Welcome to today’s Tribal Consultation Meeting!

We will begin shortly. All lines have been automatically muted.

While you are waiting TEST YOUR AUDIO.
LISTEN FOR MUSIC.

Please use the chat feature for questions or raise your hand.

Thank you.
Zoom Webinar Controls

Navigating your bar on the bottom...

- **Windows:** You can also use the Alt+Y keyboard shortcut to raise or lower your hand.
- **Mac:** You can also use the Option+Y keyboard shortcut to raise or lower your hand.
Audio Settings
Silent Invocation
Quarterly Tribal Consultation Meeting

November 05, 2020
November is Native American Heritage Month
AHCCCS Update

Jami Snyder, AHCCCS Director
AHCCCS Sunset Review

- Unless extended, AHCCCS is scheduled to sunset on July 1, 2023
- Joint Legislative Audit Committee has requested that the Office of the Auditor General (OAG) initiate an a sunset review audit
- Audit kick-off occurred on October 29, 2020
- OAG must submit report by October 1, 2022
- Areas of focus in 2012 sunset review
  - Medicaid fraud and abuse prevention, detection, investigation, and recovery processes
  - Medicaid eligibility determination
  - Coordination of benefits
Follow Up Items from Prior Quarterly Tribal Consultation Meetings

- Tribal Foster Care Navigation
- Continued engagement with tribes and ITUs regarding the Whole Person Care Initiative
- ROPA Information for Providers
- Childhood Flu Vaccine Updates
- AIMH information-sharing with TRBHAs
- Care Coordination Agreement Updates
- AI/AN AHCCCS enrollment data
Welcome to the 2020 AHCCCS Waiver Public Forum
Arizona’s 1115 Waiver Renewal Timeline

- Oct. 2 - Nov. 30, 2020
  Public Comment Period
  
  - Waiver Public Forum Meeting #1: October 14, 2020
  - Waiver Public Forum Meeting #2: October 16, 2020
  - Special Tribal Consultation: October 19, 2020
  - State Medicaid Advisory Committee (SMAC) Meeting: October 21, 2020
  - Waiver Public Forum Meeting #3: November 13, 2020

- Oct. 2, 2020
  AHCCCS to post draft of the 1115 Waiver

- Dec. 31, 2020
  AHCCCS to submit 1115 Waiver Draft to CMS

- Oct. 1, 2021
  Anticipated GO LIVE date of 1115 Waiver
Public Notice & Comment Period

• Arizona must provide at least a 30-day public notice and comment period prior to submitting renewal application to CMS

• Arizona’s draft application will be available for public review and comment: **October 2, 2020 - November 30, 2020**

• Submit written comments no later than **November 30, 2020**

• Arizona’s renewal application can be found on the AHCCCS website: [www.azahcccs.gov/WaiverRenewal](http://www.azahcccs.gov/WaiverRenewal)
1115 Waiver Renewal Application

- **Initiatives to Be Continued**
  - Targeted Investments Program
  - AHCCCS Works
  - Waiver of prior quarter coverage for certain populations
  - Payments to IHS and 638 Providers

- **New Initiatives**
  - Verbal consent in lieu of written signature for up to 30 days for care and treatment documentation for ALTCS members
  - Reimbursement for traditional healing services (renewed request)
  - Reimbursement for adult dental services eligible for 100% federal financial participation provided by IHS and Tribal 638 facilities
    - Exceeding the $1,000 emergency dental limit for adult members and the $1,000 dental limit for individuals age 21 or older enrolled in the ALTCS program
AHCCCS Works

• Under this waiver renewal, AHCCCS is seeking to maintain its current authority to implement AHCCCS Works

• On October 17, 2019, AHCCCS informed CMS of Arizona’s decision to postpone implementation of AHCCCS Works until further notice

• This decision was informed by the evolving national landscape concerning Medicaid community engagement programs and ongoing related litigation
AHCCCS Works Requirements

• Able-bodied adults* 19-49 who do not qualify for an exemption must, for at least 80 hours per month:
  o Be employed (including self-employment)
  o Actively seek employment
  o Attend school (less than full time)
  o Participate in other employment readiness activities, i.e., job skills training, life skills training & health education
  o Engage in Community Service

* Adults = SSA Group VIII expansion population, a.k.a, Adult group
Exemption for American Indian and Alaska Native members

