The following text is a transcript of the October 16, 2023 Data Exchange Framework Information is Power Webinar: *Round 3 Grants and DxF Exchange Scenario.* The transcript was produced using Zoom's transcription feature. It should be reviewed concurrently with the recording – which may be found on the CalHHS Data Exchange Framework website to ensure accuracy.

[Ethan K - Events] 13:30:47

And I'll be in the background answering any Zoom technical questions. If you experience difficulties during this session, please type your questions into the Q&A.

[Ethan K - Events] 13:30:55

We encourage you to submit written questions at any time using the Q&A. During today's live event, live close captioning will be available.

[Ethan K - Events] 13:31:02

Please click on the CC button at the bottom of your Zoom window to enable or decision. With that, I'd like to introduce Dan Mcallen, Deputy Director, Data Exchange Framework, CDI.

[DeeAnne McCallin] 13:31:15

Thank you, Ethan. Thanks for joining us today, everyone. My name is Deanne McCallan with the Data Exchange Framework at the Center for Data Insights and Innovation.

[DeeAnne McCallin] 13:31:25

And I'm pleased to welcome you to today's instalment of our Data Exchange framework, information is power webinar series.

[DeeAnne McCallin] 13:31:32

For those of you who are joining us for the first time, the information is power series is a set of informational webinars that CDII has been hosting to discuss California's data exchange framework.

[DeeAnne McCallin] 13:31:45

Its data sharing agreement and policies and procedures. You might hear of us refer to these words that I just spoke as DXF.

[DeeAnne McCallin] 13:31:54

DSA for data sharing agreement and PNPs for the policies and procedures. We cover the programs we are developing to support the implementation of the exchange under the framework.

[DeeAnne McCallin] 13:32:06

We are ongoing reference each webinar is recorded and posted to the Cal HHS data exchange framework web page along with the presentation slides.

[DeeAnne McCallin] 13:32:19

Joining me today is a Cindy Barrow, Senior Advisor from Nat Health Strategies and there's other support folks with us today and people who work every single day on the Data Exchange framework.

[DeeAnne McCallin] 13:32:33

So thanks to everybody for joining us here today.

[DeeAnne McCallin] 13:32:36

We will accept questions and answers. You're able to submit questions through the Zoom Q&A function.

[DeeAnne McCallin] 13:32:43

CDII will select questions to be answered live during the webinar as time allows. And if your question was not answered during the session and you would like to follow up, please submit it to CDII at COHS.

[DeeAnne McCallin] 13:32:58

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Ca. Gov even if we're not able to answer your questions, they do help your questions help to inform us whether we're approaching and covering the right content and the things that are needed for the stakeholders and the folks who will be exchanging under the framework.

[DeeAnne McCallin] 13:33:13

So, we may not always have time and we may not always have the right answers at our fingertips, but we do appreciate questions coming in.

[DeeAnne McCallin] 13:33:23

The agenda for today. We will be covering the vision for data exchange in California. Covering program updates under the framework.

[DeeAnne McCallin] 13:33:34

We're covering a good portion of the data sharing agreement, signatory grants program round 3. And then we'll go into some exchange scenarios trying to help.

[DeeAnne McCallin] 13:33:45

Dimystify the data exchange framework. And then we will follow up on questions and answers.

[DeeAnne McCallin] 13:33:54

The vision for exchange in. Once implemented across California, the data exchange framework will create new connections and efficiencies between health and social services providers.

[DeeAnne McCallin] 13:34:07

Improving whole person care. The data exchange framework is California's first-ever statewide data sharing agreement.

[DeeAnne McCallin] 13:34:15

A single data sharing agreement that all parties signed to that requires the secure and appropriate exchange of health and human services information to enable the providers of care to work together and improve in individuals health and well-being.

[DeeAnne McCallin] 13:34:33

Those who must sign the data sharing agreement, this is based upon health and safety code 1 3 0 2 9 0 so it's actually in law and that these organizations were required to sign the data sharing agreement under the framework this past January, January, the 30 first, 2,023, regardless as to whether their mandate to exchange under the framework.

[DeeAnne McCallin] 13:34:58

Is January 30 first 24 or some entities have until January 30 first 2026 so the type the entity types that are in health and safety code 1 3 0 2 9 0 that are required to sign the DSA, our general acute care hospitals, physician organizations, and medical groups.

[DeeAnne McCallin] 13:35:19

Skilled nursing facilities. Health care service plans and disability insurers, and which includes medical managed care plans.

[DeeAnne McCallin] 13:35:29

Clinical laboratories and the cute psychiatric hospitals. So if you work for or you represent one of these entity types, hopefully you have signed the DSA and if you're not, if you have not yet signed, you are able to still sign the signing portal is open and we do encourage everyone to sign.

[DeeAnne McCallin] 13:35:48

Where to sign the DSA? We do have a signing portal. The URL is at the bottom.

[DeeAnne McCallin] 13:35:53

Signed DXF dot power apps portal. Calm. If anybody's able to drop that into the chat, it is available pretty.

[DeeAnne McCallin] 13:36:04

Well folks spotlighted on our webpage and so when you go to this signing portal there's a register to start and otherwise you would have a login to be able to go in to find more information about the data sharing agreement and how to get to access to this portal.

[DeeAnne McCallin] 13:36:22

We do have our website where you can find the actual DSA that which you're signing to electronically it comes to about 11 or so page PDF if you want to pull that PDF down and read it outside of the signing portal.

[DeeAnne McCallin] 13:36:36

You can get it through CDIs, DXF webpage. We have our policies and procedures, which is what you're signing the DSA, that you will follow the terms and conditions in those.

[DeeAnne McCallin] 13:36:48

We have that fake queues on it's 30 some FAQs and growing. And we have historical meeting materials and recordings.

[DeeAnne McCallin] 13:36:56

So transcripts you can read questions and answers you can read. Slide decks that you can view and then you can log in and listen to our wonderful voices if you, and maybe put it on one and a half speed or something like that.

[DeeAnne McCallin] 13:37:09

We have a list of who has signed so you can click on a link on our webpage and it shows you the entities.

[DeeAnne McCallin] 13:37:16

And how they identified themselves in the signing portal.

[DeeAnne McCallin] 13:37:22

What we've been up to the last month. So we covered a broad strokes of what we work on is governance, the policies and procedures that are in development.

[DeeAnne McCallin] 13:37:33

Grant's program and QHIO, which stands for Qualified Health Information Organization.

