Introducing New ECM and Community Supports Provider Resources

January 7, 2022

Transcript

Jill Donnelly:	00:02	All right, why don't we get started? Good morning. My name is Jill Donnelly from Aurrera Health Group, and we can go to the next slide. So a few housekeeping notes before we get started. First of all, all participants will be on mute during this presentation. We will have some time reserved for questions at the end. Please submit any questions you have via the Q&A feature on Zoom at the bottom of your screen. We ask that all questions be submitted that way. The PowerPoint slides and all meeting materials will be available very soon on the DHCS website and we'll share details for where to access that information in the chat. A recording of this webinar will also be sent out. Additionally, we have closed captioning available for this webinar. If you'd like to use this feature, click on the closed captioning at the bottom of your screen and select subtitles.
Jill Donnelly:	01:04	Next slide. All right. So just a brief review of the agenda today. We are going to review the ECM and Community Supports background, implementation updates, and provider roles. And then the crux of the presentation will be a review of new provider resources. There are two new documents that were released on December 22nd, the ECM Provider Toolkit and the Community Supports Explainer. There is an upcoming release of two other documents. One is the ECM Outreach Toolkit, and the other is the ECM Member Toolkit. Following that, we will have a brief Q&A and again, just remember to use that Q&A function to submit any questions and that will be it. So with that, I'll hand it off to Neha from the DHCS team.
Neha Shergill:	02:03	Good morning, everyone. This is Neha Shergill from DHCS. So just some background on ECM and Community Supports. Enhanced Care Management is a Medi-Cal managed care benefit that addresses the clinical and non-

clinical needs of high-need, high-cost individuals through the coordination of services and comprehensive care management. Community Supports are services that Medi-Cal managed care plans are strongly encouraged but not required to provide to help avoid utilization of other services or settings such as hospital or skilled nursing facility admissions, discharge delays, or emergency department use. ECM and Community Supports build on the design and learnings from California's Whole Person Care Pilots and Health Home Programs and replace both models to scale interventions to a statewide care management approach.

Neha Shergill: 02:57   Next slide please. An implementation update, ECM and Community Supports launched or went live on January 1st for select populations of focus in certain counties. ECM implementation will occur in stages by population of focus. All members served in WPC/HHP who are eligible for transition did so on January 1st. Additionally, on January 1st, ECM became available to the first three populations you see on the slide in WPC/HHP counties. These include individuals and families experiencing homelessness, adult high utilizers, and adults with serious mental illness and substance use disorder. ECM will go live for these same three populations in all other counties in July of 2022. In January of 2023, ECM will be available to those incarcerated and transitioning to the community at risk for institutionalization and eligible for LTC and nursing care facility residents transitioning to the community in all counties. In July of 2023, ECM will go live for children and youth populations.

Neha Shergill: 04:05   Community Supports launched statewide on January 1st. And some of the provider roles, providers are essential to the success of ECM and Community Supports. Providers may include those directly serving as ECM and Community Supports providers. Those that are part of a member's broader care team or those that are critical partners in the community. Regardless of specific provider type, there are important roles related to service delivery, this of course is essential role for providers, referring members to ECM and/or Community Supports, and importantly, educating members about ECM and Community Supports, including how they can learn more about the programs and

determine if they're eligible. The resources you'll learn today about are meant to help you serve in all of these capacities. They provide information that we hope will give you a better understanding of ECM and Community Supports, allow you to determine whether and in what capacity you may want to participate, if you aren't already, and help you navigate various requirements. So with that, we'll turn it over to our colleagues at Aurrera Health Group to provide a review of the new provider resources available to you and their components.

Jill Donnelly:	05:16	Great, thank you, Neha. So there are four new resources we'll be introducing in this webinar. Two were just released before the new year, and those are the two at the top here, the ECM Provider Toolkit and the Community Supports Explainer. And we will add links to those in the chat. And there are two that will be released later this month, the two at the bottom, the ECM Outreach Toolkit and the ECM Member Toolkit. We'll use the rest of our time here to walk through the contents of these resources and then address any questions at the end. Next slide.
Jill Donnelly:	05:54	Firstly, I also wanted to note who these resources are intended for. So the primary audience for these resources are ECM and Community Support providers and those that may be interested in becoming ECM and Community Supports providers. These would also be useful for Medi-Cal managed care plans, community partners, and others involved in the implementation of ECM and Community Supports. And then finally, some of these resources may be useful to Medi-Cal members themselves, specifically the ECM Member Toolkit is geared toward a member audience. I will now turn it over to my colleague, Kate, to walk through the purpose and contents of the ECM Provider Toolkit.
Kate Johnson:	06:36	Great. Thank you, Jill. So first, I will talk about the ECM Provider Toolkit, and if we can move to the next slide. Just a note that as mentioned, the toolkit is designed specifically for providers and it's aim is to provide information that helps providers understand what Enhanced Care Management or ECM is, who is served by ECM, or in other words, what populations is ECM intended to support and who qualifies, who provides ECM, and