- Members of federally recognized tribes and their children and grandchildren are exempt from the AHCCCS Works community engagement requirement.
- AHCCCS will use information in Health-e-Arizona Plus (HEAplus) to exempt individuals who have self-identified as tribal members.
- Members seeking tribal exemption must ensure demographic information in HEAplus is updated.
How to Receive the AI/AN Member Exemption

<table>
<thead>
<tr>
<th>WHAT IF: I receive correspondence that I am exempt from participating in AHCCCS Works requirements?</th>
<th>No further action is required.</th>
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<tbody>
<tr>
<td>WHAT IF: I’m an American Indian/Alaska Native member who receives notice that I must participate in AHCCCS Works?</td>
<td>Identify yourself as an AI/AN member to maintain AHCCCS benefits and eligibility. Log in to <a href="http://healthearizonaplus.gov">healthearizonaplus.gov</a> Health-e-Arizona PLUS</td>
</tr>
<tr>
<td>WHAT IF: I am selected to verify my tribal membership for my exemption?</td>
<td>Documentation can be uploaded to HEAplus directly by member or Community Assistors, taken to a local DES office, or mailed or faxed to DES.</td>
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</table>
AI/AN Exemption - Documentation

• Members of federally recognized tribes and their children and grandchildren may submit documentation including, but not limited to the following examples:
  o Certificate of Degree of Indian Blood
  o Tribal ID or Census Record
  o Official letter from tribe stating that the applicant is a child or grandchild of a tribal member
  o Other document provided by the tribe stating that the person is a member of the tribe
  o A document verifying tribal member’s enrollment and a document verifying that the applicant is a child or grandchild of the tribal member
Tribal Dental Benefit (HB 2244)

- In 2020, HB 2244, authorized AHCCCS to seek approval from CMS to reimburse IHS and 638 facilities to cover the cost of adult dental services that are eligible for 100% FMAP, that are in excess of the $1,000 limit

- The purpose of this Demonstration is to improve oral health outcomes for American Indian/Alaska Native (AI/AN) members
  - AI/AN adults suffer from untreated dental caries at twice the prevalence of untreated caries in the general U.S. population
  - The geographic isolation of tribal populations & inability to attract dentists to practice in IHS or tribal health facilities in rural and frontier areas are contributors to these oral health disparities
Traditional Healing Services

- AHCCCS is seeking waiver authority to reimburse traditional healing services and claim FFP for these services when provided by I/T/U facilities at the 100% FMAP

- The goal is to improve the health outcomes of AHCCCS members by making traditional healing services available in a complementary fashion with allopathic medicine
Traditional Healing Waiver Proposal

• Upon approval by CMS, the covered traditional healing services, limitations, and exclusions shall be described by each facility (working with each tribe they primarily serve)

• The array of practices provided by traditional healers shall be in accordance with an individual tribe’s established and accepted traditional healing practices as identified by the Qualifying Entity
Qualifying Entity

• Responsible to define and endorse traditional healers and the services they perform
• An I/T/U facility or clinic governing body may serve as the Qualifying Entity
• The tribe(s) served by the facility may choose to designate another governing body as its Qualifying Entity
Traditional Healing Reimbursement Methodology

• I/T/U facilities and clinics would be reimbursed at the outpatient All-Inclusive Rate (AIR) published in the Federal Register

• A traditional healing service provided in an inpatient setting, when provided in conjunction with a separate qualifying Medicaid inpatient stay, would be reimbursed as a professional fee
Traditional Healing Workgroup Update

Last Meeting: 10/27/2020
Traditional Healing Timeline

**2015**
Traditional Healing (TH) workgroup was established

**Winter of 2016**
CMS recommends a State Plan Amendment (SPA) instead of Waiver for traditional healing services

**2018 & 2019**
No clear direction from CMS on path forward to incorporate traditional healing in State Plan

**Summer of 2016**
AHCCCS submits to CMS the traditional healing waiver proposal developed by TH workgroup

**2017**
TH workgroup reconvenes and develops a crosswalk for traditional healing services for SPA

**2020**
AHCCCS reconvenes the TH workgroup to resubmit a traditional healing waiver proposal
Next Steps For Traditional Healing Waiver Proposal

- Work with TH workgroup to review comments & finalize TH waiver proposal.
- Provide updates to the TH workgroup regarding the negotiations with CMS in 2021.