[DeeAnne McCallin] 13:37:40

Under governance over the past month we have a implementation advisory committee meeting that will be held on November sixteenth.

[DeeAnne McCallin] 13:37:47

And that meeting will include updates on the grants program, the QHIO program in the PNP.

[DeeAnne McCallin] 13:37:53

So governments look governance looks at everything. We have a notice of intended administrative changes to the individual access services PNP.

[DeeAnne McCallin] 13:38:29

Grant's program where we have a number of slides in this deck and in content that we'll be covering. Round 3 opens today.

[DeeAnne McCallin] 13:38:36

So if you have been waiting for the grant application window to open again, it's open today. Welcome back.

[DeeAnne McCallin] 13:38:42

And we if we have not yet posted the list of awardees from round 2 that's coming soon.

[DeeAnne McCallin] 13:38:48

We have been working on the list. We just wanna make sure everything and conforms and provides the best information available for you to be able to see.

[DeeAnne McCallin] 13:38:55

Who has already applied and been awarded a grants. And then the QHIO application. So we, our CDI is reviewing the applications from entities that have requested to become a qualified health information organization under the Data Exchange framework and hopefully later this month you'll be hearing about the named qualified HIOs.

[DeeAnne McCallin] 13:39:22

Grant application rounds. So as mentioned, we open slide round 3 today, October sixteenth. We do not know if there will be a fourth round.

[DeeAnne McCallin] 13:39:33

I do encourage folks to apply. If I was working on in the field and was an eligible entity for, HIT funding to help support and subsidize what is needed to be able to exchange might what might be needed to exchange under the data.

[DeeAnne McCallin] 13:39:51

Exchange framework. I'd really be looking to apply before Thanksgiving. So I don't anticipate funds will be depleted by them.

[DeeAnne McCallin] 13:40:00

We do not do, we do a full batch of review of applicants. But sooner rather than later not to rush you through October or anything like that, but you might not wanna wait until December and you might not want to wait until 4.

[DeeAnne McCallin] 13:40:16

These are funds that are not. Evergreen. So do encourage folks to be looking into and listening to the grant program opportunities.

[DeeAnne McCallin] 13:40:27

So if you have signed the data sharing agreement or if you're about to leave today's webinar and go and sign the data sharing agreement.

[DeeAnne McCallin] 13:40:34

What now? You can apply for grants as we said to help offset the cost of relevant technical assistance or onboarding to a QHIO.

[DeeAnne McCallin] 13:40:44

We do you can lean on educational grantees who are contracted with CDII through the end of this year who have created a great web-based resources for you and have done a lot of webinars and info sessions and material that's tailored.

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[DeeAnne McCallin] 13:41:06

Towards the specific organizations and entity types. And we do have a slide coming up on that to give you a little bit more information.

[DeeAnne McCallin] 13:41:13

Do encourage everybody to read the DSA and its policies and procedures. Collectively it's probably about a hundred pages and it's in relative small bytes anywhere from 3 to 10 page chunks.

[DeeAnne McCallin] 13:41:27

In a sense almost like a chapter so Do read them and and don't worry about them as you're reading them if you don't know what it stands for I would suggest you read them.

[DeeAnne McCallin] 13:41:37

Read them in their entirety, maybe go and listen to a webinar. Available on our website and then go back to them and think, okay, what's my organization doing today and what does my organization need to do tomorrow to be ready for exchange.

[DeeAnne McCallin] 13:41:52

Understand what information you have to exchange. And when you have to start exchanging. So you won't understand that in that very well if you haven't looked at the DSA in the policies and procedures.

[DeeAnne McCallin] 13:42:04

Ensure that you have the technical capabilities needed to exchange. And you would need to do some sort of an assessment capacity in determining whether you need to upgrade or onboard to new technology.

[DeeAnne McCallin] 13:42:18

So that's an area where you need to lean on others outside of CDI and the data exchange framework because we're not your technology vendor.

[DeeAnne McCallin] 13:42:27

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But there's definitely things that you'll be able to questions you should be able to ask your vendors.

[DeeAnne McCallin] 13:42:32

You should be able to ask your vendors and whatnot to to know if you're and they probably also have resources on their website.

[DeeAnne McCallin] 13:42:40

Data exchange framework is likely not new to any such vendor or technology, infrastructure out there.

[DeeAnne McCallin] 13:42:46

You can email cdii@sths.ca.gov to be added to our mailing list if you're not already on it.

[DeeAnne McCallin] 13:42:58

This is the table and even if you're interested today in this web deck isn't going to be posted for a couple days.

[DeeAnne McCallin] 13:43:07

We go through remediation to make sure it's compliant and accessible for all our previous decks have this slide slide in it so you can also find this information on our website.

[DeeAnne McCallin] 13:43:16

You can find this information in our FAQ as well. But these are the different entities who have been working all year providing education and outreach information on the data exchange framework, a lot of trusted associations and organizations that many of you work with.

[DeeAnne McCallin] 13:43:33

And so they have websites available for material and collateral that's specific to you and the data exchange framework and they have email addresses as well.

[DeeAnne McCallin] 13:43:41

So we do encourage you to take advantage of their resources, especially through the next 2 and a half months as the one-year education grantee program is through this calendar year presently.

[DeeAnne McCallin] 13:43:58

Learn more about the data exchange framework. So CDI does have a data exchange framework web page and then we also have this different website.

[DeeAnne McCallin] 13:44:08

So it has a very different look and feel we're trying to tailor material to those who need it so some are very a little more literal and black and wine and they just want like the non graphic friendly information to go and read it and pluck it out.

[DeeAnne McCallin] 13:44:26

This web page is a great website. We often refer to it as our micro site that really does a great job.

[DeeAnne McCallin] 13:44:32

Summarizing and laying it out differently if you're not able to find things on the CDI web page, you might well be able to, this, this page website may resonate for you.

[DeeAnne McCallin] 13:44:43

So dxf.chs.ca.gov. I'm our colleagues are dropping these chats and into these links into the chat.

[DeeAnne McCallin] 13:44:55

So, grant program update on round 3. The DSA Signatory Grants Program. So one of the key things is the name of this is that you need to have signed the DSA to be able to be eligible to apply for and be awarded for this grant.

[DeeAnne McCallin] 13:45:14

Its purposes so that funds can be used to implement a range of activities needed to achieve real-time data exchange in accordance with the Data Exchange framework.

