



## Looking Ahead Together



- Rhode Island is actively working to mitigate the impact of federal budget changes, prioritizing continuity of essential services for our residents. We understand the critical role Medicaid, SNAP, and our Health Insurance Marketplace play in the lives of Rhode Islanders, and our state agencies are collaborating together to address many of these shifts.
- While we are committed to minimizing disruption, the nature of the federal budget changes means there will be impacts on Medicaid, SNAP, and HSRI operations. We believe in transparent communication and want our community to be prepared for the adjustments that will come as we move forward together.
- We are deeply engaged in understanding the full scope of federal budget implications and developing responsive strategies. Rhode Island is open to exploring every possible avenue to protect vulnerable populations and ensure access to vital healthcare, food assistance, and affordable health insurance.
- Working together to support affected Rhode Islanders, partners, and systems is our top priority. We will provide clear, timely information about changes to eligibility, benefits, or services for Medicaid, SNAP, and HSRI members, along with resources to navigate these transitions upon implementation.
- Rhode Island remains dedicated to a strong social safety net, and we are advocating to protect our state's most vital programs. We are committed to working with federal partners to ensure a sustainable future for the programs our residents rely on over the next several years as we navigate the current landscape.

## Today's Agenda





#### Welcome and Introductions

- Secretary Remarks
- Advisory Group Overview
- Group Agreements



#### **Current Situation Overview**

- State Fiscal Climate
- Federal Budget Highlights
- EOHHS Policy Tracking



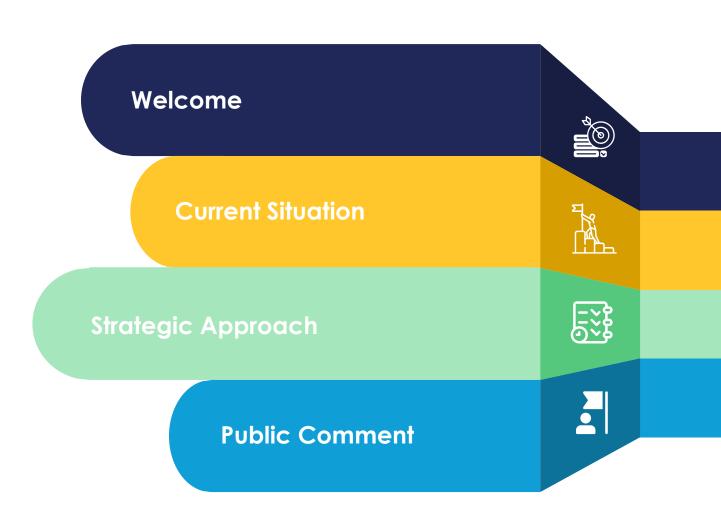
#### Strategic Approach and Discussion

- Guiding Principles
- Community Engagement
- Timeline and Next Steps



#### **Public Comment**

- In-Person
- Online





### Housekeeping Reminders

- Restrooms, Water Fountain, and Exits
- Space Accessibility and Overflow Space
- Interpretation Services and Assistive Technologies
- Support Staff Availability
- Timekeeping

#### **MS Teams Reminders:**

Online participants can view the captions by clicking on the "Live Transcript" button and selecting "Show Subtitle" to display the captions on their screen.

#### **Wi-Fi Access Information:**

Username: guest user Password: OdHr0826

## Federal Compliance Advisory Group



#### FY26 Budget Requirement:

- EOHHS will convene, in consultation with the governor, an advisory working group to assist in the review and analysis of potential impacts of any adopted federal actions related to Medicaid programs.
- The working group shall develop options for administrative action or general assembly consideration that may be needed to address any federal funding changes that impact Rhode Island's Medicaid programs.

- The advisory working group may include, but not be limited to, the secretary of health and human services, director of management and budget, and designees from: state agencies, businesses, healthcare, public sector unions, and advocates.
- 2. No later than **October 31, 2025**, the advisory working group shall forward a report to the governor, speaker of the house, and president of the senate containing the findings, recommendations and options for consideration to become compliant with federal changes prior to the governor's budget submission.

