



CABINET FOR HEALTH
AND FAMILY SERVICES

**Medicaid Monthly Virtual
Meeting
Jan. 16, 2025**

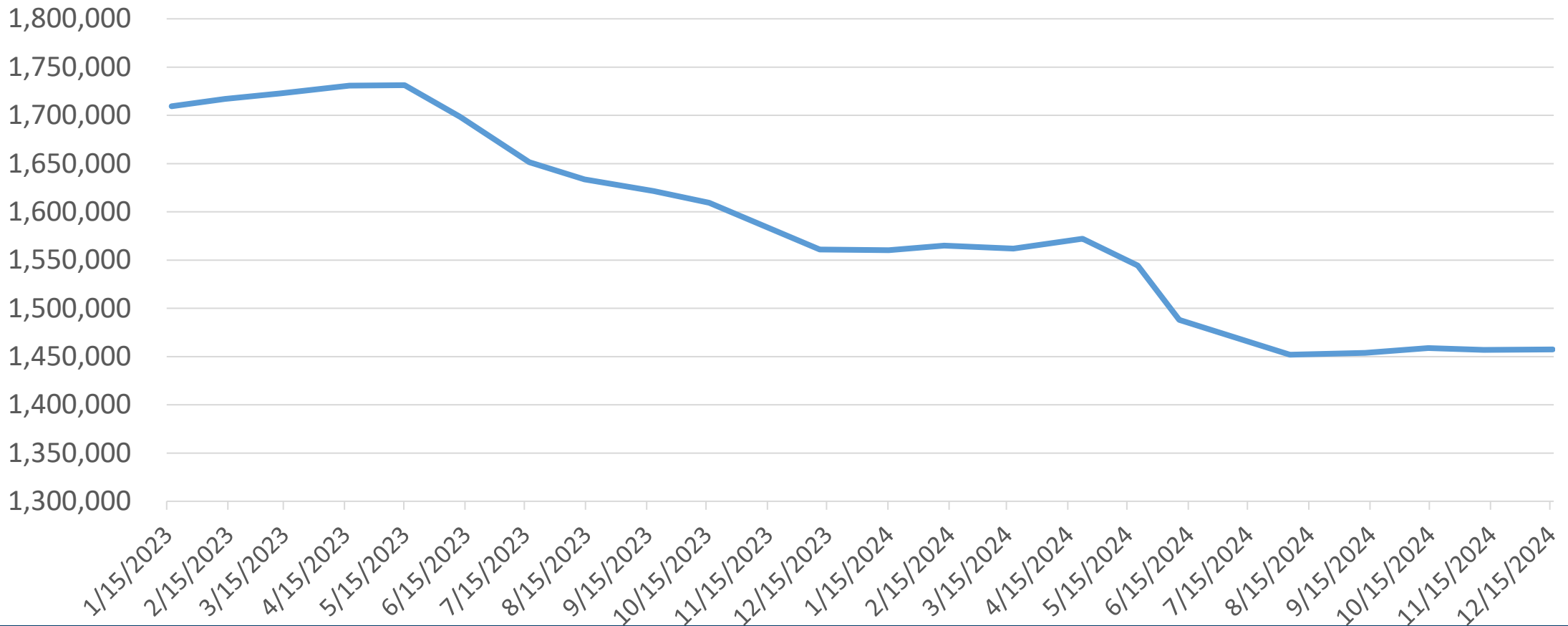
Agenda

- Welcome/Introduction
- Department Updates
 - Renewals and Eligibility
 - Anthem Transition
 - Federal Final Rule – Medicaid Advisory Committee and Beneficiary Advisory Council
 - Open Enrollment 2025
 - Reentry
 - HCBS Waivers
- Guest Spotlight: Department for Community Based Services
- Program Spotlight: Fiscal Management
- Hot Topic: Our Healthy KY Home - Diabetes

Medicaid Renewal Updates

Medicaid Enrollment Trend

Medicaid Enrollment: Jan 2023 through Jan 2025 Renewals



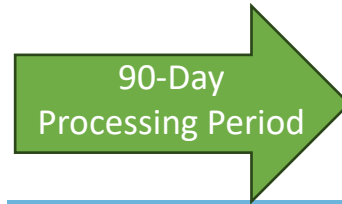
Medicaid Renewals

- Regular annual renewals for cases unrelated to the Public Health Emergency (PHE) unwinding resumed in April 2024.
- PHE flexibilities in place through June 2025 including automatic child renewals
 - November 14, 2024 CMCS Informational Bulletin outlines options to make some flexibilities permanent – under consideration.
- CMS monthly and updated reporting ongoing.

Unwinding Report Updates Posted – Cont'd

Original 2024 CMS Monthly Reports

	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending
Jan	79,053	67,748	10,899	22
Feb	93,004	64,789	10,128	1
Mar	97,962	70,358	7,932	72
Apr	103,265	70,170	15,887	226
May	94,705	51,534	37,461	816
Jun	58,959	41,336	13,187	1
Jul	40,719	36,036	1,187	0
Aug	36,136	31,823	979	2
Sep	52,369	45,833	1,234	1



Updated 2024 CMS Monthly Reports*

	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending
Jan	79,053	67,758	10,911	0
Feb	93,004	64,780	10,128	0
Mar	97,962	70,404	7,958	0
Apr	103,265	70,266	16,017	0
May	94,705	51,938	37,873	0
Jun	58,959	41,337	13,187	0
Jul	40,719	36,036	1,187	0
Aug	36,136	31,825	979	0
Sep	52,369	45,833	1,235	0

22 processed
1 processed
72 processed
226 processed
816 processed
1 processed
0 processed
2 processed
1 processed

*Per CMS' Medicaid and Children's Health Insurance Program Eligibility and Enrollment Data Specifications for Reporting During Unwinding, Updated October 2023, Version 3.

