

MANAGED CARE PLAN – CORRECTIONAL FACILITY MOU POST-  
RELEASE WEBINAR

**Date:** December 12, 2025

**Time:** 10:00 – 11:00AM

**Number of Speakers:** 2

**Duration:** 43m 27s

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**Speakers:**

- » Autumn Boylan
- » Amara Bahramiaref

**TRANSCRIPT:**

**0:00—Autumn Boylan—Opening Slide**

Hello everybody.

Welcome to today's webinar on the Managed Care Plan Correctional Facility MOU template.

We are looking forward to walking through the final memorandum of understanding that was recently released by the Department of Health Services.

And to walk through some of the changes that we made.

Based on the very thoughtful feedback that we received during the public comment period.

So we're looking forward to sharing that with you and hopefully we've gotten the MOU to a place where it'll be a helpful tool for our Medi-Cal managed care plans and our county correctional facilities to be able to work together in collaboration share data.

And make sure that there is that coordinated reentry under the justice involved reentry initiative that we're seeking to to make sure that there's that kind of improved process. So looking forward to talking with you all today.



Know some folks are still getting settled in for today's webinar. But we are going to go ahead and get started.

So let's go on to the next slide. Thank you.

Them.

So as I said, we're gonna kind of walk through the memorandum of understanding.

But first, we'll give a brief overview of the standard MOU requirements that are included in all of the DHCS memorandums of understanding for our medical managed care delivery system.

We'll provide a specific overview of the Correctional Facility MOU for our county partners and our medical managed care plans.

And walk through.

Through the substantive changes that we made to the MOU template, as a result of the public comment, and then finally we'll conclude with a discussion of the approach and timeline for execution of the MOU's between the county Correctional Facility partners and our medical Managed care plan partner.

So we'll go ahead and.

Dive in to the discussion and I would like to introduce.

Use and turn it over to Amara from our Medi-Cal Managed Care Quality and Monitoring Division, who will walk through kind of some of the standard MOU requirement elements.

### **2:51—Amara Bahramiaref—Slide 3**

Thank you, Autumn.

Good morning and happy Friday.

My name is Amara Baja Romeo from the branch chief in manage care quality and monitoring, and my team has supported the the larger MCP/MOU effort and has developed the policy and the specific MOU templates in partnership with certain program areas. So in this.

Regard we were able to partner with Autumn and her team from Office of Strategic Planning to develop.

This specific program template, but today I'm going to just give you sort of a high level overview.

View of how this sort of fits into the the broader MOU effort that my team has been leading. So really appreciate the opportunity to be here today.

With that, we can go to the next slide.

### **3:27—Amara Bahramiaref—Slide 4**

So we're going to talk about some of the goals of the MLU's and how they really specifically tie to the correctional facilities.

And so really we when we started this effort, we really wanted to focus in on really incorporating those care coordination requirements across parties from different policy vehicles that we have.

You all are probably aware we do have a number of different policy vehicles and so really the intent was to incorporate how the parties are supposed to coordinate into one specific document, which is why we created ACF specific template.

So you will see existing program requirements that are contained within the CF template. We also wanted to establish minimum requirements around some of the key managed care contract provisions like Autumn alluded to earlier, so specific training data sharing.

So you'll see these.

Themes that are consistent across all the MOU.

So we can really make sure that the managed care relationships with the other parties are fairly consistent, understanding that there's a lot of local nuances.

So we have tried to make them as nimble as possible.

We also really want to clarify roles and responsibilities for who's ultimately responsible for the coordination and delivery of services for all of the Members, including the the services that are carved out in the managed care contract.

The MOU also aims to formalize.

Processes for how the MCPS and the CF will collaborate and ultimately coordinate to ensure that medical members are getting the services that they need.

You'll also see we have a data sharing pathway which really supports the robust. Relationship between the managed care plans and the correctional facilities.

We've also included some.