## Appointed Membership



State Government Agencies

State Policy Offices

Medicaid Managed Care

Commercial Insurance

Public Health

Behavioral Health Emergency and Acute

Care

Long-Term Services and Supports Health-Related Social Needs

Workforce and Labor

Data and Policy

Consumer Advocacy Housing and Community
Supports

Business and Finance

Children, Family, and Aging

## Proposed Group Agreements



- Communicate Respectfully: Actively listen and speak respectfully, allowing everyone the opportunity to share without interruption.
- Value Every Voice: Recognize that every member's perspective is important and deserves to be heard by encouraging members to share their unique insights and experiences with the goal of enriching discussions.
- **Embrace Diverse Perspectives:** Honor the uniqueness of all perspectives in the room and online to foster an environment where differing opinions are valued.
- **Stay Focused on the Agenda:** Keep discussions relevant to the agenda items to keep on track and use limited time effectively.
- **Be Mindful of Accessibility:** Ensure that all materials, discussions, and spaces are accessible to everyone, and reiterate questions and answers so all can participate inclusively—particularly those listening in online.
- **Be Solution-Oriented:** Encourage a mindset that focuses on proposing feasible solutions rather than dwelling on just problems.
- Maintain Open Meetings: Faithfully comply with all RI Open Meetings Act (OMA) rules and requirements for public meetings.



#### State Fiscal Climate

Joseph Codega
 Office of Management and Budget



### State Fiscal Climate

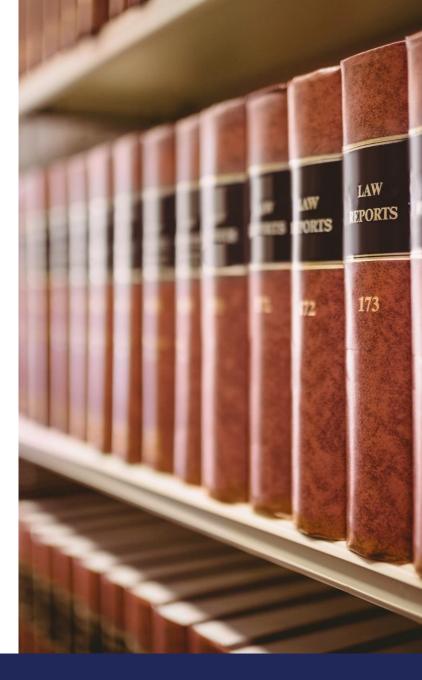


### SWITCH TO OMB SLIDEDECK

### Federal Budget Highlights

- Kristin SousaMedicaid Program
- Kimberly Brito
   Department of Human
   Services