KY Medicaid Renewals* and Reinstatements

Individuals procedurally terminated on their renewal due date are given 90 days to respond and provide requested information. If they are determined eligible, coverage is **reinstated** back to their termination date. Months that are still within the 90-day window and are still processing reinstatements are included below.

	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending	Extended	Reinstatements as of 1/10/25
October	61,174	52,815	1,557	4	6,798	801
November	38,540	30,194	1,234	5	7,107	750
December	38,604	33,235	819	1	4,549	181

*Numbers are based on CMS Reports.

Help us get the message out! Informational fliers available on PHE website in English and Spanish!

Reinstatement Information

Materials for Offices

Editable Fliers for kynectors

ID Proofing Tips

How to Reinstate Your Medicaid

Beginning in April 2023, Kentucky Medicaid went back to doing annual renewals for Medicaid eligibility.

Did your Medicaid coverage get terminated? You may be able to get it back with a few easy steps!

But... You need to act within 90 days of your termination to get coverage reinstated!

Your kynect dashboard will have information about any notices you may have received explaining the steps you need to take to get your coverage back!

Here is what you need to do!

1. Log into kynect.ky.gov – if you don't have a kynect account, you can set one up by following the steps in this [video](#)!
2. Navigate to your Message Center to view your notices.
3. Read the notices you received to know what you need to do.
4. You may need to complete a pre-populated renewal application, upload documents, or report a change to your application.
5. Once everything is updated and completed, you can proceed to sign and submit.
6. If you are having trouble or can't set up a kynect account, you can call (844)-4kynect or go into a DCBS office for help. [Find a DCBS Office](#) or [find a kynector](#).

If your situation has changed and you are no longer eligible for Medicaid, there are other options available to you. Agents and kynectors can help you select and enroll in a Qualified Health Plans (QHPs) with payment assistance.

Visit <https://medicaidunwinding.ky.gov> to learn more!

Are you or your family covered by Medicaid or KCHIP? Your renewal letter could be coming soon!

- Make sure your address is up to date in kynect!
- Check your mail. We may need to contact you!
- Complete and return requests for information.
- No longer qualify? Shop kynect for an affordable plan!



(855)-4kynect

FREE HELP!

www.kynect.ky.gov/healthcoverage

kynect

TEAM KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES
Public Health Emergency Unwinding
Kentucky Medicaid Renewals

Here is what you need to know to stay covered!

If you or a family member currently has health coverage through Medicaid or the Kentucky Children's Health Insurance Program, called KCHIP, there are changes coming.

What's changing?

Because of COVID-19, the federal government declared a public health emergency (PHE). During this time, changes were made so that Medicaid and KCHIP renewals were not required, so people did not lose their coverage.

However, Kentucky restarted Medicaid annual renewals in April. Renewals will continue over a 12-month period.

Make sure you take the necessary steps to keep your coverage!

★ You will receive a letter when it is your time to renew.

What do you need to do?

1. **Update your information:** Make sure kynect.ky.gov has your correct:
 - ✓ mailing address
 - ✓ phone number
 - ✓ email
 This way, we can contact you without delay.
2. **Check your mail:** You will get a letter about your Medicaid or KCHIP renewal **when it is your time**. The letter will let you know if you need to complete a form or send in information to keep your coverage.
3. **Send in information:** If you get a form, fill it out, return it right away. Make sure to give us any information we request. The information will help determine if you still qualify for coverage.

Have questions? Need help?

To make sure your information is updated, visit kynect.ky.gov or call 855-4kynect (855-459-6328)

Kentucky Medicaid will reach out to you when it is your time to renew.

You can also get free help from local kynectors.

Local kynector: Contact Info:

ASSISTANCE FOR KYNECTORS

MANUAL IDENTIFICATION PROOFING MADE EASY!

WHY IS ID PROOFING NEEDED?

Sometimes, a Medicaid member's identification cannot be verified electronically with Experian. When this happens, members will need to take additional steps to assure the verification of their identity.

ADDITIONAL INFO...

It is important to flag emails for DCBS staff to assure awareness of an identification proofing request and proper identification of the Medicaid member.

Email documents to:

TIP 1

If ID proofing is needed, Medicaid members must submit a form and photo ID to the Department for Community Based Services (DCBS).

TIP 2

kynectors can assist with the completion of form and can email the document, photo ID, and member's contact info on behalf of the member to DCBS.

TIP 3

Members or kynectors can hand deliver the form to a local DCBS office.

DMS.IDProofing@ky.gov

Enter "ID Proof" in subject line

Identify member in body of email.

TEAM KENTUCKY
CABINET FOR HEALTH AND FAMILY SERVICES

KY PHE Website Resources

<https://medicaidunwinding.ky.gov>



During the COVID-19 Public Health Emergency (PHE), the Kentucky Department for Medicaid Services (DMS) made sure that all Medicaid beneficiaries kept their coverage. DMS stopped all annual renewals. But soon, DMS will begin annual renewals for Medicaid members. You may be at risk of losing Medicaid coverage if we cannot reach you. You should update your contact information as soon as possible and keep it updated so Kentucky Medicaid is able to reach you when it is your time to renew!

Please update your information as soon as possible!
Visit kynect.ky.gov or call kynect at 855-4kynect (855-459-6328) to update your mailing address, phone number, email and other contact information.
Kentucky Medicaid will then be able to reach you when it is your time to renew!

Kentucky PHE Plans and Reports

Through the PHE Unwinding, Kentucky will be prioritizing transparency across all operations and progress through the unwinding. The following materials will provide insight to all operational plans and up-to-date information on our progress through the 12-month unwinding period. Additional reports will be added to this section as they are available.

- [Kentucky Unwinding Approach March 2023](#)
- [Kentucky PHE Flexibilities Tracker](#)
- [Renewal Redistribution Report](#)
- [System Artifact Report](#)

Stakeholder Session Information

KY PHE Reports

FAQs

Medicaid Member Information

Medicaid Provider Information

Communication Materials

Communications Materials

If you should need any materials to share with your customers or partners, please feel free to leverage the following resources, developed and approved by Kentucky Medicaid.

