE, THEY HAVE THE RIGHT TO CHOOSE L.A. CARE.

>> OKAY. THANK YOU.

>> THANK YOU, ELAINE.

NEXT WE HAVE JANELLE LIM. JANELLE, YOUR MIC IS OPEN.

>> HI. CAN YOU HEAR ME?

>> YES, WE CAN HEAR YOU, JANELLE.

>> OKAY, GREAT. WE WERE CURIOUS IF THERE WAS A WAY TO GET THE COUNTY BREAK DOWN OF THE NUMBERS OF – YOU SAID THERE WAS 300 ACROSS THE COUNTIES WHEN IT WENT LIVE ON APRIL FOR CAL MEDICONECT. WE WERE WONDERING, IS THERE A WAY TO GET THE NUMBERS PER COUNTY?

>> AGAIN, THIS IS AMY. DHCS AND CMS ARE WORKING ON A DASHBOARD TO PROVIDE THAT INFORMATION, BUT –

>> OKAY.

>> WE HAVE HIGH LEVEL NUMBERS. BUT AS YOU KNOW, IT TAKES A FEW DAYS FROM WHEN ENROLLMENT BEGINS TO GET THE BREAKDOWN. BUT WE ARE HOPEFULLY GOING TO GET THAT DASHBOARD POSTED THE NEXT COUPLE WEEKS.

>> GREAT. I HAVE ANOTHER QUESTION REGARDING THE CAL MEDICONECT PASSIVE ENROLLMENT, THE PURPLE, IN THE PURPLE ON THE CHART?

>> YES.

>> SO I SEE ON THE FIRST COLUMN THERE THAT IT SAYS RIVERSIDE, SAN BERNARDINO, SAN DIEGO, WITH SAN DIEGO FOLLOWED BY A “3” ON THAT FIRST COLUMN, THE MEDICARE FEE FOR SERVICE. SO I WAS JUST KIND OF CONFUSED. SO IT SAYS THEY ARE ALL ENROLLING IN ONE MONTH. BUT THEN IT SAYS THREE MEANS APRIL AND MAY BIRTHDAYS ENROLL MAY 14TH, THEN FOLLOWED BY BIRTH MONTH.

SO ARE THEY NOT ALL GOING IN ONE MONTH, OR ARE THEY ALL GOING IN ONE NO?

>> THAT'S A GOOD CATCH. I'M SORRY, BECAUSE THE THREE IS SUPPOSED TO BE FOR THE SECOND COLUMN. IF SOMEONE IS ALREADY IN THE CAL MEDICONECT MANAGED CARE, THEY ARE GOING TO BE ENROLLED INTO ONE MONTH. BUT IF THEY ARE IN MEDI-CAL FEE FOR SERVICE, THEY WILL BE ENROLLED BY BIRTH MONTH. SO THAT A TYPO. THANK YOU FOR THAT.

>> THANK YOU FOR THAT CATCH.

>> I'M LIKE, I'M A LITTLE CONFUSED.

>> NO. THANK YOU FOR THE CATCH. WE REALLY APPRECIATE IT, AND WE APOLOGIZE. THANK YOU. GOOD CATCH.

>> AND THE THEN ONE IS, WE HAD A QUESTION ABOUT THE PART D DISENROLLMENT NOTICES. ARE THOSE JUST GOING TO THOSE WHO HAVE PART D STAND ALONE POLICIES, OR – I DON'T KNOW IF THAT MAKES SENSE, BUT –

>> IF THEY HAVE A PART D STAND ALONE, MY UNDERSTANDING IS CMS, THERE'S AN AUTOMATIC SYSTEM THAT TRIGGERS THAT NOTICE THAT THEY WOULD BE DISENROLLED FROM THEIR PART D PLAN. WE ARE WORKING WITH CMS ON THE ISSUE. THIS CAME UP WHEN MASSACHUSETTS WAS THE FIRST STATE THAT STARTED THE DUALS DEMONSTRATION. SO THAT'S ON GOING, BUT WE UNDERSTAND THAT IT GOES TO BENEFICIARIES WITH A PART D PLAN.

>> HOW ARE THEY BEING ENROLLED?