Lindsay Lang
 HealthSource RI



# Medicaid Requirements (1/4)



TOPIC (SECTION)	BRIEF SUMMARY	EFFECTIVE DATE (SFY DATE)	RI CONCERN (YES, NO, TBD)
MSP Streamlining Rule (71101)	Delays implementation, administration and enforcement of CMS's September 21, 2023 rule designed to simplify Medicare Savings Program eligibility and enrollment processes until September 30, 2034	Through September 30, 2034 (Multi-Year)	Yes
Medicaid/CHIP/BHI Streamlining Rule (71102)	Delays implementation, administration and enforcement of CMS's April 2, 2024 rule that streamlines renewals and enrollment for Medicaid, CHIP, and Basic Health Programs until September 30, 2034.	Through September 30, 2034 (Multi-Year)	Yes
Duplicate Enrollment Reduction (71103)	Requires states to integrate with an HHS-maintained data hub for monthly address matching starting January 1, 2027 and to submit full enrollment files by October 1, 2029 to avoid duplicate beneficiary records.	January 1, 2027 - Data Hub October 1, 2029 - All Files (SFY 2027)	Yes (EOHHS, DHS, HSRI)
Deceased Beneficiary Removal (71104)	Mandates that states establish procedures—using death records and data matches—to promptly identify and terminate eligibility for beneficiaries who have died.	January 1, 2027 (SFY 2027)	Yes (EOHHS, DHS, HSRI)
Deceased and Expelled Provider (71105)	Requires states to terminate enrollment of providers who are deceased or have lost licensure/been expelled, stopping all payment to such providers immediately.	January 1, 2028 (SFY 2028)	Yes (EOHHS, DHS, HSRI)
	Expands the definition of "erroneous excess payment," gives the HHS Secretary the option to allow state-conducted audit findings to be considered in determining a state's error rate and puts new limits on the amounts of penalties the HHS Secretary may waive through good faith effort.	October 1, 2029 (SFY 2030)	Yes
Eligibility Redeterminations (71107)	Semiannual Reviews: Requires states to redetermine eligibility every 6 months (instead of once per year) for adults covered under the ACA Medicaid expansion. Sets uniform timelines and documentation standards for periodic Medicaid renewals to reduce churn—requiring states to complete renewals within 30 days of receiving info.	December 31, 2026 (SFY 2027)	Yes (EOHHS, DHS, HSRI)

# Medicaid Requirements (2/4)



TOPIC	BRIEF SUMMARY	EFFECTIVE DATE	RI CONCERN
(SECTION)	DRILI SOMMARI	(SFY DATE)	(YES, NO, TBD)
Home Equity Limits	Caps the permissible home equity value at \$1M for individuals seeking eligibility for long-term	January 1, 2028	Yes
(71108)	care services; prohibits the use of asset disregards being applied to waive home equity limits.	(SFY 2028)	(EOHHS, DHS)
Non-Citizen Eligibility	Aligns Medicaid eligibility rules for qualified non-citizens with those in other federal health	October 1, 2026	Yes
(71109)	programs, standardizing documentation and residency requirements.	(SFY 2027)	(EOHHS, DHS, HSRI)
	Caps the Federal Medical Assistance Percentage (FMAP) for emergency services provided to	October 1, 2026	Yes
FMAP Cap	non-citizens at the standard Medicaid match rate rather than the higher state match.	(SFY 2027)	(EOHHS, HSRI)
(71110)			
_		Through September 30, 2034	Yes
(71111)	homes—pausing enforcement until September 30, 2034.	(Multi-Year)	
Retroactive Eligibility	Retroactive coverage for traditional Medicaid and CHIP is two months and expansion is one	December 31, 2026	Yes
(71112)	month.	(SFY 2027)	(EOHHS, DHS)
Disqualified Entity	Prohibits Medicaid payments for services provided by tax-exempt essential community	July 4, 2025*	Yes
Payment Ban	providers that deliver family planning and abortion services, other than those allowable under	(SFY 2026)	
(71113)	the Hyde Amendment, and that received federal and state Medicaid reimbursements		
	exceeding \$800,000 in 2023. *Note: TRO and appeal playing out in Federal Court.		
Expansion FMAP	Eliminates the 5-percentage-point FMAP "bump" for ACA expansion populations unless the	January 1, 2026 - Spending	No
Incentive Sunset	state has already begun spending the enhanced match on those enrollees. States must	July 4, 2025 - All Else	
(71114)	begin expending the enhanced FMAP by January 1, 2026, or forfeit it entirely. This change	(SFY 2026)	
	sunsets any remaining incentive for expansions enacted after that date.		
Provider Tax	Revises the "hold-harmless" provider-tax threshold under § 1903(w)(4) by (1) for FY 2027+ (i.e.	July 4, 2025	Yes
Uniformity and Caps		(SFY 2026)	
(71115)	percent" based on whether a state expanded in 2014: Expansion states: the lower of their		
	existing hold-harmless rate or a sliding scale (5.5% in FY 2028; 5.0% in FY 2029; 4.5% in FY 2030;		
	4.0% in FY 2031; 3.5% in FY 2032+). Non-expansion states: their hold-harmless percent if within		
	threshold, otherwise 0%. This ensures provider taxes remain budget-neutral and phase down		
	over time.		_