what is expected of them as well as other policy and programmatic details. It's also important to note that the toolkit is designed to be actionable and easy to use. We know that there's a lot of information to take in and understand about ECM. So this resource is intentionally structured to provide critical details while also offering information on ways to access additional resources and additional details about the benefit. Additionally, the toolkit is designed so that each section of the toolkit can function on its own as a standalone document.

Kate Johnson:	07:52	There may be elements of the toolkit that are particularly valuable to share with certain colleagues or stakeholders and so this format aims to make that type of sharing easy. So next, I'm going to walk through the contents of the ECM Provider Toolkit section by section. So if we move to the next slide, this just shows the various sections of the toolkit. So the toolkit begins with a user guide that just kind of outlines the purpose of the toolkit and some of those details about how it can be used in standalone capacity, section by section. And then the specific sections within the toolkit include an overview, a section on eligibility enrollment, the section on the seven core ECM services, care management through ECM, roles and responsibilities, information sharing, reporting, and payment, a section on expressing interest and applying to become an ECM provider, and then details on additional resources and some of the key terms used throughout the toolkit.
Kate Johnson:	09:02	So again, these are meant to be able to sort of standalone as needed, and next I will walk through what the specific contents are within each section. So if we move to the next slide, the overview section of the toolkit provides a quick snapshot of the ECM benefit and answers some of the commonly asked questions that providers have when first learning about the benefit. So specifically this section provides answers to the questions you see listed on the slide here. So what is ECM? Who can access it? What services does it offer? Who is providing ECM? How do members access the benefit? Can members receive the benefit while receiving other services or programs in the state? All of these topics are further explored in other sections of the toolkit. But again, this overview section is

really meant to kind of pull together these high-level details in a concise package that can give providers a good baseline for understanding the benefit.

Kate Johnson: 10:15 So if we move to the next slide, the section on eligibility and enrollment provides additional detail about who can access the ECM benefit. And specifically it covers who qualifies for ECM, which includes a detailed review of the adult populations of focus for ECM, as well as the children and youth populations of focus. It also includes information on how experiencing homelessness is defined. We know that this has been a common question among providers given that different definitions exist. So the toolkit aims to provide details on exactly how the state defines this population for ECM. The eligibility enrollment section also covers how members can access the ECM benefit, for instance, through their health plan, through provider referrals, or self-referral and how they enroll and get assigned to an ECM provider. The section also includes tips for talking to members about ECM and this offers specific talking points or messages that providers can use to help explain to members what ECM is and how it may benefit them.

Kate Johnson: 11:31 And then lastly, the section addresses scenarios where members may receive services from more than one state program or benefit. In many of these scenarios, ECM will serve as a wrap that help fill gaps and coordinate across case management services that are available in other programs. However, there are some instances where members cannot be enrolled in ECM at the same time as other programs. So the toolkit and specifically this section of the toolkit provides details on these scenarios for specific programs and benefits. Ultimately, we think this section will be particularly helpful for providers who are trying to access at a high-level, whether the benefit could be a good fit for the clients that they serve. And if we move to the next slide, this is a screenshot from the toolkit specifically of the subsection on tips for talking to clients or members about ECM.

Kate Johnson: 12:30 So again, these are talking points that address some of the key questions that beneficiaries often have when learning about a new program or service. So this is again a great

example of how the toolkit can be broken up into standalone resources. We imagine that this could be a one pager, for example, that providers may print and distribute to staff at a clinic or a community center to help support responsiveness to questions that the members have. So if we move to the next slide, the next section in the tool kit is on the seven ECM core services. This outlines those services that are included in ECM, as you can see listed on the screen, and then it goes into detail on each service, outlining the specific activities that may be included within each service. So for example, the toolkit notes that outreach and engagement may include activities such as locating, contacting, and engaging members who have been identified as candidates for ECM, documenting outreach and engagement attempts, and sharing information with health plans and also providing culturally and linguistically appropriate communications and information among other activities.