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[DeeAnne McCallin] 13:45:24

Eligibility, you must have signed the DSA and demonstrate through an application process that you have a technology need.

[DeeAnne McCallin] 13:45:33

To be awarded a DSA signatory grant. Funding amounts. Applicants may request between 15,000 $100,000 dependent on organizational characteristics and per electronic record instance.

[DeeAnne McCallin] 13:45:48

So there's a cost basically if you have 2 or 3 connections that would be an instance if they're very separate and unique and that one cannot access the same like if I'm the patient cannot access my record in one and versus the other that would be 2 different instances are needed.

[DeeAnne McCallin] 13:46:05

We have a detailed grants guidance document, that you, we encourage folks to look at and review.

[DeeAnne McCallin] 13:46:13

And there's also an application template so you can also look at what the grants portal is asking for before you go in and submit an application or start filling in.

[DeeAnne McCallin] 13:46:23

There's 2 pathways for a DSA signatory grant. A qualified health information organization onboarding grants.

[DeeAnne McCallin] 13:46:32

So how do you become a client? How do you onboard to an HIO to be able to utilize.

[DeeAnne McCallin] 13:46:38

What their services are in their infrastructure for the exchange of health. And social service information. The QHIO domain is an assisted pathway for organizations seeking to onboard to a QHIO.

[DeeAnne McCallin] 13:46:51

Applications are submitted by a third party, K-high, which is the California Association of Health Information Exchanges who was contracted with CDII, one of our trusted partners, and they do the actual application on your behalf.

[DeeAnne McCallin] 13:47:08

They talk with you, they learn about your organization. Ask a lot of questions for being very familiar about this.

[DeeAnne McCallin] 13:47:17

So you're not on your own for QHIO onboarding application and K-high walks you through it and submits the application on your behalf.

[DeeAnne McCallin] 13:47:24

The QHIO, who as I mentioned, would have earlier are not yet named, but this party will be named.

[DeeAnne McCallin] 13:47:32

You can apply for a grant today. Some folks in round one and round 2 applied for a QHIO grant and they don't know yet who their queue is but they'll be they'll be reached out to once we name our queues so that they can complete a portion of their grant, like basically naming the queue and the QHIO receives and manages the grant funds.

[DeeAnne McCallin] 13:47:54

So that's the money goes straight to another company. So you have a little less of the burden.

[DeeAnne McCallin] 13:47:59

Of managing a grant and the funds coming in to you. They're doing the work they're getting you on.

[DeeAnne McCallin] 13:48:04

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They will need your engagement. To be able to get you exchanging, but most of it goes through this assisted pathway.

[DeeAnne McCallin] 13:48:12

The other option is a technical assistance domain. You build your own pathway. And where you can seek certain outcomes for what type of technical assistance you need.

[DeeAnne McCallin] 13:48:24

Maybe you're already working with an HIO, but you don't have workflow or you need to update your internal systems to be able to optimize the exchange you have with either a national or regional HIO in California.

[DeeAnne McCallin] 13:48:39

Applications are submitted by you and the grantee who would be you the applicant if awarded. Receives and manages the funds directly managing the funds is submitting a quarterly report which is in the same portal as the application.

[DeeAnne McCallin] 13:48:56

And then requesting payment when you have earned one of 2 milestones. You may apply for only one of these 2 grant domains.

[DeeAnne McCallin] 13:49:03

So you need to choose one. If you choose a QHIO in your organization does not end up being named as a QHIO, you have the option to change it to a technical assistance brand.

[DeeAnne McCallin] 13:49:17

In round one, we awarded, what's that about? $812,000 in the technical assistance domain and 635,000 in the QHIO award.

[DeeAnne McCallin] 13:49:31

And then round 2 we ordered, we awarded over 4 million dollars in technical assistance awards and nearly 2.8 million dollars in the QHIO awards.

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[DeeAnne McCallin] 13:49:43

As you can see these numbers jump significantly in round 2 or and are in part as to why I suggested that folks might want to get working on their applications and submit.

[DeeAnne McCallin] 13:49:54

Through November instead of waiting until December or hoping that there might be around 4. I do encourage books. It was a great uptake in round 2.

[DeeAnne McCallin] 13:50:01

And, folks are ready and willing to help you through grant applications. For round 3. Let's see once your applications are in and then when the round closes we do a whole review of scoring assessing and everything and then we.

[DeeAnne McCallin] 13:50:20

Will notify applicants. When if they have been awarded.

[DeeAnne McCallin] 13:50:26

There's a really important part of the grant application about having signed the DSA. So we do do a validation check upon reviewing the applications.

[DeeAnne McCallin] 13:50:38

Hopefully, and we really intend to be doing this sooner in the process in case there's any disconnect because we have seen this.

[DeeAnne McCallin] 13:50:46

But the signer of the data sharing agreement should be the signer of the grant application, both the name of the signer and the organization name.

[DeeAnne McCallin] 13:50:55

As things go, the the world is not that perfect. So we have seen plenty of signatures and we have an opportunity at one of the last questions in the signature page.

[DeeAnne McCallin] 13:51:06

Of the grant application is whether there's why there's the disconnect in the name. So perhaps it was a CEO or a, a doctor who owns a small practice, but it's the office manager who really drives the IT and the grants program who signed the the application for the grant, then you would fill in at the doctor, the owning doctor has authorized the office manager to sign the grant application.

[DeeAnne McCallin] 13:51:39

We've seen some where and a CEO has changed, has left the organization and it has moved on to another organization so the signer of course of the application would be somebody different.

[DeeAnne McCallin] 13:51:51

When you can have these match and that will move your application further along in the review process. If it does not, we might well be reaching out to verify as to why these names and both the signature name and or the organization name do not match.

[DeeAnne McCallin] 13:52:10

And if you're not sure who signed your DSA, that information is available. The organization name is available on that DSA signatory list that's available on our website.

[DeeAnne McCallin] 13:52:23

And you can also ask, you can ask PCG or K high PCG is the third party.

[DeeAnne McCallin] 13:52:29

Administrator who works on the grant programs with us in in a collaboration with K- and CDI. We do have an offer in the grants program for umbrella applications.

[DeeAnne McCallin] 13:52:43

So perhaps you are a bit of a business person and offer a lot of great clinical services and have a skilled nursing facility and work with a community based organization in your medical neighborhood and collectively you could apply.