# Medicaid Requirements (3/4)



TOPIC (SECTION)	BRIEF SUMMARY	EFFECTIVE DATE (SFY DATE)	RI CONCERN (YES, NO, TBD)
State-Directed Payment Standards (71116)	Caps state-directed managed-care payments (SDPs) at a percent of Medicare rates: Expansion states: SDP ≤100% of the Medicare published total payment rate.  Non-expansion states: SDP ≤110% of that rate. Grandfathers any SDP with written prior approval by May 1, 2025 (or rural hospital SDPs approved by enactment) through a phase-down: reduce those existing rates by 10 percentage points each year starting January 1, 2028 until they meet the new 100%/110% cap.	July 4, 2025 (SFY 2026)	Yes
Waiver Budget Neutrality (71117)	Requirements regarding waiver of uniform tax requirements for Medicaid provider taxes. Modifies the criteria HHS must use when determining whether certain health-related taxes are generally redistributive.	July 4, 2025 – With 3yr Transition* (SFY 2026)	Yes
Demonstration Budget Neutrality (71118   §1115)	Requires states to obtain HHS actuarial sign-off confirming that § 1115 waiver demonstrations will not raise federal outlays, effective January 1, 2027.	January 1, 2027 (SFY 2028)	Yes
Community Engagement Requirements (71119)	Directs HHS and the states to impose "community engagement" (a.k.a. work) requirements on non-elderly, non-pregnant, non-Medicare, non-medically-frail Medicaid enrollees in the ACA expansion population. Under the rule: At least 80 hours per month of one or more qualifying activities: (1) Employment (part- or full-time); (2) Unpaid community service or volunteering; (3) Participation in job skills training, education programs, or workfare; (4) Meeting a monthly earnings threshold (monthly income that is at least 80 times the federal hourly minimum wage; seasonal workers with average monthly income over previous 6 months that is at least 80 times the federal hourly minimum wage). Some exemptions. Interim final rule due by June 1, 2026.	December 31, 2026 (SFY 2027) States can request extension until December 31, 2028 (SFY 2029)	Yes (EOHHS, DHS, DLT)
Expansion Population Cost-Sharing (71120)	Exempts Medicaid expansion enrollees from premiums/lock-out periods after October 1, 2028, but authorizes sliding-scale cost-sharing based on income to encourage personal responsibility. Applies to adults who gained coverage under the ACA expansion with incomes over 100% of the federal poverty level (generally 100–138% FPL). Includes (1) per-service copays; (2) annual out-of-pocket cap; (3) limited state flexibilities.	October 1, 2028 (SFY 2029)	Yes

# Medicaid Requirements (4/4)



TOPIC (SECTION)	BRIEF SUMMARY	EFFECTIVE DATE (SFY DATE)	RI CONCERN (YES, NO, TBD)
	Effective July 1, 2028 the HHS Secretary may approve a new standalone waiver that does not require participants to require a nursing home or ICF/IDD level of care to receive HCBS services	July 1, 2028 (SFY 2029)	Yes
I	This section makes technical corrections to current law by permitting product sponsors to have one or more orphan drug indication to be exempt from the Drug Price Negotiation Program in statute. Current law limits exemptions from the Drug Price Negotiation Program to one rare disease indication. This section also revises the start of the timeline in which a manufacturer would be eligible for negotiation until an orphan drug receives its first non-orphan indication.	January 1, 2028 (SFY 2029)	Yes
Rural Access to Care (71401)	Appropriates \$50 billion to states to support rural providers. As such, requires applicants establish a rural health transformation plan and is subject to approval of awards.	December 1, 2025 - Award Approvals (SFY 2026-2030 Funds)	Yes