CMS decision on TH waiver proposal

- APPROVED BY CMS: If CMS approves TH waiver proposal, AHCCCS works with TH workgroup, I/T/U/s, and tribes to operationalize TH benefit. Updates will be provided at TCs.
- DENIED BY CMS: If CMS denies TH waiver proposal, AHCCCS will work with the TH workgroup and tribes to determine the next steps.
Workgroup Discussion

• Topics:
  o Inclusion of Urban Indian Organizations at 100% FMAP
  o Review of Qualifying Entities and their role in identifying services and providers
  o Reimbursement methodology clarification
  o AHCCCS Members eligible to receive TH services

• Recommendation for AHCCCS Consideration:
  o Inclusion of language regarding IHS-eligible individuals
Upcoming Waiver Renewal Public Forum

11/13/2020
1:30 p.m. - 3:30 p.m
Link: https://ahcccs.zoom.us/webinar/register/WN_JSoe-leSTzuud4rQjHXR9g

*After registering, you will receive a confirmation email containing information about joining the webinar.
Resources & Public Comment

AHCCCS Waiver Renewal Request (2021-2026)

How do I submit public comment? Public comment can be

- Discussed at public forums
- Emailed to waiverpublicinput@azahcccs.gov
- Mailed to 801 E Jefferson, Phoenix, AZ 85034 Attn: Federal Relations
Open Discussion

Agenda Item Request: Waiver of Prior Quarter Coverage
Housing Overview

David Bridge, Director of Housing Programs
AHCCCS Housing Programs (AHP)

• AHCCCS currently receives approximately $30 million annually in NTXIX State General Funds to provide housing for persons with Behavioral Health needs (primarily for persons determined SMI)
• Eligible Activities include:
  o Housing/Rent Subsidies (Scattered and Fixed Site)
  o One Time Housing Assistance (Eviction Prevention, utility assistance, move in assistance)
  o Capital Funding (Acquisition, Rehab and repairs)
  o Amount available for each activity based on specific funding
• Majority of funding currently allocated and administered through RBHAs in each GSA
• Currently four TRBHAs receive allocation of housing funding
AHP Changes

RFP for Housing Administrator

• Goal: Contract for Single Statewide Housing Administrator
• Duties: Manage referrals and waitlists, standardize housing search and lease up processes, HQS inspections and re-certifications, payment of housing subsidies, coordinate with RBHAs to support members in attaining and maintaining housing
• TRBHA funds and processes will continue to be administered directly through AHCCCS, not Housing Administrator.

Expansion of TRBHA Housing Participation
Open Discussion

CONTACT
David Bridge
Director of Housing Programs
david.bridge@azahcccs.gov
AHCCCS Provider Enrollment Portal

Patricia Santa Cruz, DMPS
Current State

• Over 3,095 providers have accessed APEP
• 2,378 applications submitted by providers
• Current average processing time is 50+ days
• Expedited applications take a minimum of 10 working days
• Re-registration process suspended
• When approved, letters of approval are mailed and PMMIS is updated
• Paper and faxed applications are being received and processed in date order along with APEP applications
• Application size will not be amended as it is in line with APEP
Challenges

• Staff orientation / Learning Curve
• Provider training and orientation
• Call volume Processes / reorganization / volume of calls
• Paper and Electronic process
• Providing application ID when not in re registration period
Call Center Support

Average 280+ calls per day - prior to APEP it was 100 calls or less

- Added resources to the call center team
- Call center is now outside of the Provider Enrollment production team
- Call center is staffed with customer service agents, not provider enrollment production workers
- Escalation process is via “service tickets”
- Allow time period for a response on service tickets
Re-registration Process

- Re-registration process has been suspended for October and November at minimum. Website has been updated with current status.
- If a provider was never enrolled with AHCCCS, there is not a re-registration process.
- If a provider is active and needs to submit an update, they can contact our call center to obtain a unique application ID to submit updates in APEP.
  - It takes 3 - 5 business days to obtain a unique ID.
Strategies for success

• Online training provided to over 1400 providers
• Online videos and written tutorials for providers
• Increased production staff
• Increased call center staff
• Continue with staff training and orientation
• Transition fully from a paper to system production / tracking
APEP Points of Contact