Some of the provisions related to Overcount oversight and accountability to really drive quality improvement understanding, you know.

Some of these relationships are very new and we really want to ultimately improve the processes and then ultimately bringing transparency across the parties and also to the public, because the the managed care plans are required to publicly post these information, this information, once the ML user executed.

With that, we can go to the next slide.

### **5:34—Amara Bahramiaref—Slide 5**

So as mentioned, this app specific MOU template is part of a larger set of policy documents that the department created. So in conjunction with the managed care contract that outlines the key provisions that are required for the MCPS to execute, we also release what we call an.

All plan letter which is requirement for a managed care, plans to really outline some of the base requirements of the MOU.

Mous and also.

We developed what we refer to as a bespoke MOU template, which really just those are the specific MLU templates for the program.

We'll talk about that a little bit more in detail today.

It's very important for you all so that the APL explains the overall intent and purpose of each of the MOu provisions.

It sets standard expectations for the MCPS, which include, you know, the requirements, such as the web posting of the executed MOU, how they can submit Readline Mous to the Department for review.

The annual review of the MOU.

So there's a number of requirements that are contained in that all plan letter. It also lays out how the department is ultimately going to monitor this effort.

From for the managed care plan perspective, we also released that base MOU template, which is really just sort of the foundation that we have included to really outline the base MOU provisions that are located in each of the specific bespoke MOU templates. So for this conversation today.



We're really gonna laser focus in on the Correctional Facility MOU, which really focuses in on the specific relationships between the managed care plans and the correctional facilities.

So it contains the general requirements from the base MOU templates, such as meeting quarterly specific data sharing.

Requirements the training requirements.

So some of the standard provisions that you see in every single MOU template, but it also contains those very specific program requirements.

That really outline how the correctional facilities and the managed care plans will ultimately coordinate care for the medical numbers.

It also contains some of the optional provisions that the department encourages the parties to execute.

You'll see those provisions noted in italics throughout the MOU. Those are not required.

We do understand again that there are those local level nuances, so you know it may or may not be appropriate to include those as you begin.

Negotiating the execution of Mous it also.

Includes links to specific policies, so you can really link back to where that requirement is located, whether that be in the managed care plan, potentially all plan letters are different policy guides.

With that, we can go to the next slide.

### **8:19—Amara Bahramiaref—Slide 6**

So we did just want to share some helpful resources for you all today.

Don't try to access this page right now, because this page unfortunately is down, but we did as a part of this effort, we did bring up a DHCS MOU web page which includes all of the policy documents that I talked to you about today. So it includes the.

All plan letter the base MOU template, the linked Correctional Facility MOU template, and then it has a very in-depth MOU FAQ which helps address some of the questions that may arise as you begin executing.

We also included that MOU specific e-mail address if there's specific questions that you have really around that, that MOU process, we're happy to help address those questions. If there are more policy related questions, we would recommend that you do direct those questions to the Cali and Justice ADV.



Group inbox.

That's also note, hey, two notated here.

And with that, I'm gonna turn it back to Autumn to provide a little bit more of an update on the specific correction.

Our facility and template.

Boylan, Autumn@DHCS 9:37

Thank you so much, Amara. And and I realize I just jumped right in to today's session without even saying my name. But I'm Autumn Boylan with the Department of Healthcare Services now receive the accounting justice involved re-entry initiative.

So apologies for getting us started in that way today, but but happy to move on to the next slide.

### **9:50—Autumn Boylan—Slide 7**

All right, so let's get into some of those specific provisions of this MOU template,

### **9:57—Autumn Boylan—Slide 8**

which is meant to really outline kind of the roles and responsibilities related to provision of services to our medical members in correctional facilities and through the re-entry and post release, community support kind of processes.

It includes a specific language and provisions around.

Care coordination responsibilities, referral protocols, an oversight of the MOU itself. And other requirements that are based on the policy and operational guide for the planning and implementation of the justice involved initiative or our reentry policy and operations guide.