- [Member Information Brief](#) [español](#)
- [Member Renewals Information](#) [español](#)
- [Provider Information Brief](#)
- [Alternative Coverage Options](#) [español](#)
- [Qualified Health Plan \(QHP\)](#) [español](#)
- [Medicare Enrollment \(Members\)](#) [español](#)
- [Medicare Enrollment \(Provider\)](#)
- [How to Access Your Renewal Date](#)
- [How to Access Your Patient's Renewal Date](#)
- [KY PHE Renewal Pathway Brief](#)
- [Provider Renewals Guidance Document](#)

Stakeholder Sessions

In March, DMS hosted Stakeholder Engagement meetings to provide information about the PHE Unwinding and Medicaid renewals. You can find the materials from those sessions here:

- [Presentation Recording - KY PHE Stakeholder Engagement Meeting Recording March - YouTube](#)
- [Presentation Slides](#)
- [Kentucky Unwinding Stakeholder Frequently Asked Questions Document](#)

To help support Medicaid partners, DMS is holding virtual stakeholder forums.



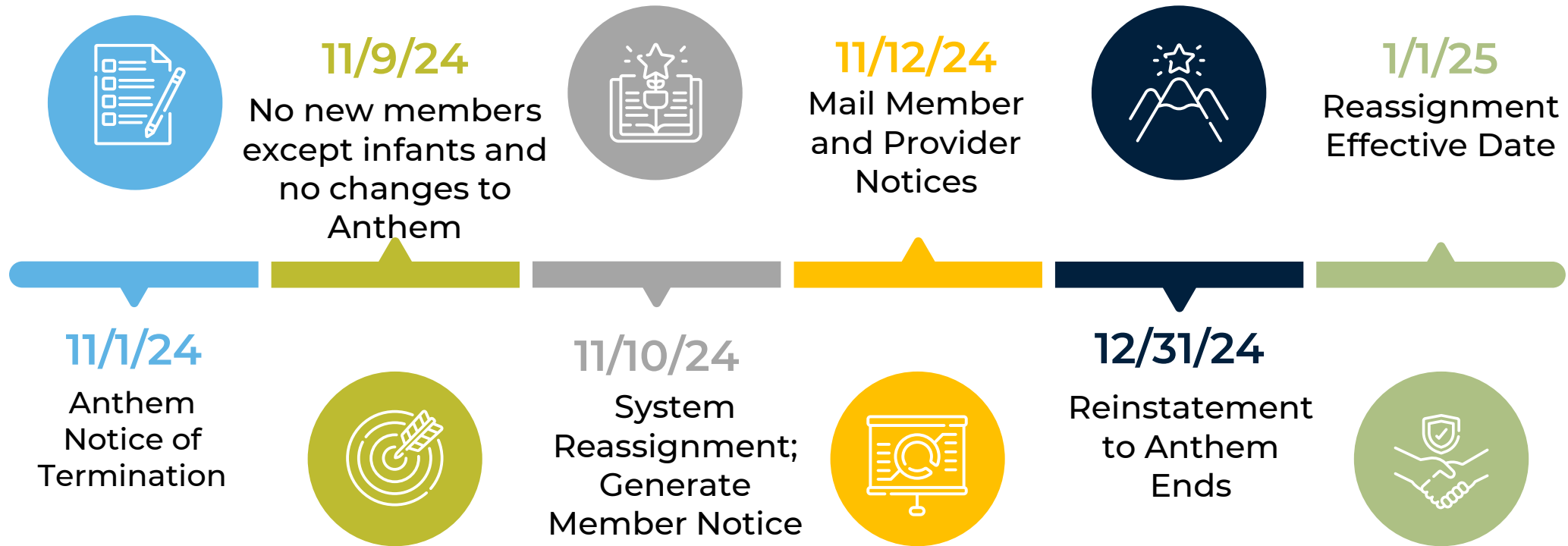
Please join us for the [Monthly Stakeholder Meeting](#) every third Thursday at 11:00 am ET.

If you have any questions for DMS that you would like for us to speak to during the upcoming monthly meeting, please submit those questions through this [survey](#). Thank you!

In addition, Thursday, April 20th we will be hosting a Provider Informational session on Medicaid Renewals and the PHE unwinding. Please [register for the event](#) to learn about updates specific to providers and hear answers to some of your questions!

Anthem Medicaid Transition

Anthem Transition Timeline



Anthem Transition

Anthem must maintain operations for run out including but not limited to:

- Cover and reimburse for services prior to January 1, 2025
- Process claims up to 365 days from date of service
- Respond to appeals for services prior to January 1, 2025 until completed

Designated website, [Kentucky Medicaid Anthem MCO Transition](#)
Designated number for Anthem members: 1-833-501-9930

Medicaid Advisory Council and
Beneficiary Advisory Council
Federal Changes

Medicaid Advisory Committee and Beneficiary Advisory Council

- Under the Ensuring Access to Medicaid Services Final Rule, new federal requirements for a **Medicaid Advisory Committee (MAC)** and **Beneficiary Advisory Council (BAC)** effective July 2025. (42 CFR 432.12)

MAC areas to highlight:

- Members selected by Commissioner
- Advising role does not change
- Expands membership to MCOs and other Commonwealth agencies
- BAC members must comprise certain % of MAC
- Selection of members will change
- Members cannot serve back-to-back terms
- MAC must submit an annual report to CMS

Current Status:

- **Held virtual forums on December 16 and 18**
- **Conducted survey through December 30**
- **Working on key takeaways and proposed legislation**

BAC areas to highlight:

- Members selected by Commissioner
- BAC membership is only current and former Medicaid beneficiaries, family members and caregivers
- Members cannot serve back-to-back terms
- BAC meetings do not need to be public
- Certain % of BAC members must serve on the MAC
- Must meet prior to MAC meeting

Open Enrollment 2025

Nov. 1 to Jan. 15, 2025

- Nov. 1: Open Enrollment Began.
- Dec. 15: Deadline for coverage to begin Jan 1.
- Open Enrollment ended Jan. 15



97,734

Kentuckians have enrolled in a
Qualified Health Plan.