[DeeAnne McCallin] 13:52:59

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For one application that has a number of different DSAs sign signatories. So maybe 4 different entities have signed 4 different DSAs, then you can apply for one grant application, have one grant application to manage and do the quarterly.

[DeeAnne McCallin] 13:53:18

Reports and request for funding. But it's only one grant instead of 4. So, and you can do an individual where an eligible signatory is applying on his or her their own behalf.

[DeeAnne McCallin] 13:53:30

Or you can do an umbrella grant where there's an organization. It doesn't even need to be a signatory to the athlete to the DSA.

[DeeAnne McCallin] 13:53:39

It can be a third party. Or it could be one of the DSA signatories, an organization implying on behalf of one or multiple eligible signatories.

[DeeAnne McCallin] 13:53:50

So a corporate parent and independent practice association, even a consultant who is working on IT in your medical neighborhood.

[DeeAnne McCallin] 13:53:58

So there is an opportunity if you're not sure if you're approaching the best way to submit your application.

[DeeAnne McCallin] 13:54:06

I encourage you to reach out. If you're approaching the best way to submit your application, I encourage you to reach out to PCG, before you submit your application.

[DeeAnne McCallin] 13:54:12

I encourage you to reach out to PCG, before you submit and we might be able to help guide you.

[DeeAnne McCallin] 13:54:12

Or to tune in on October 20 fourth so that's a little more than a week from now or so we are having a round 3 kick off webinar.

[DeeAnne McCallin] 13:54:21

From at 9 am Pacific time. So we do encourage you. Yeah, I'm not sure if there's a registration link on our website, but do look for that.

[DeeAnne McCallin] 13:54:30

And we will, we have had it in our weekly update. Which you'll hear a little bit more about in a little while.

[DeeAnne McCallin] 13:54:37

We are planning 3 office hours where we encourage folks to come to those. Office hours with questions that they've been in the grants connect portal maybe they can't they're having problems logging into it and things like that they're not sure what outcome they're selecting.

[DeeAnne McCallin] 13:54:54

So those office hours are intended to be response, though we do present. We do aim to have them be a question opportunity time so that we can answer during that hour.

[DeeAnne McCallin] 13:55:05

But the kickoff webinar will be a lot of the presenting and overview of the grant application a little bit more detail.

[DeeAnne McCallin] 13:55:12

So we do have, will drop these in the chat this afternoon if they're not up or this morning if they're not already there.

[DeeAnne McCallin] 13:55:19

PCG so the DSA grants@pcgus.com and they also have an 800 number a toll-free number to call of you have questions about the grant application, the actual grants connect portal or the technical assistance domain.

[DeeAnne McCallin] 13:55:37

And then if you're interested in a QHIO onboarding grant, you can contact K-high at Grant Support at k-high.org.

[Cynthia Bero] 13:55:43

Okay.

[DeeAnne McCallin] 13:55:48

If you're not sure, I would encourage you to start with Cute with the QHIO onboarding grant K high and they would be able to help guide you via email or brief conversation as to whether you do seem a great candidate for QHIO onboarding grant or TA.

[DeeAnne McCallin] 13:56:00

And then we have other resources. Go to our web page and look for the grant program and there's a number of resources that are linked right there.

[DeeAnne McCallin] 13:56:09

Alrighty, so at this time I'm going to glance at the Q&A. While I passed to Cindy Barrow from a NAT to go into a scenario or 2.

[Cynthia Bero] 13:56:20

Thank you, Dean. So Dan opened the meeting sharing the data exchange framework vision and this, you know, the vision states that we're going to create greater efficiencies and new connections to to improve the whole person care across California.

[Cynthia Bero] 13:56:38

But that naturally leads to, well, what does that mean and how does that translate and what does that mean for me?

[Cynthia Bero] 13:56:46

So what we would like to do today and as we have done in the past couple of information as power webinars is to share some real world stories if you will of a data exchange and demonstrate how the data exchange framework, including the policies and procedures that DN referenced, how they they define the sort of the who, what, where, when, how of data exchange.

[Cynthia Bero] 13:57:11

Okay. So why don't we forward to the next slide. So the, The D exchange framework is at its foundation the data sharing agreement, the DSA, and then there is a series of policies and procedures that have been developed and each one of those provides a little more clarity around What data is being exchanged?

[Cynthia Bero] 13:57:34

When do I need to exchange it? Why do I exchange data? And then the house, the the technology and the standards.

[Cynthia Bero] 13:57:41

That are used and of course what's important to everybody the privacy and security around the transmission of data.

[Cynthia Bero] 13:57:48

So the DSA and these PNPs define sort of the rules of the road, if you will, for how data exchange will happen.

[Cynthia Bero] 13:57:56

But what makes it maybe even more clear is when we tell a story or 2 about how this might work.

[Cynthia Bero] 13:58:03

So if you joined us for the information is Power Webinar in July. You heard the story of a patient known as Lisa.

[Cynthia Bero] 13:58:11

And her primary care physician, Dr. Tom. And so what we wanted to do today is to give you a little epilogue to that story on Lisa and Dr.

[Cynthia Bero] 13:58:22

Tom. Another one, another element of the story that again shows how the data exchange framework. Really made a difference in Lisa's care.

[Cynthia Bero] 13:58:29

So if you if you attended the former webinar you heard in July that Lisa had an acute care event and that she was admitted to the hospital but her primary care physician, Dr.

[Cynthia Bero] 13:58:43

Tom, was able to stay informed throughout the admission so that he could stay aware of what was going on with her, follow up with her shortly after discharge and make sure that she was supported well through all those transitions and care.

[Cynthia Bero] 13:58:56

And that at her most recent visit with Dr. Tom, Tom noticed she seemed a little, a little short of breath and that her weight had increased a bit.

[Cynthia Bero] 13:59:04

Lisa has had a history of congestive heart failure and he is managing her for this condition. So Dr.

[Cynthia Bero] 13:59:11

Tom asked Lisa, has anything changed? You know, are you keeping up with your diet recommendations, your medication, in your exercise, and Lisa reported, yeah, everything's changed. Everything's the same.

[Cynthia Bero] 13:59:25

I'm not sure what's going on. So how does the DSA in the PNPs relate to this?

[Cynthia Bero] 13:59:31

Well, first of all, Dr. Tom and his practice, they signed the DSA and so they are a part of the data exchange framework.

[Cynthia Bero] 13:59:39

And Dr. Tom in looking at his obligations under the DSA, he and his practice opted to sign up with a QHIO so that they could, get assistance meeting their obligations.