There are also provisions in the 2024 medical managed care contract between DHCS and the medical managed care plans, but those are the provisions that you just heard Amara speaking about as kind of some of those general requirements of the MOU's. Our hope is that by negotiating.

The terms of these memorandums of understanding, it will strengthen the relationship. Between our county Correctional Facility partners and our medical managed care plan so that they can collaboratively work together to support our medical members who are in custody in a Correctional Facility. Setting will be released back into the community and receiving their post release care from the medical man.



Care plans provider network, specifically their ECM providers. Primary care providers, specialists, etcetera.

We want we think that this MOU will improve communication between the managed care plans and the correctional facilities, enhance each other's understanding of the respective services and requirements that each are responsible for in supporting this population and clearly delineate the roles and responsibilities so that there is.

A clear plan for how.

Our county partners and our managed care plans.

We'll work together to implement the reentry initiative across the state. Now we know that some of you have already started to develop these relationships.

13 counties in the state have already implemented the pre-release services, so this is really an extension of the work that you've already been doing to codify some of those requirements and to strengthen the the relationship.

The bond and the understanding between the county Correctional Facility and our medical managed care plans and for those county correctional facilities that have not yet implemented the reentry initiative, we really hope that this could serve as an enhancement or a starting place for the work that you're going.

To be doing with your managed care partners in each county next.

### **13:07—Autumn Boylan—Slide 9**

So some of the specific provisions that are, you know, just as a reminder that we talked about that are part of the base MOU template requirements, but that we have included and try to you know crystalize in terms of the reentry specific requirements include the services that are covered by the MOU, the roles and responsibilities or obligations of each party.

Referral requirements, care coordination, kind of, data sharing and confidentiality.

And some of those general provisions that Amara just spoke to a few minutes ago on the next slide,

### **13:07—Autumn Boylan—Slide 10**

you'll see that there are also some optional components that are included in the MCP Correctional Facility MOU template including, you know, preferred modes of communication and time frames for Responding to referrals.

County specific processes For assigning a pre-release care manager and the medical managed care plan specific processes for assigning an ECM provider.

Specific processes for the identification of eligible providers that may be serving in an in reach capacity as pre-release care managers or pre release services providers, as well as the post release ECM and warm hand off processes.

This would also include the county specific processes for identifying out of network providers for behavioral health. If there are no in network providers available to see the Member within the recommended behavioral health link timeframes for follow up as well as out of network providers for other services for which the managed care plan cannot arrange timely access to care in accordance with state law and requirements.

Next.

### **15:15—Autumn Boylan—Slide 11**

We received a lot of stakeholder feedback through the public comment period as well. As you know in our work with correctional facilities that have already implemented the pre release services programs and really have aimed to make sure that we are responsive to those comments while still giving some.

Flexibility for you to work locally with your partner.

To you know, specify some of the terms of the MOU in the indicated places throughout the MOU.

We did receive 140 stakeholder comments during the comment period.

We reviewed each and every one of those comments and made appropriate edits to the MOU template and for today what we'll do is walk through some of the substantive feedback and changes that we made as a result of the public comment that we received during the comment period next.

### **16:20—Autumn Boylan—Slide 12**

So we'll go ahead and get started with that.

### **16:25—Autumn Boylan—Slide 13**

So there were several comments about the obligations of the Correctional Facility section, and so language was revised throughout the MOU template to add requirements that the Correctional Facility.

To meet quarterly with the managed care plan, ensure specifics and sufficient staff.



To support compliance and management of the MOU and require correction facilities to train and orient appropriate employees to the MOU.

And so the new provisions say that the correctional facilities responsible person must meet quarterly with a managed care plan and additional elements for the quarterly meeting requirements were updated in Section nine of the MOU and will be described later in the presentation next.

#### **17:26—Autumn Boylan—Slide 14**

There was also language revised throughout the template related to these quarterly meetings.