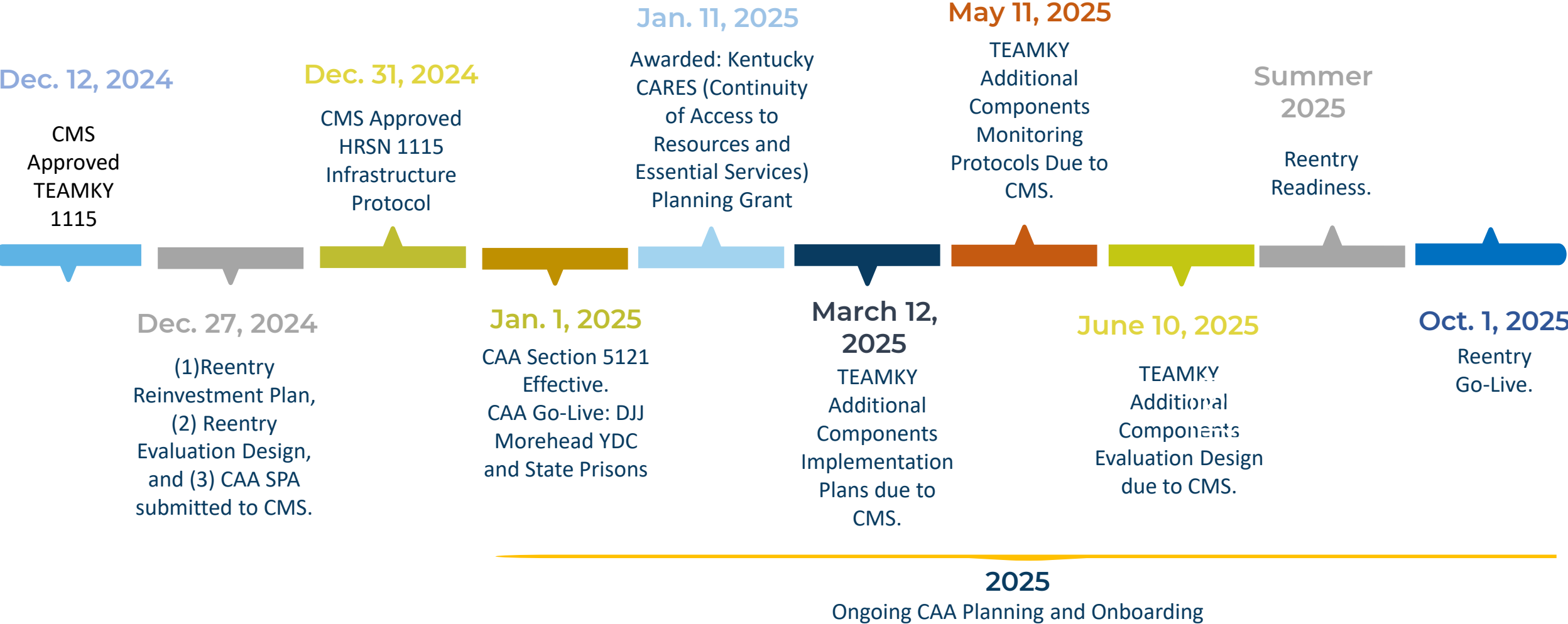
Second highest Open Enrollment
in the history of the Exchange'

Highest Open Enrollment in ten
years

How to reach us:
kynect.ky.gov
or call
1-855-4kynect, that's **1-855-459-6328**

Reentry Update

TEAMKY and CAA Timeline



1915c Home and Community Based Waivers Update

1915c Waiver Updates

Waiver Rates

- Effective 1/1/25
- Rates updated in current regulations - open for public comment
- Michelle P Waiver Respite guidance forthcoming

Slots

- All SFY25 slots allocated
- CMS approved SFY26 slots
- Allocation starts when SFY26 begins on 7/1/25
 - Acquired Brain Injury LTC – 25 slots
 - Home & Community Based – 500 slots
 - Michelle P – 500 slots
 - Supports for Community Living – 250 slots

Electronic Visit Verification Personal Care Services

- Therap system is live as of 1/1/25
- Providers using Therap must switch no later than 1/31/25.
- All providers must archive Netsmart data by 4/1/25.

Need 1915c Waiver Help?

Contact the Operating Agency

**Acquired Brain Injury
Acquired Brain Injury Long Term Care
Model II**

Department for Medicaid Services
Division of Long Term Services and Supports
(844) 784-5614
1915cWaiverHelpDesk@ky.gov

**Home and Community Based
Participant Directed Services
(all waivers)**

Department for Aging and Independent Living
(877) 315-0589
HCBIquiries@ky.gov

**Michelle P
Supports for Community Living**

Department for Behavioral Health, Developmental
and Intellectual Disabilities
(502) 564-7700
DDID.Info@ky.gov

**Medicaid Waiver Management
Application Technical Support**

(844) 784-5614, option 1
Medicaidpartnerportal.info@Ky.gov

Sister Agency Spotlight:
Department for Community
Based Services



CABINET FOR HEALTH
AND FAMILY SERVICES
Medicaid Partner Form

Department for Community Based Services

Gena Boyle, Deputy Commissioner

Mary Carpenter, Executive Advisor

January 16, 2025

Groundbreaking Child Welfare & Public Library Collaboration



Kentucky Department for Libraries and Archives



NewAllies
ACHIEVING TRANSFORMATION TOGETHER



Macroeconomic Supports

- Tax credits (EITC & CTC)
- Employment
 - Minimum wage
 - Paid family leave
 - Unemployment benefits