# SNAP Requirements (1/1)



TOPIC (SECTION)	BRIEF SUMMARY	EFFECTIVE DATE (SFY DATE)	RI CONCERN (YES, NO, TBD)
Thrifty Food Plan (10101)	Requires future updates to the Thrifty Food Plan (TFP) market to be cost-neutral—limiting USDA to adjust quantities/prices without increasing overall benefit costs—and continues annual inflation indexing only.	October 1, 2027 (SFY 2028)	YES
Work Requirement Modifications (10102)	Overhauls SNAP's ABAWD rules by (1) raising the maximum age subject to the 3-month time-limit from 54 to 64; (2) expanding the "parental" exemption to include parents/caretakers of children up to 13 (previously 18) years old; (3) adding pregnant women, medically frail individuals, Indians/Urban Indians (including California Indians) to the exempt class; and (4) standardizing waiver criteria so only states with unemployment ≥ 1.5× national—and only in non-contiguous states—may request exemptions.	July 4, 2025 (SFY 2026)	YES
Standard Utility Allowances Rules (10103)	Restricts eligibility for the SUA shelter deduction to households with an elderly or disabled member; counts only actual third-party energy assistance payments toward the deduction cap, reducing inflated shelter deductions.	July 4, 2025 (SFY 2026)	YES
Internet Expense Restrictions (10104)	Prohibits households from including internet service costs as part of their excess shelter deduction, thereby disallowing a new deduction for broadband that some states had started to count.	July 4, 2025 (SFY 2026)	YES
Matching Funds Requirements (10105)	States with SNAP payment error rates $\geq$ 6% (based on FY 2025/ FY 2026 rates) must begin sharing program costs. State share: $>$ 6%: 0%; 6% - 7.9%: 5%; 8% - 9.9: 10%: 10% or higher: 15%: If 13.3% or higher: If a state's FY 2025 payment-error rate $\times$ 1.5 $\geq$ 20 percent (13.3%), its first cost-share year under Sec. 10105 shifts from FY 2028 to FY 2029. If a state's FY 2026 payment-error rate $\times$ 1.5 $\geq$ 20 percent, its first cost-share year shifts to FY 2030.	October 1, 2027 (SFY 2028)	YES
Administrative Cost Sharing (10106)	Reduces the federal share of state administrative expenses for SNAP from 50% down to 25%, increasing state financial responsibility for processing applications and operating benefit systems. State share increases from 50% to 75%.	October 1, 2026 (SFY 2027)	YES
Nutrition Education Grants (10107)	Phases out the \$550 million annual National Nutrition Education & Obesity Prevention grant program after FY 2025, eliminating federal support for state/local nutrition education partnerships.	October 1, 2025 (SFY 2026)	YES
Eligibility Restrictions (10108)	Narrows SNAP eligibility to U.S. citizens or nationals, lawful permanent residents, certain Cuban/Haitian entrants, and Compact of Free Association (COFA) migrants—removing other non-citizen groups.	July 4, 2025 (SFY 2026)	YES