To ensure that there are sufficient staff at the Correctional Facility to support compliance with and management of the MOU which is inclusive of compliance and management of the justice involved, reentry initiative requirements in the policy and operations guide must manage and oversee.

Correctional Facility liaison.

If the county Correctional Facility responsible person for the MOU is not also the Correctional Facility liaison for the managed care plans and the Correctional Facility liaison must ensure the appropriate communication and care coordination is ongoing between the parties to facilitate the quarterly meetings in accordance with the MOU. And provide updates to the Correctional Facility responsible person as appropriate.

Really, with these revisions and the comments that we received, what we're trying to get to here is that there's actually a process put into place through these quarterly meetings where there is a time for the managed care plan and the Correctional Facility responsible party to be.

Able to meet and discuss.

US the provisions of the MOU, you know, opportunities for improvement in terms of the relationship and the shared processes and that these processes are carried out in accordance with the policy and operations guide for the justice involved reentry initiative next page.

#### **19:20—Autumn Boylan—Slide 15**

There was also changes made to a section of the MOU that referred to compliance by subcontractors and downstream subcontractors.

There were some comments that we received to make sure that Correctional Facility ensures that all of their contracted entities, as well as by the way, the managed Care plans, contracted entities are complying with the provisions of the MOU.

So if, for example, a Correctional Facility partner contracts with a third party that provides correctional healthcare services, it would be the county's responsibility to make sure that that third party correctional healthcare services provider also is complying with the provisions of the MOU and the justice involved requirements Initiative requirements in the policy and operations guide.

This requirement also applies to the managed care plans.

To make sure that their ECM providers are complying with the provisions of the MOU as well as other providers in the network.

But we did want to, you know, make this change to make clear that that both parties are required to make sure that any subcontractors are required to comply with the provisions of the MOU agreement that's put into place.

Next.

#### **20:44—Autumn Boylan—Slide 16**

We also made some revisions to the referral section of the MOU template to address the stakeholder feedback and so some of these changes include clarifying existing language around the short-term model timelines, applying to all referral activities and clarifying that Medi-Cal managed Care plans are.

Responsible for ensuring medically necessary.

Medical covered services for their member is available.

If the member is eligible for those services and they are medically necessary, they should be provided upon release and an activation of the medical managed care plan coverage. It also makes clear that the referral activities described in the MOU apply to only circumstances where the Correctional Facility is providing the pre-release care management via their embedded providers.

So it's meant to kind of speak to that referral.

And warm handoff process when it is not the managed care plan ECM provider doing the in reach pre-release care management. But the Correctional Facility is providing the care management directly and doing that hand off, making the necessary referrals through the ECM provider to the network providers of the.

Medical managed care plan. So you see the new provisions down below. Which really kind of reflect what I just spoke to.

Next page.

### **22:19—Autumn Boylan—Slide 17**

So we also made changes to the language around the care management care manager assignments section of the template. This section was revised to clarify that the short term model timelines apply to all care Manager assignment activities and it was also revised to remove specific steps for provider alignment. This change is meant to really increase the flexibility.

In the template and allow the correctional facilities and manage care plans to develop your own methods for assigning providers.

And to specify those in the agreement that is executed between the managed care plan and the Correctional Facility at the county level. And so you know, of course this must comply with the policy and operations guide and then once inserted into the MOU.

So you know the expectation is that both the Correctional Facility and the managed care plan comply with their own mutually agreed upon and documented policies and procedures and that that is monitored through that quarterly meeting and check in process between the county's responsible person and the medical.

Managed Care plans responsible party. Next.

### **23:49—Autumn Boylan—Slide 18**

We made some changes to the behavioral Health link section of the MOU to clarify that the MCP must assist the pre-release care manager or the post release J.I. ECM provider in arranging for appointments for non-specialty mental health services. If the individual should be app.

Referred to non specialty mental health services as opposed to county. Behavioral health specialty.