>> SO WHAT HAPPENS IS THEY ARE GOING TO BE ON THE SAME PASSIVE ENROLLMENT SCHEDULE. AND SO WHAT HAPPENS IS THAT WHEN THEY ARE PASSIVELY ENROLLED STARTING – AND THEY ARE NOTIFIED WITH THE 60-DAY NOTICE, THEY WILL BE AUTOMATICALLY DISENROLLED FROM THEIR PART D PLAN. AND CMS'S MECHANISM AND OPERATION SEND OUT AN AUTOMATIC DISENROLLMENT NOTICE.

WHEN THE BENEFICIARIES BECOMES AWARE OF THAT CHANGE, THEY CAN CALL 1-800-MEDICARE AND MAKE THE CHANGES NEEDED. BUT THAT IS AN ISSUE WITH CMS WE ARE WORKING ON. WE DON'T HAVE CONTROL OVER THOSE AUTOMATIC DISENROLLMENTS FROM THEIR PART D PLAN.

>> OKAY. GREAT. THANK YOU. I THINK THAT'S ALL.

>> THANK YOU.

>> THANK YOU.

>> NEXT WE HAVE ELI VETSER, FOLLOWED BY SUSAN CHANDLER.

ELI, YOUR MIC IS OPEN.

>> HI, THANK YOU. I'M CALLING FROM JEWISH FAMILY SERVICE IN LOS ANGELES. I HAVE A QUESTION ABOUT THE L.A. COUNTY MSSP ENROLLMENT. AND AS I UNDERSTAND THE CHART, IT INDICATES THAT INDIVIDUALS IN MSSP, CURRENTLY IN MSSP, WILL BE ALL ENROLLED IN AUGUST. PREVIOUSLY WE HAD UNDERSTOOD THAT WAS GOING TO HAPPEN IN JANUARY OF 2015. SO I JUST WANTED TO BE CLEAR THAT THE SORT OF MASS ENROLLMENT OF MSSP, OF BENEFICIARIES CURRENTLY IN MSSP IN L.A. COUNTY IS GOING TO HAPPEN AUGUST 1ST AS OPPOSED TO JANUARY 1ST, 2015. IS THAT CORRECT?

>> YES, THAT IS CORRECT, AS OF THIS CHART. AND WE WILL HAVE TO GO BACK AND CHECK WITH OUR MSSP COLLEAGUES, BUT FROM OUR UNDERSTANDING, IT WILL ALL BE IN AUGUST.

>> OKAY. THANK YOU.

>> NEXT UP IS SUSAN CHANDLER, FOLLOWED BY CONNIE CORALES.

SO SUSAN, YOUR MIC IS OPEN.

>> OKAY. HI. I'M A CALIFORNIAN FOR DISABILITY RIGHTS. AND WE HAVE BEEN HAVING THIS ISSUES WITH OPERATING OUT. AND I'M ON THE CALDUALS – I THINK I'M ON THE HOME PAGE – IT SAYS "KNOW YOUR OPTIONS." SO I SEARCHED FOR OPT OUT, AND IT GAVE ME SOME THINGS, BUT I DON'T SEE ANYTHING THAT JUMPS OUT THAT SAYS OPT OUT.

AND I KNOW ON THE NOTICES IT SAYS YOU HAVE THE RIGHT TO OPT OUT.

>> YES, YOU HAVE THE RIGHT TO OPERATE OUT OF CAL MEDICONECT. HOWEVER, SOMETIMES SAYING OPERATE OUT THERE IS CONFUSION. BECAUSE THERE'S A REQUIREMENT THAT YOU'LL STILL BE MANDATORILY ENROLLED IN MANAGED CARE FOR YOUR MEDI-CAL SERVICES. SO THERE'S AN OPTION WHERE YOU ARE ABLE TO DISENROLL FROM CAL MEDICONECT AND KEEP YOUR CURRENT MEDICARE PROGRAM, IF IT BE MEDICARE FEE FOR SERVICE. HOWEVER, YOU DO HAVE TO CHOOSE A MANAGED CARE PLAN FOR YOUR MEDI-CAL SERVICES.

>> RIGHT. BUT YOU NEED TO – YOU NEED TO MAKE IT CLEARER ON THE WEBSITE. SO SOMEBODY WHO GOES TO THE WEBSITE TO FIND OUT HOW TO OPT OUT NEEDS TO BE ABLE TO FIND IT. I HAVE SEEN SOMETHING THAT SAYS OPERATE OUT. I HAVE GOT ALL OF THESE LITTLE THINGS, AND IT SAYS "READ MORE." BUT WHEN I WENT TO THE FIRST TWO, NOTHING ABOUT OPT OUT.