• Call Center: (602) 417-7670, option 5
• Email: APEPTrainingQuestions@azahcccs.gov

For Updates:

• Provider Enrollment E-News:
  https://azahcccs.gov/PlansProviders/APEP/ProviderUpdates.html
  ○ CLICK HERE TO SUBSCRIBE TO E-NEWS
Open Discussion
Children’s Behavioral Health Services Fund

Megan Woods, Integrated Care Administrator
SB 1523 - Children’s Behavioral Health Services Fund

• In 2020, the Arizona legislature passed Senate Bill 1523, establishing the Children's Behavioral Health Services Fund. This $8 million dollar fund will provide behavioral health services to uninsured/underinsured children as the result of a referral from an educational institution

• Access to the Fund is dependent on compliance with specific requirements
Requirements for Access to the Children’s Behavioral Health Services Fund

• A School District Governing Board or Charter School Governing Body adopt policies relating to school-based referrals for behavioral health services.
  o Prior to adopting the policies, they must be vetted at a public meeting, and comments submitted shall be considered
  o Once adopted, the policies must be posted on each applicable school website
Requirements for Access to the Children’s Behavioral Health Services Fund

• School District Governing Board or Charter School Governing Body Policies must include:
  o A process to allow a parent to annually opt in to the school based referrals
  o A process to conduct a survey of parents whose children were referred to and subsequently received behavioral health services
    ▪ Survey results must be compiled and submitted by AHCCCS to the Governor’s Office by December of 2022.
SB 1523 Information

• Further information on SB 1523 can be found at: 
https://www.azahcccs.gov/AHCCCS/Initiatives/BehavioralHealthServices/
Open Discussion
Division of Fee for Service Management
DDD-AIHP Update

Karen Grady, DFSM Deputy Assistant Director
Future Integration

- DES and AHCCCS are contemplating future integration efforts and overall improved system delivery for DD-AIHP members


- TRBHA Quarterly Meeting on August 28, 2020

- Goal: Improve care coordination and increase system transparency for members and providers
# Guide to Acronyms

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<th>Acronym</th>
<th>Description</th>
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<td>Behavioral Health</td>
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<td>CRS</td>
<td>Children’s Rehabilitative Services</td>
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<td>DDD-AIHP</td>
<td>DDD-American Indian Health Plan</td>
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<td>Division of Developmental Disabilities</td>
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<td>DFSM</td>
<td>Division of Fee-for-Service Management</td>
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<td>HCBS</td>
<td>Home and Community Based Services</td>
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<td>LTSS*</td>
<td>Long Term Care Services and Supports</td>
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<td>PH</td>
<td>Physical Health</td>
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<td>TRBHA</td>
<td>Tribal Regional Behavioral Health Authorities</td>
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<td>SMI</td>
<td>Serious Mentally Ill</td>
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Current and Potential Future Options for AI/AN ALTCS Members

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Proposed Division of Developmental Disabilities Options for American Indian / Alaska Native members
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Open Discussion
American Indian Medical Home Update

Leslie Short, DFSM Integrated Services Administrator
American Indian Medical Home (AIMH) Program

• AIMH initiative aligns with:
  o National IHS efforts to advance Patient Centered Medical Homes through the IHS Improving Patient Care (IPC) program
  o Coordinating care with IHS/Tribal 638 facilities
  o State-wide focus on integrated care, health information exchange, and care coordination

• Aims to help address health disparities by enhancing case management and care coordination through the use of a Primary Care Case Manager (PCCM)

• Concept of PCCM and PMPM strategy as an AIMH was brought to fruition through efforts of a Tribal Workgroup
Active American Indian Medical Homes

<table>
<thead>
<tr>
<th>AIMH</th>
<th>Tier Level</th>
<th>Enrolled Members</th>
<th>Monthly Payment</th>
<th>Annual Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phoenix Indian Medical Center</td>
<td>2</td>
<td>4,690</td>
<td>$81,887</td>
<td>$982,649</td>
</tr>
<tr>
<td>Chinle Comprehensive Health Care Facility</td>
<td>4</td>
<td>13,244</td>
<td>$345,006</td>
<td>$4,140,074</td>
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<td>Winslow Indian Health Center</td>
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<td>3,453</td>
<td>$89,951</td>
<td>$1,079,408</td>
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<td>Whiteriver Indian Hospital</td>
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<td>5,234</td>
<td>$91,386</td>
<td>$1,096,628</td>
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<tr>
<td>San Carlos Apache Healthcare</td>
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<td>2,572</td>
<td>$67,001</td>
<td>$804,007</td>
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<tr>
<td>Fort Yuma Health Center</td>
<td>1</td>
<td>16</td>
<td>$243</td>
<td>$2,915</td>
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<tr>
<td>**TOTAL</td>
<td></td>
<td><strong>29,209</strong></td>
<td><strong>$675,230</strong></td>
<td><strong>$8,105,680</strong></td>
</tr>
</tbody>
</table>