Mental health services.

After release from incarceration.

So we included a reference here to the All Plan letter 22-006 which is hyperlinked and available on the DHCS website. For more information about the non specialty mental health services requirements.

And this is really for medical members who are enrolled in the managed care plan that do not meet the criteria for specialty mental health services.

Is drug, medical or drug Medicare organized delivery system services, but where they will receive their behavioral health link and behavioral health services directly from the medical managed care plan following their release from the carceral setting.

Next.

### **25:09—Autumn Boylan—Slide 19**

So we also made some changes to the care manager.

Warm handoffs provisions to clarify that the Correctional Facility and managed care plan must collaborate to develop written policies and procedures to coordinate post release warm handoffs, DHCS may review these policies as part of ongoing monitoring

activities, but we do expect as part of the MOU execution.

That there is that kind of joint development of these written policies and Procedures that are included in the executed MOU between the managed care plan and the county Correctional Facility. And so we wanted to specify that if the warm handoff does not occur before the Member is released from the Correctional Facility, that those written policies and procedures.

Really reflect kind of what will happen for those Members to make sure that they are getting appropriate care In the community from their ECM provider as well as from the managed care plans provider network.

We also added.

Or revised a section to modify the timeline requirements in the MOU to indicate that the warm handoff should take place within one week of notification to the managed care plan of the release of the individual from custody.

Next page.

### **26:44—Autumn Boylan—Slide 20**

We made some additional changes related to the care manager, warm handoffs to indicate that the Correctional Facility is responsible for sharing the RE entry care plan with the post release JI ECM provider, if different than the pre release care manager. Of course during the warm.

Hand off or within one business day of an unexpected release from custody with the post release, JI ECM Provide a responsible.



For sharing with additional providers as needed.

So the requirement for the correctional facilities to share the RE entered care plan with additional entities was removed based on stakeholder feedback in order to reduce the administrative burden for our county partners. If you shared the reentry care plan with the JI ECM provider that should be sufficient as then they will have their responsibility. To share the reentry care plan.

With any parties that should receive it, including the managed care plan or other providers within the medical managed care delivery system and their their network.

Next.

### **27:59—Autumn Boylan—Slide 21**

We made some changes to the coordinated Care reentry section of the MOU template to explicitly state that the managed care plan is responsible for ensuring appropriate provider assignment, even if enhanced care management is declined by the member. So in instances where a member declines a pre release, care management and or post release ECM, the Managed Care plan must still ensure that the members.

Assigned to an appropriate provider, including primary care, specialty care or non specialty mental health services for necessary post release services, and the Correctional Facility must notify the managed care plan within one business day of a members release if the member is assigned to a managed care plan. Regard.

Of whether they participated in the care management process. Next please.

### **29:00—Autumn Boylan—Slide 22**

OK.

So again, as I mentioned, we'll there are additional changes to the quarterly meetings section.

To address that, meeting attendees and Cadence really to increase flexibility for the correctional facilities in the managed care plans to work out put in for your arrangements for how you will manage those meetings and the expectations will still maintaining the requirement that persons with leadership decision making ability.

Are involved in the meeting, so we want to give some flexibility, but make sure that the right folks are being assigned to to facilitate and participate in the meetings that those folks have a decision making capability and that those meetings are effective in managing the MOU and the processes that are established as a part of the MOU. Between the managed care plan and the Correctional Facility.

Next.

### **30:05—Autumn Boylan—Slide 23**

All right, so we will.

Next, move on to the approach and timeline for executing the managed Care Plan, Correctional Facility, MOUs

### **30:18—Autumn Boylan—Slide 24**

And we do expect all of our county jails and county youth correctional facilities to enter into MOUs at a county level.

So, for example, the County Sheriff could sign on behalf of all jails in the county, not for individual.

Jails entering into a separate MOU, but that whichever county entity.