>> THANK YOU FOR THAT COMMENT. WE WILL TAKE THAT BACK AND LOOK AT OUR WEBSITE AND HOW IT'S STRUCTURED.

>> AND YOU ARE TALKING ABOUT THE –

>> THE CALDUALS.

>> THE CALDUALS. OKAY. THANK YOU.

>> YEAH, IT DOESN'T HAVE TO BE THAT COMPLICATED. IT COULD BE JUST SAY YOU CALL HIGH CAP TO FIND OUT HOW TO OPT OUT, THAT'S ALL. SOMETHING. BECAUSE, I MEAN, NOT EVERYBODY'S SAVVY TO GO TO THE INTERNET AND ALL THAT.

>> THANK YOU FOR YOUR COMMENT.

>> NEXT UP WE HAVE CONNIE CORALES, FOLLOWED BY ALLEN MOSS.

CONNIE, YOUR MIC IS OPEN.

>> HI. IS THIS A MARCELO WITH CONNIE. JUST A CLARIFICATION ON THE CHART. UNDER THE FULL DUALS, MLTSS SIDE –

>> YES?

>> SANTA CLARA IS LISTED IN JULY. IS THAT CORRECT? WE THOUGHT IT WOULD BE EVERYTHING IS MOVED BACK TO AUGUST 1ST FOR THAT GROUP?

>> FULL DUALS THAT ARE ALREADY IN MEDI-CAL MANAGED CARE, THAT IS STILL GOING LIVE IN JULY. THE SWITCH TO AUGUST ARE FOR THOSE IN MEDI-CAL FEE FOR SERVICE. THOSE ALREADY IN A MEDI-CAL MANAGED CARE PLAN WILL JUST GET A SINGLE NOTICE FROM THE PLAN SAYING THAT THEIR LTSS SERVICES ARE NOW PART OF THEIR MANAGED CARE PLAN.

>> ALL RIGHT. OKAY. AND THEN FOR THE SECOND COLUMN FROM THE RIGHT, THE PURPLE COLUMN, MEDICARE FEE FOR SERVICE AND MEDI-CAL FEE FOR SERVICE BY BIRTH MONTH, IS THAT GOING TO BE A 12-MONTH PERIOD IN SANTA CLARA?

>> YES.

>> OKAY. THANK YOU.

>> YOU'RE WELCOME. THANK YOU.

AND ETHICS UP WE HAVE ALLEN MOSS, FOLLOWED BY CHERYL JUMENVILLE.

ALLEN, YOUR MIC IS OPEN.

>> HI. THANKS FOR TAKING MY CALL. I JUST WANTED TO TAG ON TO THE PREVIOUS QUESTION IN REGARDS TO THE PATIENT COUNTS. THE DASHBOARD THAT YOU HAD REFERRED TO, IS IT POSSIBLE FOR YOU GUYS TO PUT LIKE OVERALL STATS FROM THE ENTIRE STATE, SO THAT WE KNOW FROM A PERCENTAGE PERSPECTIVE?

>> I WILL CHECK BACK WITH YOUR DASHBOARD FOLKS. BUT – SO JUST SO I UNDERSTAND YOUR REQUEST, IT'S THE OVERALL – SO WHEN WE SAY 48,000 HAVE ENROLLED INTO MLTSS, THAT'S THE NUMBER YOU WANT INCLUDED, NOT JUST THE COUNTY BREAK DOWN?

>> YEAH. LIKE SO FOR EXAMPLE, IF YOU SAID THERE'S 300 THAT OPTED IN, I THINK I GET A GENERAL SENSE THAT THAT'S NOT A REALLY BIG NUMBER. BUT FOR THE OTHER NUMBER THAT YOU SAID, THAT THERE IS 48,000, I WANT TO GET A GENERAL SENSE OF WHETHER THAT REPRESENTED LIKE 10% OF THE POPULATION OR 50%.

>> OKAY. YEAH. GOT IT. GOT IT.

>> OKAY. THANK YOU.