[Cynthia Bero] 13:59:53

Tom's practice did not have to use a QHIO. They could have used their own technology.

[Cynthia Bero] 13:59:58

They could have used another intermediary, but for Tom, he felt that the QHIO was the best option for him.

[Cynthia Bero] 14:00:06

And so because he had this ability to. You know, exchange data through his QHIO, Tom, you know, paused at this moment and tried to figure out, well, how do I, how do I, you know, Take best possible care I can of Lisa.

[Cynthia Bero] 14:00:23

If you want to flip to the next slide.

[Cynthia Bero] 14:00:26

So Tom decided that the best thing to do would be to query the health plan that manages Lisa's pharmacy benefits.

[Cynthia Bero] 14:00:34

He figured that one of the suspicions he had is that maybe she has't been regularly filling or taking her medications.

[Cynthia Bero] 14:00:42

So he went ahead and through the QHIO, he sent a query and received a response from the health plan that indicated that there had not been any recent claims for prescription refills.

[Cynthia Bero] 14:00:54

Certainly not at the frequency that he would have expected the way he had written the prescription. So he turned back to Lisa and he, you know, asked her if there had, you know, if

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she has been taking her medications regularly, he reviewed with her the medication he was concerned about and what the.

[Cynthia Bero] 14:01:11

Regular dosage should be. And Lisa quietly admitted that she really has had some struggles keeping up with the co-payments on that medication.

[Cynthia Bero] 14:01:20

And so she has been, you know, taking less than the recommended dose. And by doing so, she had, you know, had some symptoms.

[Cynthia Bero] 14:01:28

Recurring. So working together, Tom and Lisa, identified an alternative medication that had a, it was a little bit more affordable so that she could transition to that medication and, you know, maintain her health and also manage her co-pays.

[Cynthia Bero] 14:01:45

So this part of the story demonstrates that health plans, like the QHIO and like Dr.

[Cynthia Bero] 14:01:54

Tom, they are part of the DSA. They sign they by signing the DSA they are part of the date exchange framework.

[Cynthia Bero] 14:02:05

And remember, there are some folks that are mandatory signatories and they're also folks that are voluntary signatories, but everyone who does sign the DSA will participate in exchange.

[Cynthia Bero] 14:02:13

This part of the story also gives us a little insight into that the why we exchange. Well, here there are different required permitted and prohibited purposes treatment, which is what Dr.

[Cynthia Bero] 14:02:25

Tom is focused on. He's treating Lisa. Treatment is one of the required purposes.

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[Cynthia Bero] 14:02:30

For exchange. So he can ask and a response will will come back to him. The form of his request, his query is defined under the technical requirements for exchange policy and procedure.

[Cynthia Bero] 14:02:42

And then we also have, as I said, the requirement to respond, which is the requirement to exchange.

[Cynthia Bero] 14:02:49

Policy and procedure. The real-time policy and procedure says how quickly that has to happen so that responses are timely and can really have an impact on care.

[Cynthia Bero] 14:03:00

And then as we pointed out before, the privacy standards and security safeguards policy and procedure defines the way we carefully manage and transport information.

[Cynthia Bero] 14:03:11

So again, each one of these policies and procedures helps to shape the transaction, the exchange that we just saw with Lisa and Tom.

[Cynthia Bero] 14:03:20

And the good news is Lisa now has her. She can afford it and she will hopefully stay on track and we won't hopefully never have another scenario with Lisa.

[Cynthia Bero] 14:03:33

So let's switch gears now. I wanted we touched on the health plan and the health plans role in managing leases.

[Cynthia Bero] 14:03:42

And the health plans role in managing leases pharmacy benefits. But health plans also have other roles that they play in terms of the health plan's role in managing leases, pharmacy benefits.

[Cynthia Bero] 14:03:49

But health plans also have other roles that they play in terms of managing patients and helping them, you know, take care of themselves and get care at the best possible place.

[Cynthia Bero] 14:03:53

So I want to introduce you to my my friend Emily. Emily works in the utilization management department of a health plan.

[Cynthia Bero] 14:04:01

And she and her team really stay focused on making sure that their members get the right care in the right place at the right time.

[Cynthia Bero] 14:04:09

And it's a challenge sometimes because some patients just, you know, delay services or don't, don't know exactly where the right place to go is so they might show up in the emergency department, they don't really need the emergency department.

[Cynthia Bero] 14:04:23

And the date exchange framework has been helpful to Emily and her colleagues in terms of keeping on top of where their members are seeking care and helping them provide feedback to those members.

[Cynthia Bero] 14:04:35

She also has a very strong analytics team that works with her and they have identified a cohort of patients who who frequent emergency departments almost as their primary source of care and their job in some level is to work with these members and to see if they can counsel them towards more effective use of the health care system, in particular get, you know, primary care instead of emergency care.

[Cynthia Bero] 14:05:06

So next slide.

[Cynthia Bero] 14:05:10

So that list of members that have. Frequented emergency services. Emily's health plan decided to share that with a QHIO so that they could stay informed when those members had a an emergency department visit so they could intervene in a more timely manner and therefore, you know, more effectively help to re-educate or educate that member about appropriate.

[Cynthia Bero] 14:05:40

Levels of care for what for what's going on. So because they've shared this roster or cohort with QHIO, when an acute care event occurs for one of those members, Emily's team gets notified and they can follow.

[Cynthia Bero] 14:05:56

With the member and with the members providers to really consider more, you know, most appropriate care settings and also use that as an opportunity.

[Cynthia Bero] 14:06:07

Again, again, educate the member on the use of health services. So how does the DSA and the and its PNPs, you know, apply here?

[Cynthia Bero] 14:06:20

Well, first of all, by signing the DSA, the health plan is now a data exchange framework participant.

[Cynthia Bero] 14:06:25

And like other participants, they could use, they might choose to use an intermediary to help them manage their exchange obligations.

[Cynthia Bero] 14:06:37

In this case, the health plan decided to use a QHIO to help them. And then because health health care operations is a required purpose for exchange, that means that when they, you know, are seeking acute care event notification for their members, they are having a required purpose for getting that information.

[Cynthia Bero] 14:07:00

The technical standards or the technical requirements define how they will match identities and send events. When that acute care event gets published, it's, you know, matches up against that cohort of members and that's how Emily's plan and her team get notified.