Kate Johnson: 13:54   So that just gives you a sense of the kind of details that are outlined for each service within ECM. The section also addresses where members can access the ECM benefit and whether transportation services are offered. So this section may be particularly useful for helping staff understand the ECM benefit and the components they're in and sort of getting a better grasp on what ECM providers are expected to offer. If we move to the next slide, the Care Management through ECM section of the toolkit provides a detail about what Enhanced Care Management really means. So it explains what a Care Plan is and how it is used, who provides services, and how ECM interacts with other services. And to help illuminate this, the section provides two features on the interaction between ECM and Adult Palliative Care, and ECM and Behavioral Health. So you can see the screenshots on the right-hand side of the slide here for those two features.

Kate Johnson: 15:09   And these really help provide additional background on how ECM may work collaboratively with other specialty services, particularly for members who have the most complex needs. So again, these are each one page resources that might be individually shared with certain audiences. If we move to the next slide, the section of the ECM Provider Toolkit that reviews roles and

responsibilities focuses on the various players or entities that have a role in implementation and administration of ECM. It first outlines roles at a glance, which really just highlights the three primary types of entities that will work together to deliver ECM, specifically Medi-Cal managed care plans, ECM providers, and other community-based entities, if they're not serving as an ECM provider. The section covers roles and responsibilities in detail for each of these entities and it includes examples of who may serve as an ECM provider.

Kate Johnson: 16:20   That may be a helpful resource for those that are wondering, "Might I be an ECM provider who typically serves in this role?" We hope that this section offers some clarity around the critical entities involved in the delivery of ECM and all of the important ways that providers can be involved to ensure success of delivery of ECM. So if we move to the next slide, the next section within the toolkit focuses on information sharing, reporting, and payment. We know this is an area where providers have a lot of questions, and so this slide highlights the topics covered within this section, and that includes member information sharing systems and technology requirements, data sharing agreements, and reporting requirements. It also explains what ECM service codes are and how ECM payments work. And importantly, because there's a lot of information to sort of understand in this space, this section focuses, as the entire toolkit does, but this section in particular focuses on pointing readers to specific policy guidance for each of these topics, which include billing and invoicing guidance, guidance on member level, information sharing, and ECM coding options.

Kate Johnson: 17:47   And if we move to the next slide, the following section is on expressing interest and applying to become an ECM provider. So this is really about supporting individuals or organizations that are interested in becoming an ECM provider. It helps explain how an interested provider may become an ECM provider. It includes tips on what providers should consider and prepare before engaging with health plans and how they might go about sort of signaling interests and demonstrating readiness to plans. It also includes details on Medicaid provider enrollment requirements, and how to obtain an NPI or National

Provider Identifier. And on the next slide, we just have, again, a couple of visuals from the toolkit to display some of the content we're talking about here, specifically tips for engagement prior to connecting with health plans and signaling interests. And as you can see, these are really short-form call-out boxes with details that may be particularly helpful in supporting organizational planning.

| Kate Johnson: | 19:08 | So for example, these tips could help inform strategy and agendas for initial conversations with health plans, as well as development of say a brief concept paper or proposal for participation. So hopefully good sort of quick tips that can be used for those that are interested. And then if we move to the next section, this is resources. So pretty straightforward, but at the end of the toolkit, really wanting to provide a place where folks can go to access additional information. Again, sort of connection to additional resources is sprinkled throughout the toolkit but this is a place that provides additional links to policy guidance and information in one place and importantly links back to the state's ECM and Community Supports web page. It also provides a detailed timeline for implementation, knowing that folks have a lot of interest in understanding when things are going live. You can access that in the resources section as well. |

| Kate Johnson: | 20:18 | If we move to the next slide, the toolkit also contains a glossary of key terms. And here on the slide, you can just see a few examples of what this section looks like and the terms that are addressed. Readers are encouraged to sort of refer back to the glossary of key terms as you're going through the toolkit. It includes definitions for things like provider, community-based entity, care manager, things that, again, may have different definitions depending on who you talk to. So hopefully this information will be a useful source for providing some clarity throughout the resource. And with that, that is the full overview of the ECM Provider Toolkit. I'll turn it over to my colleague, Brianna, to talk about the other resources available to you. |

| Brianna Nielson: | 21:13 | Thanks, Kate. And so before diving into this one, I will just say, I know the link to the toolkit is working for some and not for others. So if it's not working for you, these resources are also already live on the DHCS's ECM |