>> AS AMY SAID, WE ARE WORKING ON THIS DASHBOARD OF METRICS. SO GETTING THE FEEDBACK IN TERMS OF HOW YOU WOULD OPTIMALLY LIKE TO GET THE METRICS IS VERY VERY HELPFUL.

>> UH-HUH. OKAY. THANK YOU.

>> THANK YOU.

>> NEXT UP WE HAVE CHERYL JUMENVILLE, FOLLOWED BY EDNA TAYLOR MOORE.

CHERYL, YOUR MIC IS OPEN.

>> THANK YOU VERY MUCH. MY NAME IS CHERYL JUMENVILLE, AND I'M FROM RIVERSIDE COUNTY. AND I HAVE AN IMD FACILITY, WHICH IS AN INSTITUTE FOR MENTALLY DISEASED FACILITY. AND I WAS CURIOUS AS TO WHAT YOUR UNDERSTANDING IS HOW THE COVERAGE IS FOR THESE TYPE OF FACILITIES. WE HAVE A FEW IN THE RIVERSIDE SAN BERNARDINO AREA, AND THERE'S JUST A LOT OF CONFUSION AS TO HOW THE CCI PROGRAM WORKS WITH THESE TYPE OF FACILITIES.

>> HI, CHERYL. THIS IS COURTNEY KASUGAI. AND SO INSTITUTIONS FOR MENTAL DISEASES ARE COVERED UNDER THE CAL MEDICONECT PROGRAM, AND WE ENCOURAGE YOU TO VISIT THE CALDUALS WEBSITE AND GO TO THE IMPLEMENTATION CENTER. AND UNDER THE IMPLEMENTATION CENTER, THERE'S A NUMBER OF POLICY TOPICS. AND THERE IS A TOPIC RELATED TO BEHAVIORAL HEALTH COORDINATION. AND IN THAT TAB WE DO HAVE AN IMD FACT SHEET, AND I ALSO THINK THAT THE BEHAVIORAL HEALTH COVERAGE MATRIX WILL BE BENEFICIAL FOR YOU, BECAUSE IT KIND OF LAYS OUT THE DIFFERENT TYPES OF IMD'S THAT ARE COVERED AND WHO COVERS THEM, INFORMATION LIKE THAT.

>> OKAY. BECAUSE MY UNDERSTANDING WAS THAT 21-64 YEAR OLDS ARE NOT COVERED IN THE CCI PROGRAM.

>> WELL, THEY ARE SUBJECT TO THE IMD EXCLUSION. SO ANY BENEFICIARIES WHO FALLS BETWEEN THE AGE RANGES OF 22 AND 64 WHO ENDS UP WITH AN IMD, THOSE SERVICES ARE GOING TO BE COVERED BY THE COUNTY. AND AGAIN, ALL THAT INFORMATION IS LAID OUT IN THE BENEFITS MATRIX THAT WE HAVE POSTED ON CALDUALS.

>> OKAY. AND IF – I HAVE A QUESTION FROM THERE. WHO WOULD I CALL?

>> SUBMIT YOUR QUESTION TO INFO @ CALDUALS.COM, OR INFO @ CALDUALS.ORG, AND WE WILL MAKE SURE THAT QUESTIONS GETS SENT TO THE RIGHT PERSON.

>> GREAT. OKAY. THANK YOU.

>> THANK YOU.

NEXT UP WE HAVE EDNA TAYLOR MOORE, FOLLOWED BY VORDANA LUKOTICH. SORRY IF I MESSED THAT UP. BUT EDNA, YOUR MIC IS OPEN.

>> OKAY. HI, CAN YOU HEAR ME?

>> YES, WE CAN. THANK YOU.

>> OKAY. THANKS FOR TAKING MY CALL. I'M WITH HOME OF GUIDING HANDS. WE ARE IN SAN DIEGO COUNTY. AND WE ARE SORT OF COMING LATE TO THE GAME HERE. WE ARE – WE PROVIDE SERVICES FOR – UNDER THE ICF FACILITIES. AND WE ARE NOT SURE IF IT'S JUST OUR HEALTH CARE BENEFITS OF OUR RESIDENTS WILL BE AFFECTED, OR IF MUCH MORE THAN THAT IS BEING AFFECTED. IT'S HARD TO TELL, SOME OF THIS WORDING, WHAT'S ACTUALLY BEING AFFECTED FOR OUR AGENCY. DO YOU KNOW WHAT I AM ASKING?