# Health Insurance Marketplace Requirements (1/1)



<b>TOPIC</b> (SECTION)	BRIEF SUMMARY	<b>EFFECTIVE DATE</b> (SFY DATE)	RI CONCERN (YES, NO, TBD)
Pre-Enrollment Verification (71303)	Eliminates "conditional eligibility", requiring customers to verify eligibility criteria before they can enroll.	January 1, 2028 (SFY 2028)	YES
Premium Tax Credit Restriction (71301)	Establishes new designation of "Eligible Alien" for tax credit eligibility, which is limited to lawful permanent residents, Haitian/Cuban immigrants, and COFA immigrants. Refugees, asylees, visa holders etc. no longer eligible.	January 1, 2027 (SFY 2027)	YES
Premium Tax Credit Ineligibility (71302)	Eliminates a rule that allowed premium tax credit eligibility for those ineligible for Medicaid with incomes under 100% FPL when subject to the "Five-year bar" from Medicaid.	January 1, 2026 (SFY 2026)	YES
Recapture Limits for Advanced Premium Tax Credits (APTCs) (71305)	Eliminates the amount of excess APTCs that must be reconciled that previously applied to households making less than 400% FPL.	January 1, 2026 (SFY 2026)	YES
ATPC Ineligibility Once Termed from MA Due to Work Requirements (71119)	Restrictions on Marketplace tax credits for individuals denied Medicaid due to work requirements starting in 2027.	January 1, 2027 (SFY 2027)	YES
Special Enrollment Period Restriction (71304)	Eliminates premium tax credit eligibility for individuals who enroll through an SEP based on expected household income without a life event.	January 1, 2026 (SFY 2026)	YES
Enhanced Advanced Premium Tax Credit Expiration (Non-OBBBA)	Premium tax credits were increased for 5 years via ARPA and IRA. They expire at the end of 2025.	December 31, 2025 (SFY 2026)	YES

# CMS Marketplace Integrity Requirements (1/1)



TOPIC	BRIEF SUMMARY	EFFECTIVE DATE (SFY DATE)	RI CONCERN (YES, NO, TBD)
Shortening Open Enrollment Period (OEP)	OEP must end 12/31 instead of 1/15 (FFM) or 1/31 (HSRI), which may lead to a reduction in coverage, communication challenges for consumers, degradation of the risk pool, and operational impacts on the contact center.	January 1, 2027 (OE Fall 2026)	Yes
Pauses the SEP for Households with Income Under 150% FPL	Biden-era policy allows customers with household income below 150% FPL to change plans or newly enroll, but creates system implications, addresses a problem Rhode Island does not face, removes typical state flexibility around SEP policy, and under H.R. 1, removes APTCs for this SEP.	October 24, 2025 (Sunsets 12/31/2026)	Yes
Requirement to File and Reconcile Tax Credits Annually	Prohibits advance premium tax credit eligibility if the customer hasn't filed and reconciled taxes for the relevant year, causing potential delays or reductions in coverage, dependence on outdated or incomplete IRS data, and added system implications.	January 1, 2026 (Sunsets 12/31/2026)	Yes
New Income Verification for Applicants Attesting to Discrepant Income Over 100% FPL	If a customer attests to income qualifying for APTCs but external data sources indicate significantly lower income, they must verify, resulting in delayed or reduced coverage, complex system builds, added manual work, and unnecessary burden in RI due to existing Medicaid eligibility checks.	August 5, 2025 (Sunsets 12/31/2026)	Yes

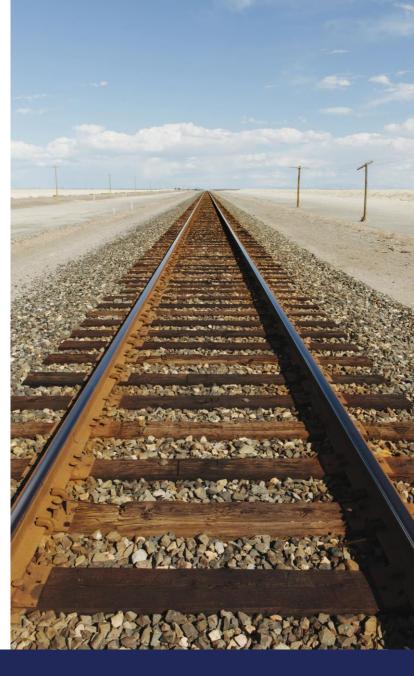
## Other Agency Requirements Under Review