Concrete Supports

- Healthcare (Medicaid)
- Child care
- Housing



Child Welfare Interventions with ECS

- Differential response
- Family preservation



Public Benefits

- Overall state spending on benefits
- TANF
- SNAP & WIC



TANF Pilot

- Congress authorized the TANF Work and Family Well-Being Pilot (Pilot) in Fiscal Responsibility Act of 2023
- Created a five-year pilot aimed at testing alternatives to the work participation rate (WPR) as a performance measure
- WPR is a process measure, showing whether recipients were present at countable activities. It does NOT measure whether these activities actually increased an individual's employability or the family's household earnings.
- Kentucky chosen as one of five states to participate in the pilot (along with California, Ohio, Maine, and Minnesota)

Kentucky's Proposal

- Built on recent TANF modernization efforts, integration with the prevention programs and models, key partnerships, and expansion of case management model
- Measures:
 - Increase in household income
 - Reduction in child maltreatment referrals
 - Decrease number of children in out-of-home care
- Technical assistance to help build program and data capacity to identify, collect, and report data to meet the new accountability measures

Secondary Prevention Services

- Serving families outside of the child welfare system when a referral does not meet criteria for an assessment or investigation under statute
- Kentucky selected by the Doris Duke Foundation to work with the Opt-In for Families Initiative
- Partnership with the Department for Behavioral Health, Developmental, and Intellectual Disabilities and KY Moms MATR (Maternal Assistance Towards Recovery) to provide services to pregnant and postpartum persons
- Expansion of fatherhood services, specifically related to re-entry and reunification for incarcerated caregivers
- DCBS submitted a new Title IV-E Prevention Plan to expand the foster care candidacy definition that would allow for services to be provided to families without an open DCBS case who met certain criteria

Expansion of Evidence-Based Prevention Services

- Increase Family Preservation & Reunification Services capacity which:
 - Prevents out-of-home care placement and maintains children safely in their homes
 - Facilitates reunification of children through safe and timely exits from out-of-home care
- High Fidelity Wrap Around Pilot in three DCBS Service Regions
- Expanded Intercept to 8 of 9 service regions



Program Spotlight: Fiscal Management



CABINET FOR HEALTH
AND FAMILY SERVICES

Division of Fiscal Management
Division Spotlight

Amy Richardson, Director

December 19, 2024

Division of Fiscal Management

Oversee Department Budget - \$18.5b

State Plan Amendments

Directed Payments

Set Provider Reimbursement Rates

Personal Service Contracts

Federal and State Reporting

Open Records Request

Division Of Fiscal Management

Amy Richardson, Director

John Hay, Assistant Director

Jacob Wilson, Assistant Director

Financial Management Branch

Wesley Penn, Branch Manager

Rate Setting Branch

Michelle Tyson, Branch Manager

Advanced Planning Document Branch

Becky Tubbs, Branch Manager

Contracts and Administrative Services Branch

Angie Wilmoth, Branch Manager

Financial Management Branch

- Weekly provider reimbursement cycle
- Drug Rebates (\$1.55B in SFY 2024)
- Accounts receivable
- CMS reporting
- Directed Payment payment processing
- Disproportionate Share Hospital Program (DSH)
- Weekly Pharmacy Cycle
- Check Reissues

Rate Setting Branch

- Establish Fee-for-Service reimbursement rates
- Work closely with our Rate Setting contractor, Myers and Stauffer
- Collect and Review Cost Reports
- Cost Settlements
- RHC and FQHC Reimbursement Rates, using Prospective Payment System
- Provider type experts

Advanced Planning Document (APD) Branch

- Oversee APD process to request federal funding for IT systems
- Maintain APD submission schedule in accordance with CMS Guidelines
- Work closely with the Centers for Medicare and Medicaid Services
- Review APD expenditures
- Monitor APD related contracts

Contracts and Administrative Services Branch

- Oversee Personal Service Contracts for the Department
- Request Federal Grant Award from CMS
- Accounts Payable
- Federal and State Reporting
- Open Records Request
- Retention Schedules
- Inventory

QUESTIONS and/or Comments?