>> YES. I BELIEVE YOU ARE ASKING IF YOUR RESIDENTS OF ICF ARE EXCLUDED OR INCLUDED FROM CAL MEDICONNECT.

>> YES. YES, PART OF IT. YES. HELLO?

>> YES, WE ARE JUST LOOKING AT OUR INFORMATION. YES, THOSE IN AN ICF ARE EXCLUDED FROM CAL MEDICONNECT.

>> COMPLETELY.

>> THEY SHOULDN'T BE RECEIVING NOTICES REGARDING THE CAL MEDICONNECT PROGRAM.

>> THEY SHOULD NOT BE? OKAY.

>> YEAH, THEY SHOULD NOT BE. AND IF ANY OF THE RESIDENTS RECEIVE A NOTICE, PLEASE LET US KNOW. AND PLEASE SEND A NOTICE TO INFO @ CALDUALS.ORG. BECAUSE AGAIN, AS AMY INDICATED, RESIDENTS IN THOSE FACILITIES ARE EXCLUDED.

>> THANK YOU. NEXT WE HAVE GORDANA, FOLLOWED BY VANTROS RODRIGUEZ.

SO GORDANA, YOUR MIC IS OPEN.

>> NO WORRIES. HI, THIS IS GORDANA. YOU ACTUALLY DID A GREAT JOB WITH THE PRONUNCIATION. THANK YOU FOR TAKING MY CALL. ACTUALLY, MY INITIAL QUESTION WAS ANSWERED. I WAS WONDERING ABOUT THE 300, IF THEY WERE IN LOS ANGELES COUNTY. AND I BELIEVE IT WAS AMY WHO RESPONDED THAT YOU WOULD BE SENDING THAT INFORMATION OUT.

I ALSO JUST WANTED TO SAY THANK YOU TO MARGARET FOR A WELL ORGANIZED PRESENTATION, AND I WILL E-MAIL ANY ADDITIONAL QUESTIONS.

>> ALL RIGHT. THANK YOU VERY MUCH. WE ARE GLAD YOU JOINED US, AND PLEASE – TO EVERYONE, NOT JUST GORDANA – PLEASE FEEL FREE TO SEND YOUR QUESTIONS AND FOLLOW UP ISSUES TO CALDUALS.ORG.

>> AND JUST TO CLARIFY, THAT 300 OPERATE IN IS NOT JUST IN L.A., ITS ACROSS THE FOUR COUNTIES. SO THAT 300 COUNT INCLUDES RIVERSIDE, SAN BERNARDINO, SAN DIEGO, AND LOS ANGELES. AND WE WILL WORK ON, WHEN WE GET THE DASHBOARD, TO SAY WHICH ONE OF THOSE ARE IN WHICH COUNTIES.

>> AND SIMILARLY, PURSUANT TO THE QUESTION TWO FOLKS AGO, WE WILL BREAK DOWN IN THE DASHBOARD THAT 48,000 NUMBER FOR THOSE WHO ARE CURRENTLY AFFECTED, GOING TO BE RECEIVING MLTSS THROUGH THE MANAGED CARE PLAN AS WELL. SO WE WILL TAKE ALL OF THAT INTO ACCOUNT.

>> THANK YOU. NEXT UP WE HAVE SANTOS RODRIGUEZ, FOLLOWED BY DEBORAH DOCTOR.

SANTOS, YOUR MIC IS OPEN.

>> THANK YOU. WE ARE CALLING FROM ULTIMATE HEALTH SERVICES IN LOS ANGELES. A COUPLE QUESTIONS. ONE IS JUST TO CLARIFY, IN TERMS OF THE NOTICES, THE WAY IT WAS EXPLAINED – SO STARTING NOW IN APRIL, THE NOTICES ARE FOR THE 90-DAY, 60-DAY, 30-DAY TYPE OF NOTICES. AND ALSO IN APRIL, THE OCTOBER BIRTHDAYS WOULD GET NOTICES OF OPEN ENROLLMENT. IS THAT CORRECT?