Is responsible for correctional health care services that they that they enter into the MOU on behalf of all of the correctional facilities in that county entities jurisdiction. The county jails and youth correctional facilities could enter into a unique MOU with each managed care plan in the county or enter into one single MOU where you negotiate, you know the.

Terms across so that there's one MOU with all MCPS and no variation.

So you have the option to have variation that's unique or or streamline and have one template for all, MCPS for the state prisons, and CDCR NCCHCS of this particular MOU template is not applicable.

There will be a separate template that follows. But CDCR NCCHCS at the state level.

Will negotiate 1 MOU on behalf of Allstate Prisons, with all MCPs, and we've already started working with the managed care plans and CDCR on that template.

We're finalizing it and hope to get that out in the early part of January. Next.

### **32:05—Autumn Boylan—Slide 25**

During the stakeholder comment period, DHCS solicited input on who should be the appropriate parties to the MOU.

So we're setting the following requirements, the Correctional Facility and any public entities county entities, whether it's public health, Department of Health Services, the sheriff, probation, but any public entity that is responsible for the delivery.

Of correctional health care services should be the parties to the MOU.

So if there are multiple agencies that have responsible responsibility for the delivery of correctional health care services, each of those parties should be a party to the MOU and signatories to the MOU, which means that each county entity would also need to have a responsible person, that is delegated to oversee the MOU and manage the MOU and collaboration with your other.

County colleagues and the managed care plan, for example, if the county public health entity provides correctional health care services at the Correctional Facility, the County Public Health Agency is the entity that should enter into the agreement.

We do want to make sure that the Correctional Facility and the sheriff for an adult jail or probation for youth Correctional Facility are also.

Parties to the MOU and that those roles and responsibilities are delineated. In the MOU as well next page.

### **33:45—Autumn Boylan—Slide 26**

So for correctional facilities that went live with pre release services prior to January 20, January 1st, 2026 or for any correction facilities that may go live on January 1st, 2026, the effective date for correctional facilities and managed care plans to demonstrate a good faith effort to enter in the MOU is by January.

So we want you to get started on these processes.

We know that you may not have time to actually execute an agreement by that date, but we do want those efforts to.

To be initiated and starting to work towards executing the MOU template for any correctional facilities that go live with pre release services after January 1st, the effective date for the Correctional Facility.

And managed Care plans is by the correctional facilities go live date. So as we are having a lot of correctional facilities that will be onboarding over the next 10 months, we want to make sure that you're working with your, your medical managed care plans in your county to.

Start these negotiations as part of your planning and implementation of the reentry initiative and as part of your readiness processes.

And DHCS will require submission of copies of the MOU for review and approval, and will monitor the MOUs on an ongoing basis, both on the Correctional Facility side and on the medical managed care plan side. So as a best practice, DHCS recommends again that you begin negotiating.



The MOU as soon as possible.

Or upon submission of the readiness assessment.

Which has been, you know, required six months in advance.

We have a readiness assessment webinar next week where we will be talking about some changes that we're making to the readiness assessment process and may have an opportunity to shorten some of those timelines.

So we really do recommend that for those counties that have not yet gone live, that you really start those conversations early as all counties are required to go live with the.

Initiative by October of 2026 next.

### **36:19—Autumn Boylan—Slide 27**

All right, so we do have a couple of questions. In the chat.

There's a question about the updated policy and operations guide and when that will be released we are updating the guide and kind of really.

Pulling it apart so that if there are some more standalone policies that are topically specific.

So we're finalizing the 1st.

Kind of appendix to the policy guide and we'll start releasing those on a flow basis. Hopefully the first one before the end of the calendar year. So still in December and the remaining in January is the plan.

So for folks wanting to know about that, there's also a question.

About whether if the subcontractor will be executing a separate data use agreement in addition to the counties, it's recommended to have the subcontractor complete the

MOU so it's not required that the subcontractor like if you have a correctional healthcare services provider for example, complete the MOU but it.