[Cynthia Bero] 14:07:19

The real-time policy and procedure defines the timeliness which is within minutes of the event and then again as always privacy and security protects the information as it's exchanged.

[Cynthia Bero] 14:07:32

So with this kind of capability, Emily and her team now have sort of, you know, near real time.

[Cynthia Bero] 14:07:42

Avail, you know, access to information that will help them to better educate their members about their care and their care options and that the health plan then can also take a look at all of this activity and really start to refine its educational tools, its messages and its interventions to help.

[Cynthia Bero] 14:08:05

You know, not only the members of this cohort, but to really help all of their plans members better manage their care.

[Cynthia Bero] 14:08:14

So coming back to that original slide where we outlined the, the rules of the road, if you want to move forward one, just reenforcing that's the purpose of the DSA and these policies and procedures is really to help us understand.

[Cynthia Bero] 14:08:33

Who's who's part of the date exchange framework? What information are we exchanging? When do we exchange it?

[Cynthia Bero] 14:08:42

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Why, how? And again the bottom line in all of this is with privacy and data security. But the story here again is one to illustrate that that these policies and procedures and the data sharing agreement will help support this exchange framework that is being established and I will at that point turn it back to you Dean.

[DeeAnne McCallin] 14:09:07

Thank you. Cindy. All right.

[DeeAnne McCallin] 14:09:11

Alright, we'll take a few minutes for the QA. Some questions have been answered.

[DeeAnne McCallin] 14:09:16

I tend to go back to those and read through those. Those many of you might have eyes on them.

[DeeAnne McCallin] 14:09:22

It's it's usually helpful to pay some attention to the presentations and as opposed to running through the chat.

[DeeAnne McCallin] 14:09:29

And the reading the questions and answers and we do encourage folks to add new questions in right now as we're talking.

[DeeAnne McCallin] 14:09:38

So someone asked back to the grants program, our 500, and one C 3 nonprofit organizations that are not hospitals.

[DeeAnne McCallin] 14:09:46

Or solely healthcare providers, but they do work in the health services and sign the DSA eligible to apply.

[DeeAnne McCallin] 14:09:55

Yes, round 3 is, is open to DSA signatories with the health information technology needs.

[DeeAnne McCallin] 14:10:02

So there's a question or 2 within the grant application and where you put a justification statement as to why you're requesting funding for your need.

[DeeAnne McCallin] 14:10:11

We do encourage you to read the grant guidance document, but yes, the answer to the the main part of your question was if you're a DSA signatory, are you eligible to apply?

[DeeAnne McCallin] 14:10:23

Yes. I mean, it's not only required. We earlier in this hour, we had a list of who are the wired participants to sign a DSA.

[DeeAnne McCallin] 14:10:35

If you do not have to have been required to have signed the DSA to be eligible to apply for a grant.

[DeeAnne McCallin] 14:10:40

When will QHIO names be finalized? We're working on that and we do it anticipated to be sometime this month.

[DeeAnne McCallin] 14:10:48

You know, timelines can change. Could it roll to November? It's possible, but we're doing everything we can to be able to announce the QH IOs this month.

[DeeAnne McCallin] 14:10:59

A fairly, probably someone probably pretty involved in the technical part of exchange, which may not be the entire audience here today, but ask the question, where can I find information on how the directory of participants will be hosted?

[DeeAnne McCallin] 14:11:13

And accessed. We participate paid on care quality which is a national network and are familiar with how directory works on that particular network.

[DeeAnne McCallin] 14:11:23

So under the data exchange framework, we're working on developing the participant directory, policy and procedure.

[DeeAnne McCallin] 14:11:32

So we will be discussing this policy and procedure at our next data sharing agreement and policy and procedure, sub community meeting on October, the 30 first.

[DeeAnne McCallin] 14:11:43

So those of you who are interested in the details of a participant directory, we do encourage you to come and listen to that meeting.

[DeeAnne McCallin] 14:11:50

It should be a 2 h meeting. We do accept public comments and questions during that meeting. If you're wondering, and it's also a great resource after the fact as well.

[DeeAnne McCallin] 14:12:01

After that meaning sometime after that meeting and ideally not too long after we will publish a draft PNP for the participant directory and encourage all stakeholders to review a draft document of a policy and procedure where you can ask questions and and make requests or make suggestions as to things that you may or may not see in there.

[DeeAnne McCallin] 14:12:25

Are we able to discuss how community-based organizations that are contracted to provide Calleim services, how they exchange.

[DeeAnne McCallin] 14:12:36

So Calim is one of the drivers behind why the data exchange framework exists. The data exchange framework does cast a wider net than the, entities that are, Kelly, that are offering Calim services.

[DeeAnne McCallin] 14:12:52

But generally speaking this is beyond the scope of today's webinar but we do encourage you to look at some of the policies and procedures and look for the information that's involved in the data.

[DeeAnne McCallin] 14:13:05

Exchange framework and be able to know what you're calling. Mark is to be able to see where the.

[DeeAnne McCallin] 14:13:12

Synergies lie on that front. We do not know how long round 3 will be open for the grants program.

[DeeAnne McCallin] 14:13:19

I would anticipate 2 months if need be. We and if funds are still available, we will try to extend.

[DeeAnne McCallin] 14:13:29

But for right now, probably aim for like expect 2 months, which is what round 2 was open for.

[DeeAnne McCallin] 14:13:36

And as you saw, we had great uptake in round 2 and with the announcement of the QHIOs this month, we do expect a lot of applications coming in for round 3.

[DeeAnne McCallin] 14:13:45

It will probably be somewhere in the middle of 2 to 3 months but we don't know for sure.

[DeeAnne McCallin] 14:13:50

And I would not suggest waiting until the last week. For those of you who received who received QHIO grants in round one or 2 and have been, have they been onboarded to QHIOs yet or are they waiting to be announced?

[DeeAnne McCallin] 14:14:06

So you definitely need the announcement of the QHIOs in an application for a QHIOs in an application for a QHIO onboarding grant.

[DeeAnne McCallin] 14:14:18

Who you envisioned working with or who you might have been working with historically but that you have not done enabled certain components of the services they offer.

[DeeAnne McCallin] 14:14:30

Perhaps you were on board, but that you have a new commitment, something papered and a dead an addendum, a new contract, anything like that.

[DeeAnne McCallin] 14:14:38

That as no older than 2023 so once the cues are announced K high will reach out to the QHIO awardees from round one in round 2 and incorporate who they're working with on round 3.