>> THAT'S RIGHT. SO FOR THOSE WITH – I'M SORRY, JULY BIRTHDAYS IN LOS ANGELES COUNTY, THEY SHOULD HAVE RECEIVED THEIR 90-DAY NOTICES. IT WENT OUT LAST WEEK, BUT THEY SHOULD HAVE GOTTEN IT IN THE MAIL EARLY THIS WEEK. IN TERMS OF THE VOLUNTARY NOTICE – WE DIDN'T WANT TO SEND OUT THE VOLUNTARY NOTICES TO THOSE RECEIVING THE 90-DAY NOTICE, TO AVOID CONFUSION. THE VOLUNTARY NOTICE IS A ONE-TIME NOTICE, AND THAT WILL BE – START GOING IN WAVES, AS MARGARET SAID. THE FIRST WAVE TO RECEIVE IT WOULD BE THOSE WITH OCTOBER BIRTHDAYS.

>> AND THOSE GO OUT THIS MONTH, ALSO IN APRIL, CORRECT?

>> YES.

>> OKAY. ANOTHER QUESTION BY MY COLLEAGUE HERE, FABULOUS.

>> SO FOR THOSE CLIENTS THAT WANT TO DO THE VOLUNTARY ENROLLMENT, ARE WE ABLE TO DOWNLOAD OR GET THE CHOICE FORM ONLINE INSTEAD OF SENDING THEM TO A 1-800 NUMBER, AS IT DOES TAKE QUITE SOME TIME TO GET THROUGH THE PHONE SYSTEM SOME

>> UNFORTUNATELY, THE CHOICE FORMS ARE PATIENT SPECIFIC. AND WHEN THEY ARE PUBLISHED THROUGH MAXIMUS, THE PLAN OPTIONS ARE COUNTY LEVEL. SO I'LL HAVE TO GO BACK AND TAKE A LOOK, BUT MY UNDERSTANDING IS THAT THE WAY TO VOLUNTARILY OPT IN IS CALL HEALTH CARE OPTION.

>> WHAT WE ARE TRYING TO DO IS, IF POSSIBLE, ASSIST OUR CLIENTS AS IN THE PAST WITH THE SPD'S, WE HAVE ACCESS TO THE FORMS, YOU KNOW, WE WERE ABLE TO HAVE THE PATIENT SIGN THEM, COMPLETE THEM WITH THE PROPER INFORMATION, AND MAIL THEM IN. AND WE KNEW THAT THAT TRANSACTION WAS COMPLETED, VERSUS WE ARE GIVING THEM THE NUMBER. AND AT TIMES IT'S VERY DIFFICULT FOR THEM TO ASK THE QUESTION. THEY DON'T EVEN KNOW AT TIMES WHAT THEY ARE TRYING TO ASK. SO IF YOU COULD GET BACK TO THAT, IT WOULD BE GREAT. BECAUSE THAT IS GOING TO FACILITATE I THINK A LOT OF THE HEADACHES FOR THE FAMILY MEMBERS AND THE SENIORS.

>> NO, THANK YOU VERY MUCH. IF YOU CAN E-MAIL US AT INFO @ CALDUALS, I WILL FOLLOW UP WITH OUR ENROLLMENT FOLKS HERE AND SEE IF THERE'S A WAY WE CAN GET YOU A PACKET OF CHOICE FORMS TO YOUR ORGANIZATION, AND YOU CAN SHARE THAT WITH YOUR BENEFICIARIES.

>> THANK YOU SO MUCH.

>> FANTASTIC. THANK YOU.

>> SO JUST FOR OUR CLARIFICATION, ARE YOU SAYING THAT THAT WAS A PROCESS THAT YOU WERE ABLE TO UNDERTAKE IN OTHER TRANSITIONS?

>> YES. DURING THE SPD'S, WE HAD BASICALLY KIND OF LIKE THE SAME CONFUSION. SO WE DID HAVE A PACKAGE OF CHOICE FORMS. SO THEY ARE BLIND CHOICE FORMS, AND WE HAVE THE INFORMATION OR EVEN THE CLIENT, WE WOULD PROVIDE THE PINK COPY, WHICH IS THE ONE THAT WE KEEP WITH THE PATIENT, AS WELL AS KEEPING A COPY IN OUR RECORDS. AND WE WERE MAILING THEM OUT, AND WE WERE ABLE TO TRACK BACK WHAT PATIENTS WE HAD SEND OUT AND SUCCESSFULLY KNOW THEY WERE ENROLLED INTO THE ADEQUATE HEALTH PLAN.