• Approximately 24% of AIHP members have joined an AIMH
AIMH Information

• Webpage information includes IGA templates, application packet, and contact information:
• https://www.azahcccs.gov/AmericanIndians/AmericanIndianMedicalHome/
Open Discussion
Pharmacy Updates

Ewaryst Jedrasik, DFSM Clinical Administrator
Background

- On Monday, August 31st, 2020, Governor Ducey held a press conference on the importance of all Arizonans getting a flu shot for the upcoming influenza season.
- AHCCCS has been working to expand access to flu vaccine administration.
New Initiative

• Expansion allows Fee-For-Service (FFS) members ages 3 through 18 years of age to now obtain their flu shot at an IHS, 638 Tribal or other Optum network pharmacy.

• All members enrolled in AHCCCS Fee-For-Service, who would like to obtain a flu shot at a pharmacy, are required to use a pharmacy that is part of the Optum FFS Pharmacy Network.
Additional Information

• Only the flu vaccine may be given to children and adolescents 3 years through 18 years of age at a pharmacy.
• Children ages 3 years through 18 years, that are seen in the clinic for a PCP appointment, must be immunized with a flu vaccine that has been obtained from or will be replaced by the VFC program.
• All members ages 3 and older may receive the flu vaccine at the pharmacy, a clinic or other approved setting.
Temporary AIR Reimbursement for the Flu Vaccine Administration

- Due to COVID-19 and the urgency to immunize for the upcoming flu season, AHCCCS is exploring a temporary provision to allow IHS/638 pharmacies to be reimbursed a second All Inclusive Rate (AIR) payment per day specifically for the administration of the Flu Vaccination.
- AHCCCS will communicate the effective date, once it is determined.
- There will be no increase to the 5 daily AIR limit.
- The sunset of this temporary provision will be communicated by AHCCCS in advance.
Source

• For the full memo, please visit:
Open Discussion
Federal Relations Updates
Update:

• Tribal Dental SPA (HB2244) was submitted earlier this year (6/30/20) and is currently being worked through by CMS.
  ○ We are also seeking approval for this language our 1115 Renewal.

Reminder:

• Rate and Differential Adjusted Payments (DAP) SPAs for FFY 2021 will be submitted this quarter.
January Nursing Facility (NF) Rates

AHCCCS will be submitting a SPA for the following rate update (effective 1/1/21):

• Rates for Nursing Facilities are being increased by 0.18% for Statewide and 2.22% for Flagstaff to addressed the increased labor costs from the Arizona minimum wage increase and employee benefit provisions mandated by Prop 206 and the Flagstaff minimum wage increase mandated by Prop 414 and later amended through action of the Flagstaff City Council.

January Home and Community Based Services (HCBS) Rates

In addition, AHCCCS will be updating the following HCBS rates, effective (1/1/21):

- Rates for HCBS are being increased by a cumulative statewide rate increase of 1.00% and a cumulative Flagstaff rate increase of 5.07% to addressed the increased labor costs from the Arizona minimum wage increase and employee benefit provisions mandated by Prop 206 and the Flagstaff minimum wage increase mandated by Prop 414 and later amended through action of the Flagstaff City Council.