[DeeAnne McCallin] 14:14:52

On naming which QHIO you would like to work with if the entity that you're looking to work with is either did not apply to become a QHIO or was not a not deemed a qualified HIO, you may elect to stay with them if you have done your homework and make sure that they're able to provide what you need to be able to exchange under the framework or you may switch to a different entity

[DeeAnne McCallin] 14:15:18

who has been named a queue or you can switch to a TA grant and meet your outcomes there.

[DeeAnne McCallin] 14:15:25

So we have a couple different opportunities. And most of the onboarding work should not have yet.

[DeeAnne McCallin] 14:15:31

Really started but the project plans and the work plans and things like that. Of course, for especially the brown one and round 2 folks.

[DeeAnne McCallin] 14:15:40

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Is it required, but absolutely no one is eligible yet for a QHIO onboarding, milestone one because that's like the contract in paperwork with an actual QHIO.

[DeeAnne McCallin] 14:15:53

Milestone one's not possible when we don't yet have the queue. Is it required for individuals who register the organization to also be the signer of the DSA?

[DeeAnne McCallin] 14:16:05

So some of our slides did cover this. It is permissible for someone to register the organization and subsequently have the appropriate sign or execute the DSA.

[DeeAnne McCallin] 14:16:14

So the answer is the latter when signing the individual creating the account and completing information on the DSA signing portal will be asked to be named in the contract for a signatory grant program.

[DeeAnne McCallin] 14:16:27

And one thing I did not mention is when you are submitting, if there's an application going in for an umbrella application, whoever is submitting that application can not just submit an application and then go and do and be awarded and go and do outreach to DSA.

[DeeAnne McCallin] 14:16:44

Signatories saying, hey, look, I, I have a hundred $1,000. I wanna come and help your, your organization with HIT needs.

[DeeAnne McCallin] 14:16:53

To be awarded that application under the Data Exchange framework, they need to have had the signature of the DSA.

[DeeAnne McCallin] 14:17:01

Signatories. So if a third party wants to submit an application for 10 organizations we need 10 different and we will leave and do it manually if we have to we crosswalk the 10 name dentities to the signers of the DSA, see if those signatures match and name, but every one of those 10 needs to actually sign the DSA.

[DeeAnne McCallin] 14:17:24

The signatory grant application. You, how can you receive weekly updates about round 3? And for round 3.

[DeeAnne McCallin] 14:17:36

Or for anything under the Data Exchange framework, please do email the, CDII if you're not on our listserv, cdii@chhhs.ca.

[DeeAnne McCallin] 14:17:49

COV. We have recently implemented a weekly data exchange framework update. It goes out on Tuesdays.

[DeeAnne McCallin] 14:17:57

I think Tuesday afternoons where we're trying to consolidate and consistently cover the same topic so that it becomes familiar and routine and you you know where to go once a week.

[DeeAnne McCallin] 14:18:08

To find the links right in front of you and everything like that. But we do have email list also under the signatory program and that, web page is listed in the.

[DeeAnne McCallin] 14:18:24

Answers to the Q&A DXF DSA grants.com.

[DeeAnne McCallin] 14:18:33

Alright, let's see. Could organizations under an umbrella be CBOs, community-based organizations that are not currently required signatories.

[DeeAnne McCallin] 14:18:44

Yes, they can be CBOs like any application in round 3 does not need to be a required signatory.

[DeeAnne McCallin] 14:18:51

But they do need to have signed the grant application, but you can be a voluntary or other type of signatory, not one of those 6 general acute care hospitals, skilled nursing facility, clinical lab, that's 3 of the 6.

[DeeAnne McCallin] 14:19:08

It's not limited to those entity types.

[DeeAnne McCallin] 14:19:14

Alrighty.

[DeeAnne McCallin] 14:19:18

How many QH IOs will will it be selected or is it just one or multiple ones? Great question.

[DeeAnne McCallin] 14:19:26

We are The data exchange framework from its origins from a almost a year working with an advisory group and with a lot of stakeholder inputs.

[DeeAnne McCallin] 14:19:38

The actual data exchange framework has been. Developed and created to be a network of networks and it's not a single repository.

[DeeAnne McCallin] 14:19:48

It's not a single place where data is collected and and you go to pull and push to. So it's a network of networks and that's why there we do anticipate there to be more than one QHIO and there's also more than one option on how you do not need to.

[DeeAnne McCallin] 14:20:05

Exchange via QHIO, it's an option and an opportunity for exchange. You could use a national network or you can use your own in-house infrastructure or technology or important to point connection.

[DeeAnne McCallin] 14:20:18

If that's how you prefer or currently exchange and feel that you can be compliant with the data exchange framework.

[DeeAnne McCallin] 14:20:26

But we do anticipate that will, that there will be. And the number of queues selected is also dependent upon who applies.

[DeeAnne McCallin] 14:20:35

And so had we had one that there was an application window open for about a month late this summer. And the application embedded in the application essentially are the what are what requirements couldn't organization meet?

[DeeAnne McCallin] 14:20:53

Could they attest to being able to meet? 27 to 30 different criteria and they needed to attest to that for their application to be reviewed to be approved as a queue and that's what we're still working on.

[DeeAnne McCallin] 14:21:04

But we do expect it to be more than one.

[DeeAnne McCallin] 14:21:07

Hmm. Alright, someone asked if the number of patients who are served by a, an upgrade or the technology or the HIT health information technology.

[DeeAnne McCallin] 14:21:24

In, and grants, dollar amount. The, it is taken under consideration in the scoring process.

[DeeAnne McCallin] 14:21:30

Probably what weighs in more than the number of patients is the number of instances. So if if there's 3 different technology lifts that need to happen to be able to connect silo disparate.

[DeeAnne McCallin] 14:21:43

Infrastructure technology systems. Then that would that would more encourage more influence the request and the award of a grant dollar amount than the volume of patients.

[DeeAnne McCallin] 14:21:56

It's almost like you have 3, 3 different roads or highways and only 3 to get to the place but you can't connect there's there's no connection between those 3 roads then you need 3 different instances.

[DeeAnne McCallin] 14:22:11

Even if one of those roads is just too lanes or 8 lanes like that would be the volume of patience if it's all going into the one place.

[DeeAnne McCallin] 14:22:22

So maybe thinking about it that way. So we do of course want to be able to exchange as many patient records individual records in California as possible so that the best whole person information is available to the providers of the services.