Community Supports website. And I can ask maybe someone from my team to put that link in the chat and see if you're able to access them that way. If not, we'll make sure to also send out the toolkits to everyone after the webinar so that you can access them there as well. But with that, we'll dive into the Medi-Cal Community Supports Explainer, and if we can move on to the next slide. Great.

Brianna Nielson: 21:52   So this document serves as a high-level resource for providers or other stakeholders that are interested in learning more about Community Supports, including what they are, what services are available, what is expected of those who provide Community Supports, and other important policy and programmatic details. And like the ECM Provider Toolkit, the Medi-Cal Community Supports Explainer was developed to be easy to read using plain language and providing the right level of information to give people a good baseline understanding of these services while also linking to more detailed policy information. Next I'll walk through the contents of the explainer and share some visual examples.

Brianna Nielson: 22:33   First, the explainer provides information on what Community Supports are, noting that they address health-related social needs and are services that are not traditionally covered by Medi-Cal. It then outlines the pre-approved Community Supports that Medi-Cal health plans may offer and provides definitions for each of these services. The explainer also provides information on how members can access Community Supports and similar to the ECM Provider Toolkit, this helps clarify that members may be contacted directly by their health plan, referred by one of their providers, or have the option of self-referring if they believe that they may qualify. Then the explainer also outlines how Community Supports and ECM can work together to address the medical and social needs of individuals who qualify for both services. And this section includes a fictional member story that helps illustrate how Community Supports and ECM can collectively meet member needs.

Brianna Nielson: 23:36   And so next, there are details on who provides Community Supports, including examples of possible Community

Supports providers, as well as information on the responsibilities and requirements that Community Supports providers need to meet. And again, similar to content in the ECM Provider Toolkit, there is information on how providers can obtain a National Provider Identifier and how payments work for Community Supports. Then the Community Supports Explainer also includes questions that those interested in serving as Community Supports providers may want to consider to help determine whether and in what capacity they participate in the initiative. And then lastly, the explainer includes a section with links to additional resources and policy guidance.

Brianna Nielson: 24:22   So if we move on to the next slide, as mentioned, these next few slides provide visual examples from the Community Supports Explainer so that you can see how information is presented and formatted. So this slide shows an example of the descriptions of each of the 14 pre-approved Community Supports in a section on what services are available. And as you can see, the descriptions are brief and are meant to help providers and other stakeholders understand what's available under each one and identify which ones might be helpful for their patients or their clients. Next slide. And so this next example is of the fictional member story that I mentioned from the section on how ECM and Community Supports can work together. We have found that these types of fictional member stories are particularly helpful in ensuring understanding of how these services will actually work to support member needs. Next slide.

Brianna Nielson: 25:22   And then lastly, this shows the questions that providers may want to consider if they're interested in becoming Community Supports providers. So these are designed to help interested providers think about their current expertise and capacities, and whether that aligns with what would be expected of them as a Community Supports provider. And so that wraps up our overview of the Medi-Cal Community Supports Explainer. If we move on the next slide, we'll cover the purpose and contents of the ECM Outreach and Member Toolkits at a high-level. And again, these are both slated for release in the next couple of weeks. And so starting with the ECM Outreach Toolkit, its goals include outlining key challenges to

outreach and engagement, identifying strategies, and sharing promising practices for ECM provider outreach and Medi-Cal health plan oversight, and then lastly, supporting ECM provider outreach staff and health plans. So we believe this toolkit could help spark conversations on your team about what you're doing that's working well and where there might be opportunities for growth in engaging hard to reach patients.

Brianna Nielson: 26:29 Next slide please. And so this toolkit includes an overview, a section on building your outreach team, which includes approaches for assigning staff roles and the advantages and challenges associated with different approaches as well as strategies for hiring the right outreach staff. There is also a section on training and supporting outreach staff. The section includes elements that may be helpful to include as part of a staff training and approaches to providing ongoing support. The next section on leveraging community partnerships emphasizes the importance of community partners and provides ways to effectively build and leverage these relationships. And then the following section on locating eligible members, outline some of the common challenges that exist and provide strategies and promising practices for overcoming those barriers to reach members. Engaging eligible members is another important element of outreach and this section similarly outlines challenges and strategies for addressing them.