AND AGAIN, FOR OUR COMPANY, WE HAVE VARIOUS MEDICAL CLINICS AND WE WANT TO MAKE SURE THEY ARE KEEPING THEIR PROVIDERS AND THE DOCUMENTATION IS COMPLETED BY SOMEONE WHO CAN GIVE THEM PROPER INFORMATION.

>> SO WE WILL DEFINITELY LOOK INTO THAT. IF YOU COULD PLEASE E-MAIL US AT INFO @ CALDUALS – AND THIS IS AMY. I'LL RESPOND TO YOU IN A WAY – ONCE I FOLLOW UP WITH OUR ENROLLMENT COLLEAGUES TO SEE THAT'S POSSIBLE.

>> THANK YOU VERY MUCH.

>> APPRECIATE THAT. THANK YOU.

>> THANK YOU.

NEXT UP WE HAVE DEBORAH DOCTOR, FOLLOWED BY SASHA DAHL

DEBORAH, YOUR MIC IS OPEN NOW.

>> DEBORAH? DEBORAH?

>> IT MIGHT BE ON MUTE ON YOUR END. SO WE WILL GO TO SASHA, AND THEN COME BACK TO YOU.

>> OKAY. WE ACTUALLY GOT OUR QUESTION ANSWERED BY ALTIMA. AND SO WE WILL E-MAIL YOU AS WELL FOR THOSE CHOICE FORMS.

>> THANK YOU.

>> THANK YOU.

>> GO BACK TO DEBORAH, THEN.

DEBORAH, YOUR MIC IS OPEN.

>> CAN YOU HEAR ME?

>> YES, WE CAN HEAR YOU NOW, DEBORAH.

>> OKAY, THANK YOU. JUST A COUPLE OF FOLLOW UP POINTS, GOING BACK TO SOME OF THE FIRST QUESTIONS. ON THE L.A. CARE VOLUNTARILY ENROLLMENT, I JUST WANT TO REPEAT THAT WE DID NOT THINK IT WAS A GOOD IDEA TO NOT TELL PEOPLE WHO ARE MAKING A VOLUNTARY CHOICE ABOUT THE SITUATION WITH L.A. CARE. YOU KNOW, THEY ARE DISADVANTAGED BY NOT HAVING THE INFORMATION THAT THERE'S A LOW PERFORMING ICON. SO I WANT TO SAY THAT AGAIN.

IN RESPONSE TO SUSAN CHANDLER'S QUESTION, PERHAPS YOU COULD DESCRIBE WHETHER OR NOT THE CHOICE FORMS THEMSELVES ARE GOING TO HAVE A CHOICE THAT SAYS I WANT TO KEEP MY MEDICARE THE WAY IT IS. AND THEN THE THIRD THING IS KIND OF RELATED TO THE CALLER WHO SUGGESTED SENDING FORMS TO VARIOUS OTHER LOCATIONS. WITHOUT REGARD TO WHETHER IT'S A GOOD IDEA OR NOT, AND IT MAY, JUST A REMINDER THAT EVERYTHING NEEDS TO BE IN ACCESSIBLE FORMATS AND OTHER LANGUAGES. AND I WOULD LIKE TO KNOW THE PROGRESS WITH THAT ISSUE. THANK YOU.

>> THANK YOU. SO I THINK GOING BACKWARD IN TERMS OF YOUR POINTS, DEBORAH, CERTAINLY NUMBER ONE, IN TERMS OF ACCESSIBLE FORMATS. FOR DEBORAH AND FOR ALL THE OTHER FOLKS ON THE CALL, WE HAVE BEEN TALKING TO AND WORKING WITH A WIDE ARRAY OF STAKEHOLDERS IN CONNECTION WITH HOW WE BOTH CURRENTLY ENSURE OR PROVIDE NOTICES AND MATERIALS IN ACCESSIBLE FORMATS TO BENEFICIARIES WHEN THEY EXPRESS THE NEED TO RECEIVE THE MATERIALS IN THE ALTERNATIVE FORMATS. AND WE HAVE HEARD THAT THERE ARE THINGS THAT WE CAN DO BETTER.