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Wesley.Penn@ky.gov

Michelle.Tyson@ky.gov

Angie.Wilmoth@ky.gov

Becky.Tubbs@ky.gov

Hot Topic: Our Healthy Kentucky Home Spotlight on Diabetes

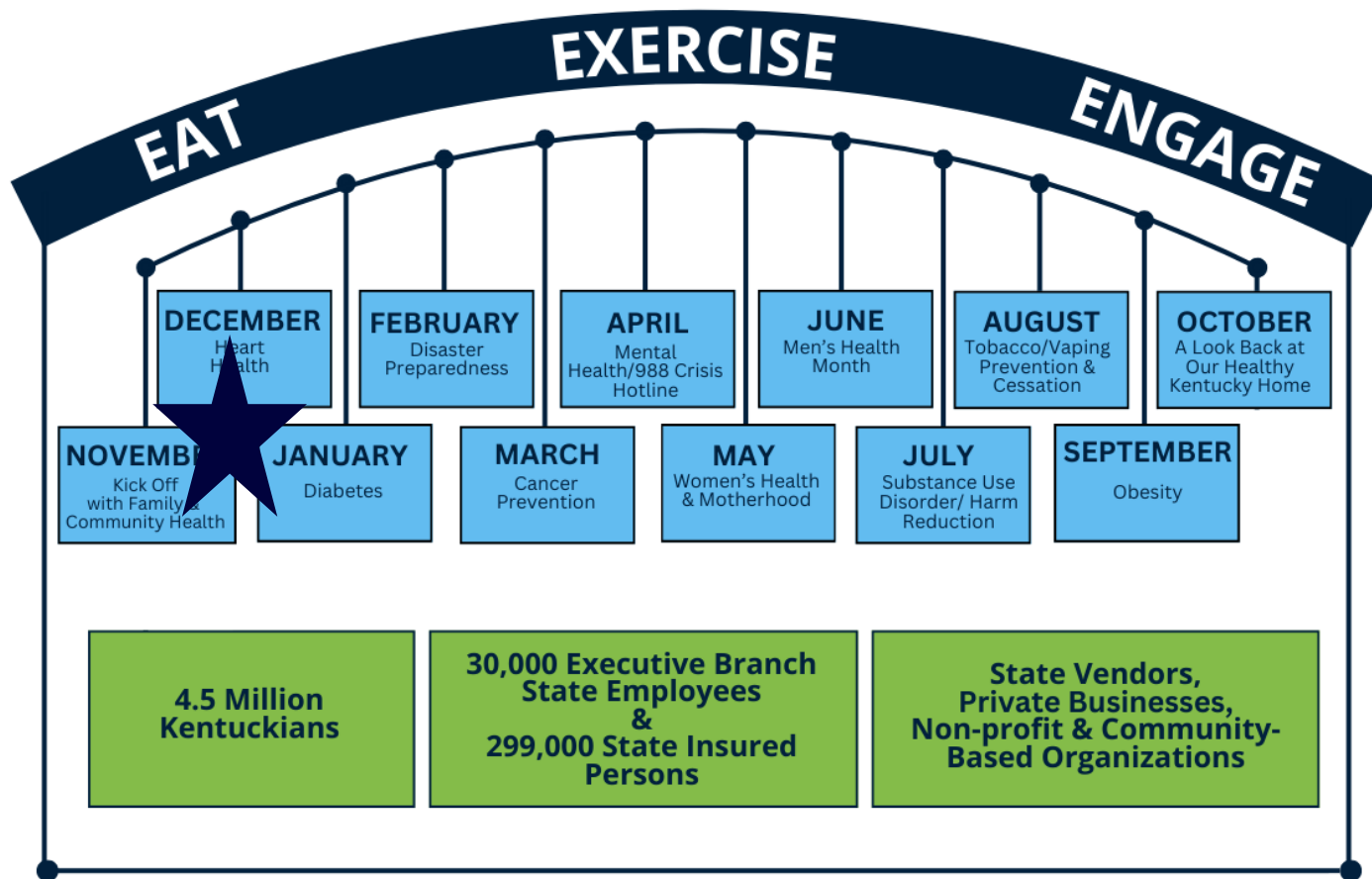
Our Healthy KY Home

#OurHealthyKYHome

TEAM
KENTUCKY



Kentucky Public Health
Prevent. Promote. Protect.



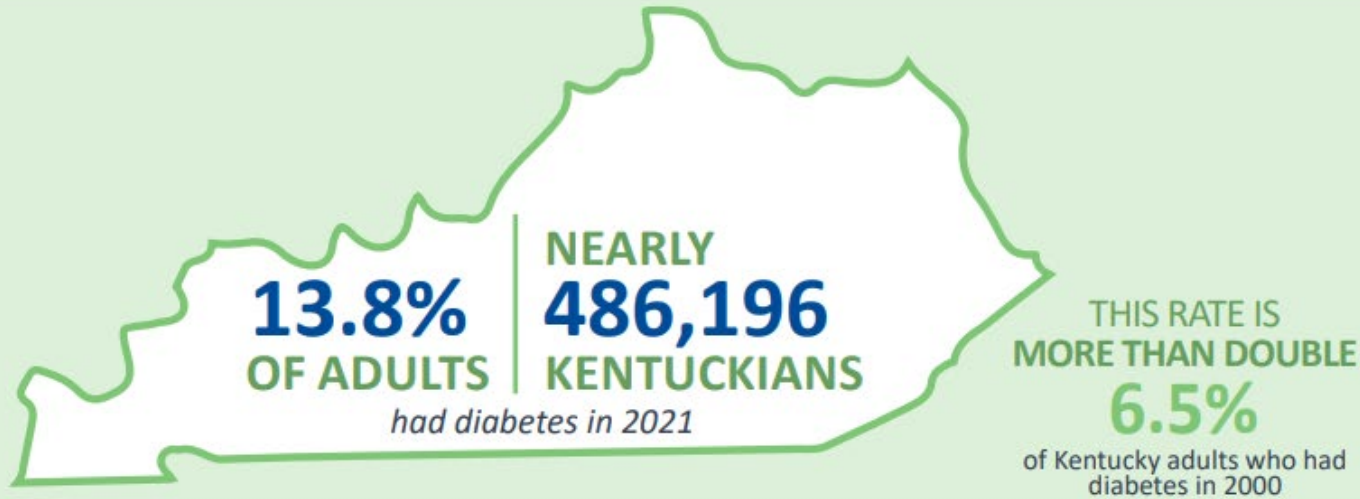
Focus on Diabetes:



Impact on Medicaid's Aging Population

- Long-Term Care
- In-Home Care

DIABETES IS COMMON IN KENTUCKY.



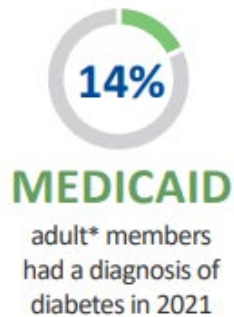
WHERE YOU LIVE MATTERS.

The diabetes rate in Appalachia is **16%**



2023 KENTUCKY DIABETES REPORT

ANOTHER **12%** HAVE PREDIABETES AND ARE AT RISK FOR DEVELOPING DIABETES.



This difference in prevalence suggests a health disparity due to income.