Brianna Nielson: 27:31 The section also includes key messages that can be used when engaging members. And then the next two sections focus on strategies for reaching certain populations, specifically those experiencing homelessness and members of the LGBTQI+ community. And then there's a section on ongoing member engagement that focuses on how to engage a member once they're enrolled in ECM, given the importance of maintaining communication and keeping members motivated to continue with ECM. And then lastly, there's a section on safety tips and outreach supplies that can serve as a checklist for outreach staff who are out in the fields. And then the toolkit also has appendices that provide a sample outreach call-script as well as a set of resources that can support effective outreach in the LGBTQI+ community. And similar to the past toolkits, the sections of the ECM Outreach Toolkit can

stand alone and may serve as really valuable individual resources to share with staff and partners.

Brianna Nielson: 28:33 The section on safety tips and outreach supplies and the appendices are really great examples of that. And so then if we move on the next slide, next and finally we'll cover the ECM Member Toolkit, and the goals for this resource include providing key information about ECM for Medi-Cal members, highlighting where members can go for additional information, and lastly, serving as a resource for ECM providers, Medi-Cal health plans, and community-based partners to educate members about the benefit. And for this toolkit, there's a strong emphasis on using language and terminology that is less technical in nature. We want this resource to be one that members can digest easily without overwhelming them with some of the policy details that might not be relevant. And so next slide, this toolkit includes an ECM overview with top-line information for members, a section explaining what ECM is, including the services it offers and how it can help a member.

Brianna Nielson: 29:39 There is also a section on who can receive ECM services, which emphasizes that the benefit is available to those that are enrolled in a Medi-Cal managed Care health plan and meet certain eligibility requirements. There is also a section on who provides ECM services, explaining that individuals with ECM have a Care Manager that coordinates with other providers. It also describes how a member's care team works and what might be included in their care plan. And then there's a section that goes into more detail about the services that ECM offers and provides a number of examples of what might fall into each of those core services.

Brianna Nielson: 30:15 And another that provides answers to frequently asked member questions. And then the toolkit also includes a worksheet that members can use to write down important information that they may be asked to share with their health plan, such as current doctors or healthcare needs, as well as any questions that they may have for their health plan or provider. And lastly, there's a section outlining member rights and responsibilities. And so with that, that concludes our tour of all of these provider

		resources. And I will turn it back over to Jill to take some questions and close us out.
Jill Donnelly:	30:51	Thanks, Brianna. Lots of great questions in the Q&A, but also heard it that folks are having trouble accessing the toolkit. So we are troubleshooting that and we will be sending them out via email after this call. Apologies for that inconvenience. I also wanted to mention there are a lot of very technical questions that have come through. I wanted to also direct all of you to the ECM policy guides that are also on the DHCS website. Those are more technical and more similar to the Health Homes Program guide for those of you who are asking about it. So those are other great resources. All right, we're going to jump into answering some of the Q&A. So this is a question I will send over to Kim. The question is how does one become an ECM or Community Supports provider? How would you go about engaging a potential health plan in your area?
Kim Swift:	32:02	Thanks, Jill. This is a great question. So it's a common question that we've received from providers over last year or so. And it's one of the reasons we included a section in the ECM Provider Toolkit and the Community Supports Explainer. So in summary, those interested in becoming an ECM and Community Supports provider should reach out to their Medi-Cal managed care plan in their county to signal interest and begin conversation. We've compiled all of the Medi-Cal health plan contact information in a centralized place, and we'll post the link in the chat for you. We've also provided some suggestions within the toolkit about what interested organizations can do to prepare ahead of any conversations with their health plans. Some of these things include understanding the services you currently provide and potential areas of alignment with ECM or Community Support, as well as thinking through your staff and technical capacity that your organization would be able to meet provider expectations.
Jill Donnelly:	33:06	Great. Thanks, Kim. I'm going to jump in and just answer one of these. We've had some questions about whether all of these toolkits are currently available and just a reminder that two of them are up on the DHCS website right now and we did provide that link. We're going to

send them out as well. The other two, the Outreach Toolkit and the Member Toolkit are coming out later this month. So keep an eye open for those. We've had a couple questions about how a provider could refer a patient or one of their clients into ECM and Community Supports. So maybe we can ask Jillian for help answering that question. Jillian, what's the best way for folks to refer clients into ECM and Community Supports?