WE ARE WORKING ON AN APPROACH TO IMPROVE, HOPEFULLY, HOW WE ENSURE ACCESSIBLE FORMATS TO BENEFICIARIES. WE HOPE TO BE ABLE TO ROLL THAT OUT HERE IN THE NEXT 10 DAYS, WEEK TO 10 DAYS. AS I WOULD IMAGINE, FOLKS CAN IMAGINE, WHENEVER YOU ARE DEALING WITH, YOU KNOW, LARGE-SCALE SYSTEMS AND THE PROCESSES RELATING TO PRODUCTION OF DOCUMENTS SUCH AS NOTICES AND MATERIALS, WE ABSOLUTELY JUST HAVE TO BE THOUGHTFUL ABOUT HOW WE MODIFY OUR PROCESSES, MODIFY PRODUCTION SCHEDULES – AGAIN, TO, YOU KNOW, IMPROVE OUR PROCESSES CERTAINLY, BUT TO DO SO THOUGHTFULLY AND TO MAKE SURE THAT, YOU KNOW, WE CAN OPERATIONALIZE WHAT WE WANT TO DO IN THIS INSTANCE.

SO WE HAVE – WE WILL HAVE A PROPOSAL ON MODIFICATIONS TO OUR CURRENT PROCESSES. FOR THOSE ON THE PHONE, OUR CURRENT PROCESSES, HIGH LEVEL IS THAT BENEFICIARIES CAN REQUEST

FORMATS, ALTERNATIVE FORMATS VIA PHONE TO HCO. SO WE ARE WORKING ON THAT NOW. AND AGAIN, HOPEFULLY THE TIME FRAME WILL BE NEXT 10 DAYS, TWO WEEKS.

IN CONNECTION WITH THE CHOICE FORM, FOR DEBORAH AND IN RESPONSE TO THE QUESTIONS AND FOR ALL OTHERS ON THE PHONE, WE HAVE GOTTEN A LOT OF FEEDBACK THAT THE CHOICE FORMS THAT ARE CURRENTLY BEING DISTRIBUTED IN CONNECTION WITH THE PACKETS THAT ARE OUT PURSUANT TO THE SCHEDULE AND TIMELINES WE HAVE WORKED THROUGH AND WALKED THROUGH TODAY, WE HAVE HEARD THAT THAT CHOICE FORM COULD BE CLEARER AND COULD BE REVISED SO THAT IT WOULD MUCH MORE CLEARLY ALLOW BENEFICIARIES THEIR FAMILIES AND THEIR CAREGIVERS TO ASCERTAIN HOW THEY COULD OPT OUT OF CAL MEDICCONNECT. SO WE HAVE TAKEN THAT FEEDBACK.

WE ARE ALSO WORKING WITH OUR FEDERAL PARTNERS AT CMS TO DO FOCUS GROUP AND BENEFICIARY TESTING ON THE MODIFICATIONS THAT WE ANTICIPATE MAKING TO THE CHOICE FORM. AGAIN, YOU KNOW, CONSISTENT WITH OUR COMMITMENT TO CONTINUOUSLY IMPROVE AND REFINE WHAT WE DO BASED ON THE INPUT WE RECEIVE AND THE FEEDBACK THAT WE GET FROM STAKEHOLDERS.

SO THANK YOU FOR THOSE TWO ITEMS, AND HAPPY TO TAKE ANY QUESTIONS, AS ALWAYS. FOR THOSE ON THE PHONE, EVERYBODY CAN USE CALDUALS.ORG TO SEND US SUGGESTIONS, INPUT, RECOMMENDATIONS. THANK YOU.

>> THANK YOU. SO I SEE THAT IT'S 12:01. AND UNFORTUNATELY, WE CAN'T TAKE ANY MORE QUESTIONS. AND THERE ARE A NUMBER OF PEOPLE STILL IN THE QUEUE WITH YOUR HANDS RAISED. SO WE REALLY ENCOURAGE YOU TO PUT IN WRITING AND SEND TO US YOUR QUESTIONS OR COMMENTS, AND WE WILL BE SURE TO ADDRESS THEM. AND AGAIN, THE BEST PLACE TO SEND THOSE QUESTIONS AND COMMENTS IS TO INFO @ CALDUALS.ORG.

THANKS, EVERYONE.