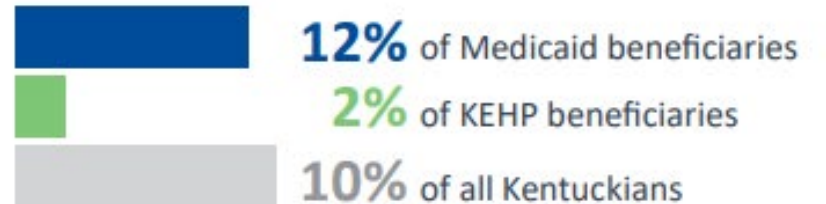
2,823 children under the age of 19 covered by Medicaid

306 children 17 years and younger covered by Kentucky Employees' Health Plan

HAVE A DIABETES DIAGNOSIS

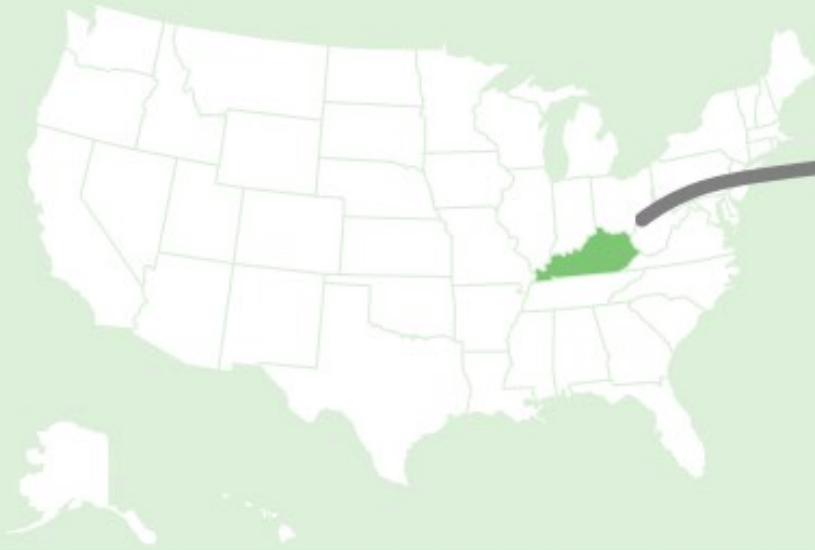
* Adults are defined as individuals over the age of 19 for Medicaid and individuals 18 years and older for Kentucky Employees' Health Plan (KEHP)

DIABETES IS COMMON DURING PREGNANCY.



who gave birth in 2021.

DIABETES IS SERIOUS.



KENTUCKY HAS THE
13TH HIGHEST
MORTALITY RATE
FROM DIABETES IN
THE U.S.

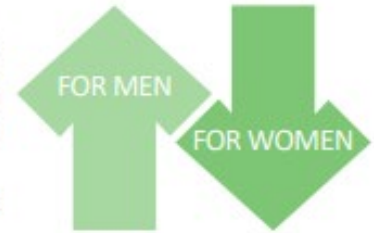
DEATH RATES ARE SUBSTANTIALLY
HIGHER FOR AFRICAN AMERICANS.

42 African American Kentuckians

27 white Kentuckians

per 100,000 population

SINCE 2001,
DIABETES
MORTALITY
RATES HAVE



Diabetes was the
primary diagnosis for
13,410
HOSPITALIZATIONS
in 2021.

AVERAGE LENGTH OF STAY
5 DAYS



11,925 Kentuckians

visited the emergency department a total of **15,208 times** for diabetes in 2021.

10,588 KENTUCKIANS HAD AT LEAST ONE HOSPITAL STAY FOR DIABETES IN 2021.

DIABETES IS COSTLY.

Second most costly common chronic disease

KENTUCKY MEDICAID

\$173 MILLION

for all diabetes non-prescription claims in 2021



One of the top costly chronic conditions for active and early retirees

KEHP

\$156 MILLION

for combined medical and prescription drug costs in 2021

DIABETES COST KENTUCKY

\$5.16 BILLION  

IN TOTAL MEDICAL EXPENDITURES AND LOST WORK AND WAGES IN 2017.

(according to the American Diabetes Association)

EACH INPATIENT STAY HAD AN
AVERAGE CHARGE

OF

\$42,162

resulting in

TOTAL CHARGES

OF NEARLY

\$570 MILLION

Emergency department visits resulted in billed charges of approximately

\$99.9 MILLION

DIABETES IS MANAGEABLE AND CAN BE PREVENTABLE (TYPE 2).

Structured lifestyle change programs such as the National Diabetes Prevention Program have been proven to help prevent or delay type 2 diabetes through:



Nutrition



Physical Activity



Weight Loss

Individuals with prediabetes can cut their risk of type 2 diabetes

 --- **IN-HALF**

by losing weight through healthy eating and being more active.

Managing type 2 diabetes effectively reduces risk for serious health complications such as:



Loss of toes, feet, or legs



Heart Disease



Kidney Failure



Stroke



Blindness

Accredited/Recognized Diabetes Self-Management Education and Support (DSMES) programs can improve A1C levels.



The number of patients with an A1C < 9 increased 46% after completing a DSMES program provided by the DPH Healthy Living With Diabetes (HLWD) program.

Quality care from healthcare teams can include:

- Aggressive treatment to manage blood sugar, blood pressure, and cholesterol
- Smoking cessation promotion
- Referral to DSMES programs

WHAT IS THE PREVALENCE OF DIABETES AMONG KENTUCKY ADULTS?