Jillian Clayton:	33:54	Great question. Thank you, Jill. As we mentioned earlier and have said throughout the past year, it will be tremendously important to the success of ECM and Community Supports and one way is through referral. Providers will likely have the most up to date information about a member and might know, for example, that one of their clients is about to lose their housing before the health plan does. In a case like this, we would want the provider to refer the member into ECM and/or Community Supports and health plans are required to have a process for managing these referrals. I would recommend reaching out to your local Medi-Cal health plan to ask for additional details about their specific process. We can again provide that contact information in the chat.
Jill Donnelly:	34:43	Great. Thank you. Lot of great questions coming in. Again, some of them are on the more technical side. I'm seeing some questions about billing. Again, I want to point you back to the DHCS website, where there are policy guides, as well as very specific billing and coding guidance. So that would be a good place to go for those types of questions, as well as talking to your individual managed care plans in your area about their particular billing processes under ECM. Kim, maybe we can head back to you. There are some questions about in-person outreach and some of the challenges in in-person outreach, especially for highly mobile populations. Also in light of the public health emergency, there's a real around in-person outreach, the question around whether the toolkit provides any solutions for some of these challenges.
Kim Swift:	35:49	Yes, the ECM Outreach Toolkit does address common outreach challenges, and it offers some strategies for providers. So ECM providers can approach eligible members through multiple communication channels to

increase the likelihood of making contact. This would include in-person, telephone or text messages, mail, email, and others that you might be able to use. The health plans have received guidance on how each of these forms of outreach will be reported and they should be communicating those expectations to their providers. In addition, if providers are conducting in-person outreach, they should consult and adhere to state, local, and organizational COVID-19 protocols, just wanted to plug that since we know that that's a topic of concern currently.

Jill Donnelly: 36:41 Great. Thank you, Kim. A few more questions in here just about whether the Community Supports toolkit or explainer is live. And the answer is yes to that. If you're unable to access it through the link, we will be sending it out. Some other questions around whether the information presented today will be available after the call. And the answer is absolutely yes, this is being recorded and we will send out a link to that. So if we've gone too quickly or if this is a pretty dense presentation, not to worry. All of this will be available.

Jill Donnelly: 37:26 I think we've touched on most of the questions that are sort of linked to the toolkits. Again, there have been several other presentations that get more deeply into the weeds on the technical aspects of these programs. We refer you back to the DHCS website. There's just so much information up there linked in other presentations, lots of good policy guides and other documents. I will also mention, we will be looking through all of the questions submitted today. And if there are any we identify that really haven't been addressed elsewhere, we'll consider them for an upcoming FAQ. Just trying to see if there's anything else we can touch on today. This is a question for Jillian. Jill, if one of the providers is in a county where the applications have already been collected for ECM and Community Supports by the managed care plans and they chose not to apply at the time, does this mean they will not be able to become an ECM or Community Supports provider in the future? Will there be other opportunities to provide these services?

Jillian Clayton: 38:54 It is our expectation that Medi-Cal health plans will continue to grow their ECM and Community Support

provider networks over the next few years, especially as new populations of focus become eligible for ECM and as plans opt into additional Community Supports.

Jill Donnelly:	39:13	So yes?
Jillian Clayton:	39:14	Yes. Sorry.
Jill Donnelly:	39:16	No, that's good. All right. I'm seeing lots of great questions. Again, some of these are on the very technical side so pointing you once more back towards that DHCS link with all of the good policy guidance, as well as, other presentations. I think, we've covered most of the toolkit related questions. I want to thank all of you for joining and for your engagement and for your really wonderful questions today. Again, I'll say the slides will be available on the DHCS website following the webinar, and the recording will be available soon after, as well. The ECM Provider Toolkit and the Community Supports Explainer are both currently linked on the website. We'll be sending that out as well via email. The ECM Outreach and Member Toolkits will be released later this month. So please check back later in the month for those links and those documents. Thank you all. And I'm sure we will be reaching out very soon with lots of links and attachments. Thank you again.