Tribal Consultation and Public Comment Process

Public Comments or Written Testimony from tribes and I/T/Us may be submitted to AHCCCS via:

• The Tribal Consultation and Public Comment portal: comments.azahcccs.gov
• Email: public input@azahcccs.gov
• Mail: AHCCCS Attn: Office of Intergovernmental Relations 801 E. Jefferson St., MD 4200 Phoenix, AZ 85034
Open Discussion
AHCCCS Policy Updates
Tribal Consultation Policy Updates

Amanda Bahe, AHCCCS Tribal Liaison
Tribal Consultation Annual Report

- Submitted annually to Governor’s Office on Tribal Relations
- Documents AHCCCS Tribal Outreach and Engagement Activities
  - Goals: Derived from Tribal Consultation Policy (TCP)
  - Objectives: Defines reasons for conducting tribal outreach as defined by TCP
  - Measures: Describes actions taken by agency and any outcomes associated with action
Overview of Agency Tribal Activities

- 2016-2017 SFY: 91
- 2017-2018 SFY: 168
- 2018-2019 SFY: 164
- 2019-2020 SFY: 220

Number of Outreach Activities

AHCCCS
2019-2020 Activities

- Conducted by OOD, DCAIR, and DFSM and include:
  - Quarterly and Special Tribal Consultations: 11
  - Government-to-Government Meetings: 4
  - Trainings and Technical Assistance: 98
  - Statewide Presentations and/or Meetings: 71
  - AHCCCS Policy Distributions for Tribal Consultation: 40
AHCCCS Tribal Consultation Policy Revisions

• **Revised policy** now posted to website
  o Inclusive of revisions recommended by TCP workgroup and accepted by AHCCCS
• Includes two revised forms:
  o [Attachment B - Formal Recommendations](#)
  o [Attachment C - Formal Request for Tribal Consultation](#)
• Ongoing revisions:
  o Attachment A - Flow Chart (Direct Consultation by the AHCCCS Administration)
AHCCCS Tribal Consultation Policy Implementation

- Tribal Consultation Policy workgroup convened June 2019
  - Issued recommendations on putting policy into practice
- Recommendations:
  - Making policy and forms more accessible and user-friendly
  - Improving operationalization of TCP across all agency divisions
  - Better coordination of communications and information to tribes
Update on TCP Workgroup Recommendations

• Making policy and forms more accessible and user-friendly
  o Form updates
  o Workflow revisions

• Improving operationalization of TCP across all agency divisions
  o AHCCCS Policies: 45-day feedback period for all policy (new and revised) and inclusion of tribal representatives on AHCCCS Policy Committee
Update on TCP Workgroup Recommendations

• Better coordination of communications and information to tribes
  o *AHCCCS Update* to include recap of items requested at previous quarterly Tribal Consultations
  o Tribal Consultation Meeting materials available to public at least 3 days prior
  o Monthly Tribal Relations updates via email (inclusive of all agency information)
  o Regular Tribal Consultation communications and reminders via email and *AHCCCS Tribal Consultation web*
AHCCCS Tribal Consultation

• Goal: Ensuring reasonable notice and opportunity for consultation with Indian Tribes are provided by the AHCCCS Administration prior to implementing policy changes that are likely to have a direct effect on Indian Tribes.

• Annual Review of AHCCCS Tribal Consultation Policy
  o TCP Workgroup will reconvene to review changes to date
  o AHCCCS TCP update at February 2021 Quarterly TC
Open Discussion
Announcements
AHCCCS on the Road (Virtually!)

The Arizona Health Care Cost Containment System (AHCCCS) is hosting online forums to inform the community and gather feedback on the upcoming AHCCCS initiatives:

• The Future of Regional Behavioral Health Agreements (RBHA)
• Competitive Contract Expansion
• Whole Person Care Initiative
• Waiver
• AHCCCS COVID 19 Response

November 20, 2020
9:30 am - 11:00 am
Location: Webinar

Register in advance for this webinar:
https://ahcccs.zoom.us/webinar/register/WN_p6kwNk7nSPmNKUMph_CE0Q
After registering, you will receive a confirmation email containing information about joining the webinar.
CHR Workforce Assessment Phase II

- CHR Workforce Assessment Assessment Phase II is now available at the AACIHC website: aacihc.az.gov
- This report is a follow up to the first report and further describes the Tribal CHR workforce in Arizona
- You may request presentations on the Assessment by contacting Corey Hemstreet, Program Manager, AACIHC, Corey.Hemstreet@aacihc.az.gov
Next AHCCCS Tribal Consultation:

December 10, 2020 at 3 pm

Please check AHCCCS Tribal Consultation Webpage for meeting information.

*Please send any agenda recommendations to Amanda.Bahe@azahcccs.gov by November 30, 2020.
Thank You.

Have a great day!