[DeeAnne McCallin] 14:22:40

Let's see, someone asked about consent. So individual consent is required to of exchange health and social services.

[DeeAnne McCallin] 14:22:49

According to applicable law. So that's foundational requirements on consent. That existed before the data exchange framework and the data exchange framework does not incorporate new laws into that, but we do lean on those laws and recognize that they are there.

[DeeAnne McCallin] 14:23:05

Okay. One person asked about whether QHIOs are, the same as qualified health information networks or queue hints under the federal TEFCA purposes.

[DeeAnne McCallin] 14:23:22

And there's nothing in our QHIO application process that. Disallows a queue hint to be.

[DeeAnne McCallin] 14:23:29

To become a California DXF QHIO, but they are different. They are different programs, different things.

[DeeAnne McCallin] 14:23:37

And we do look to collaborate and coordinate with TEPCA in the federal rules as well.

[DeeAnne McCallin] 14:23:42

Just like the some previous question on consent, we look to state laws and to federal law and if anything the data exchange framework casts a slightly wider net than the federal because of the some of the required entities to participate in the data exchange framework.

[DeeAnne McCallin] 14:24:02

There is a great question about will there be a webinar specific to the QH IOs once that list is approved.

[DeeAnne McCallin] 14:24:09

We do anticipate that. So do keep your eyes out. For about the information is Power Webinar Series and in our DXF weekly updates.

[DeeAnne McCallin] 14:24:21

Someone asked if we could develop and organize a webinar that focuses on Cal in the data exchange framework.

[DeeAnne McCallin] 14:24:29

Yes, thanks for that suggestion. We did have one, I think, back in March. But it's probably an indication that we need, would that it would help because I've seen Kalaine mentioned a timer 3 here today.

[DeeAnne McCallin] 14:24:41

Do look at our website from the like the historic info is Power Webinar series and you will see something at least one and I think it was March of 2023 where we did have DHCS present and cover Kelly's somewhat in that webinar.

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[DeeAnne McCallin] 14:25:01

And we appreciate input and knowing that we should be able to. So we have 5 min left and looking to see.

[DeeAnne McCallin] 14:25:09

If there's any other questions I can answer, someone asked if sub signatories in an umbrella grant are considered subcontractors that will need auditing and monitoring.

[DeeAnne McCallin] 14:25:22

The biggest audit component of that we consider them subordinate entities that's back to the DSA.

[DeeAnne McCallin] 14:25:29

In the DSA signing portal, which is different than the Grant's Connect portal. And we have a section on the help page of the DSA signing portal about how to enter subordinate entities if the signing entity level has the signing authority over subordinate entities.

[DeeAnne McCallin] 14:25:49

And that's where any subordinate entity or multiple DSAs are included in an umbrella application.

[DeeAnne McCallin] 14:25:56

What we do is audit is to check that they have signed the DSA. And the same pieces of due diligence will be incorporated into the milestones that you can't just have a third party saying okay these 10 organizations met milestone one, we need those 10 organizations to sign off on that.

[DeeAnne McCallin] 14:26:17

Let's see.

[DeeAnne McCallin] 14:26:23

I think there's a question there already. Let's scroll and we have about 3 min, so bear with me if I'm trying to.

[DeeAnne McCallin] 14:26:31

Scan questions on the fly. We do recognize that the runway to actual exchange is coming soon. So someone wrote about January first for 2,024 becoming being the date of exchange it's actually January the 30 first I'll buy that month but it's January 30 first 2024 when exchange is required even with that month all the way through the month of January not January first. And even with that month all the way through the month of January not January first.

[DeeAnne McCallin] 14:27:07

We do have a lot of work to be doing and readiness and implementation. We have been working on that month all the way through the month of January, not January.

[DeeAnne McCallin] 14:27:14

First, we do have a lot of work to be doing and readiness and implementation. We have been working on that all year. We do have a lot of work to be doing and readiness and implementation. We have been working on that all year.

[DeeAnne McCallin] 14:27:19

But with QHIOs, to be doing and readiness and implementation. We have been working on that all year, but with QHIOs onboard so we want people to be mindful of that.

[DeeAnne McCallin] 14:27:25

And what we're trying to do is to bring in to the fold other entities or breaking down some of the silos.

[DeeAnne McCallin] 14:27:31

Of the information that is exchangeable. And so it's a big deadline, but we're continuing towards it.

[DeeAnne McCallin] 14:27:44

Let's see, someone, somebody else mentioning, you know, there's a lot of work before the January, 30 first deadline.

[DeeAnne McCallin] 14:27:54

I'm CD cdi i does not have the authority to change the January 30 first deadline.

[DeeAnne McCallin] 14:28:00

That deadline is a deadline that is in regulation. Originally started in assembly bill 1 3 3, 1 33, which became health and safety code 1 3 0 2 9, and meet their CDI nor Cal HHS California health and human service agency has the authority to change that deadline.

[DeeAnne McCallin] 14:28:21

So at this point in time, we do not anticipate that date to change at all. We don't know if there's going to be any more grant funding.

[DeeAnne McCallin] 14:28:32

Right at this time I would anticipate probably not. And the, which is why I encourage folks to apply now sooner rather than later.

[DeeAnne McCallin] 14:28:42

The funding that we do have is a bucket of funds that came in not this current fiscal years, California state budget.

[DeeAnne McCallin] 14:28:50

It came in the prior year. So that is what we are working these funds down these funds, which was a.

[DeeAnne McCallin] 14:28:57

50 million dollar fund.

[DeeAnne McCallin] 14:29:03

Already. And I think my last, and I think that's what I have right now.

[DeeAnne McCallin] 14:29:07

So thank you everyone for joining us today. We have a lot more questions than I anticipate anticipated and we appreciate that very much.

[DeeAnne McCallin] 14:29:17

Cindy, thank you for joining us and presenting and I'm going to try to move. I think there's other slides.

[DeeAnne McCallin] 14:29:23

So check our website and our weekly update for the upcoming meetings and the links to register to those meetings.

[DeeAnne McCallin] 14:29:33

You should be seeing this email if you don't. Maybe look in your junk or spam filter but it's coming from the same CDI inbox that we have been using for a while.

[DeeAnne McCallin] 14:29:42

But it's just the the new weekly update. We have lots of information on our website and we do still we have also that other website the micro site that we mentioned earlier today.

[DeeAnne McCallin] 14:29:54

And we thank everyone for joining us today and we look forward to seeing you all again sometime soon