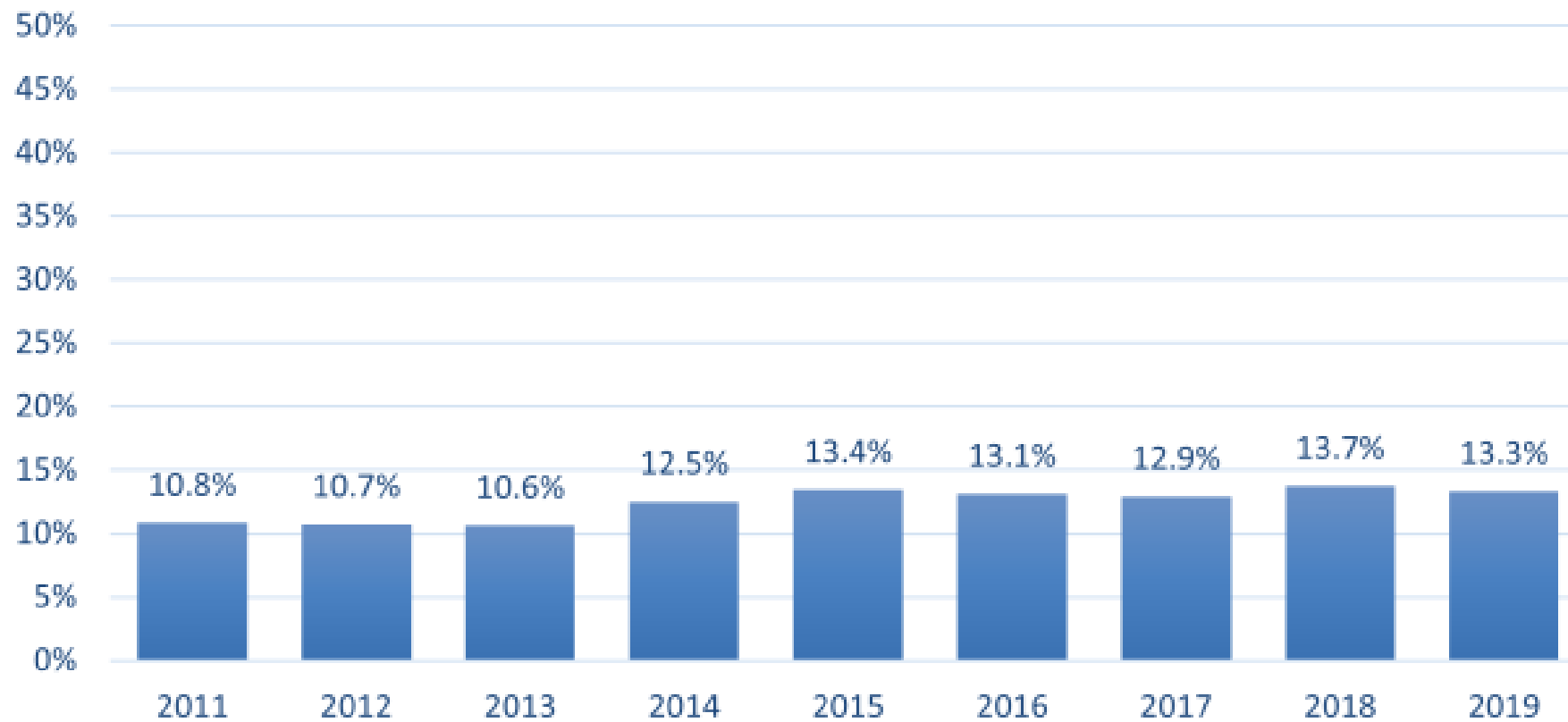
- Kentucky ranks fifth highest in the nation for adult diabetes prevalence.
- More than 486,000 Kentucky adults have been diagnosed with diabetes.
- The prevalence of diabetes in Appalachia is 16.1% and compared to 13.5% in non-Appalachia.
- Diabetes prevalence increases with age (see Table 3).

Table 3: Kentucky Adults 2021 Diabetes Prevalence
(Source: KyBRFS)

Characteristic	Diabetes Prevalence	Estimated Number with Diabetes
Adults age 18 and older		
All Adults	13.8%	486,196
Gender		
Men	14.4%	246,497
Women	13.3%	239,699
Race		
African American	18.5%	50,113
White	13.5%	396,303
Geography		
Appalachia	16.1%	147,518
Non-Appalachia	13.0%	338,678
Age		
18-44	4.9%	76,140
45-54	17.3%	95,063
55-64	22.1%	130,692
65+	22.7%	184,302

In 2011, the adult diabetes prevalence rate in Kentucky was 10.8%, but by 2019 the rate had increased to 13.3%.

Chart 3: Trend in Diabetes Prevalence in Kentucky Adults, KyBRFS 2011 - 2019



WHAT IS THE PREVALENCE OF DIABETES AMONG MEDICAID BENEFICIARIES?

- There were 160,645 adult Medicaid beneficiaries with diabetes in calendar year 2021, representing 13.6% of the total adult Medicaid population.
- Diabetes prevalence is higher among women (14.3%) than for men (12.8%).
- The prevalence of diabetes increases with age. Diabetes is present in 1 in 18 members between the ages of 19-44, 1 in 5 members between ages 45-54, over 1 in 4 members ages 55-64 and more than 1 in 4 of those 65 years and older.
- Diabetes prevalence is highest among white race beneficiaries at 13.9%.
- Beneficiaries in Appalachian and non-metro counties have higher rates of diabetes than those in non-Appalachian or metro counties.

Table 7: Medicaid Adults– 2021 Diabetes Prevalence		
Characteristic	Diabetes Prevalence	Number with Diabetes
Adults age 19 and older		
All Adults	13.6%	160,645
Gender		
Men	12.8%	66,493
Women	14.3%	94,152
Age		
19-44	5.6%	37,442
45-54	19.4%	37,935
55-64	26.1%	49,045
65+	27.8%	36,223
Race/Ethnicity		
White	13.9%	109,529
African American	13.3%	15,394
Hispanic	10.4%	2,452
All Other Races and Unknown	13.2%	33,270
Geography		
Appalachia	15.7%	72,115
Non-Appalachia	12.3%	88,530
Metro	12.1%	67,173
Non-Metro Urban	14.8%	70,796
Non-Metro Rural	15.7%	22,676
Unknown-Out of State	0.0%	0

Source: Medicaid Claims Data



Questions

Open call for topics of interest!

What would you like to hear more about
from the Cabinet?