Is required that the county entity hold your subcontracted. Parties responsible for the provisions of the MOU. Executed with the medical managed care plan.

Same is true on the medical managed care plan side. So I just spoke to a similar question.

About the subcontracted third party correctional healthcare services providers.

So it wouldn't necessarily be party to the MOU, but correctional facilities and managed care plans may consider updating your agreements with your contracted third party



Correctional healthcare services providers to make sure that they are complying with the provisions of the MLU.

So you might be thinking about that.

I think we've answered most of the questions. Any questions that we did not?

Address. Today we'll address in a frequently asked questions. Following following the webinar.

I know there's a question about like the templates being posted, and if we'd make editable templates available, we are posting the template templates.

Amara, do we typically provide editable like word versions? Yes.

Bahramiaref, Amara@DHCS 39:24

Yeah, we have historically done that because they are allowed to make red lines.

Boylan, Autumn@DHCS 39:26

So.

Bahramiaref, Amara@DHCS 39:28

So we were.

We have historically done that.

Boylan, Autumn@DHCS 39:32

Great. So we will do that.

Thank you for clarifying and we will make those available.

And and we hope that you will join us next week on Wednesday at 11:00 AM for our readiness assessment updates and the webinar next week. If you didn't get.

The the notice about that webinar.

Please reach out to us at that Calibeam Justice advisory group. We'll also be sending out a reminder.

About the webinar, which will be on Wednesday, and we'll share some exciting or what we think are exciting updates.

To our readiness assessment process. All righty. We do have a hand raised.

We didn't really talk about if we were going to take hands raised, but Ron, let's let's see what you have to share with us today.

Ron clinger.



Maybe.

Can you unmute?

Bahramiaref, Amara@DHCS 40:45

Yeah, I'm not sure that they can unmute. Oh, maybe.

Let's see.

Try again to unmute.

Boylan, Autumn@DHCS 40:59

All right.

I don't think that we have.

Ron Klinger, MSN 41:01

Oh, can you hear me?

Boylan, Autumn@DHCS 41:02

Oh, there you go. There you go.

Ron Klinger, MSN 41:03

All right, so I put it in the chat as well.

I did not hear if you if you addressed the DUA question that was in there because with we have some counties, we have CDCR who are moving forward to execute the data use agreement in addition like as an addendum to this MOU. And I'm just curious if you.

Aware of that process, or if you have any guidance around whether we need that separate agreement in addition to this MOU.

That's all I was wondering.

Boylan, Autumn@DHCS 41:28

Yeah. So for the I know that we've been working on day to agreement for.

The for the agreement MOU with CDCR, what we've done or what they've done is kind of merge the data elements and the MOU and there are data sharing elements in the county Correctional Facility agreement as well.

And so we would kind of defer to your legal.

If you need additional provisions in terms of a data use agreement, but we'll take that back. But I think our intention is that the MOU covers that data sharing agreements that are necessary.



Ron Klinger, MSN 42:12

Thank you.

Appreciate it.

Boylan, Autumn@DHCS 42:13

Yes, OK.

Well, hopefully we'll see some of you on Wednesday for our readiness assessment webinar.

We'll share out that information as well following you know as as a reminder for folks, if you didn't get the e-mail, we'll share that out for our correction facility partners who want to find out about the changes that we're making and.

And for the rest of you, if you have questions, please reach out to us. Is at the calendar Justice advisory group at dhcs.ca Gov.

We look forward to hearing your questions, your successes and executing these agreements and supporting you through this process.

We hope that you have a wonderful holiday season or into your 2025. However, you celebrate that and a happy New Year if we don't talk to you.

Thank you all for coming today, Amara. Anything you want to say before we close out?

Bahramiaref, Amara@DHCS 43:15

Nope. Thank you and happy happy Holidays and happy New Year.

Boylan, Autumn@DHCS 43:20

All right.

Thanks everybody.

Have a great day.

stopped transcription.