OBBBA SECTION	POLICY AREA	IDENTIFIED CHANGE	EFFECTIVE DATE	APPLICABLE AGENCIES
70104	Child Tax Credit	Extension and enhancement of increased amounts	Taxable years beginning after Dec 31, 2025	DHS
70115, 70116, 70117	ABLE Accounts	Extension and enhancement of contribution limits, savers credit, rollovers	Contributions/Taxable years beginning after Dec 31, 2025	OHA, BHDDH
70204	Trump Accounts Pilot Program	Establishes new tax-exempt savings accounts	Taxable years beginning after Dec 31, 2025	EOHHS, DHS
70401	Employer-Provided Child Care Credit	Enhancement of credit amount and maximum credit	Amounts paid/incurred after Dec 31, 2025	DHS, DCYF
70402, 70403	Adoption Credit	Enhancement of credit, recognition of tribal governments	Taxable years beginning after Dec 31, 2024	DCYF
70404, 70405	Dependent Care Assistance Program/Tax Credit	Enhancement of exclusion amount and applicable percentage	Taxable years beginning after Dec 31, 2025	DHS, DCYF
71201	Medicare Coverage	Limits Medicare coverage to citizens, LPRs, etc.	18 months after enactment	OHA, VETS
71303, 71307	PTC Eligibility Verification and Health Savings Accounts (HSA)	PTC: Requires Exchanges to verify eligibility before coverage months HSA: Modifies definition of high-deductible health plans for HSAs to include ACA-compliant bronze/ catastrophic plans.	PTC: after Dec 31, 2025 HSA: Jan 1, 2026	HSRI
87001	Unaccompanied Children Vetting	Appropriates funds for enhanced sponsor vetting by ORR	FY25 (funds available until Sept 30, 2028)	DCYF

## **EOHHS Policy Tracking Efforts**

James Rajotte
 Executive Office of Health and Human Services



## OHHS Federal Policy Tracking



- Changes in policy on the Federal level are likely to have ranging impacts on health and human services programs and resource availability moving forward.
- These potential changes may require that difficult decisions are made to preserve the progress made to date, while simultaneously right-sizing resources and investments to adjust to a changing landscape.
- EOHHS is taking a multi-tiered approach to understanding potential changes and impacts, reviewing existing programs, and creating a framework for future decision-making.
- We look forward to continuing to bring updates to you all, as appropriate, particularly if there are major impacts from other legislation or policies.

# Contingency Planning for Federal Policy Changes in Rhode Island

Federal Compliance Advisory
Group

Federal Policy Tracking and Potential Impact Analysis

Comprehensive Program Inventories

Monitoring Legislation, Grants, and Federal Agency Changes

## Example of Information Collection and Review



- EOHHS is tracking Executive Orders, court challenges, and Agency Directives weekly to maintain situational awareness on potential changes that become implemented policy.
- The agencies then review and indicate potential severity of impacts if these changes were to become permanent.

#### **Example Severity Level Considerations**

- Population Health Impact
- Administrative Impact
- Sub-Population or Specific Program Impact
- Federal and State Authority Impact
- Statewide Economic Impact
  - Future Planning Impact
- Internal and Interagency Budget Impact
- Note: Many of these items are still contested in the courts.

#### **Ongoing Federal Policy Tracking**

Current Status

Policy Type

Official Title

Summary and Potential Impact

Impact

References

Retrospective vs Prospective

Policy Type

Official Title

Issued Date and Deadlines

Impacted Agencies

## Example of Potential Impacts on Workforce



If Federal policy changes were to be universally implemented as currently proposed by Executive Orders and other directives, here are some areas affecting the workforce that may need to be addressed:





# Guiding Principles for Consideration





## Ongoing Community Engagement



PUBLIC WEBSITE

Find our resources at <a href="https://eohhs.ri.gov/initiatives/fed">https://eohhs.ri.gov/initiatives/fed</a> eral-compliance-advisory-group.

COMMUNITY PROPOSALS

An online submission form link will soon be available in early August.

FREQUENTLY ASKED QUESTIONS

Frequently asked questions (FAQs) will be posted online in multiple languages.



**EMAIL INBOX** 

Ask questions at <a href="https://ohns.ri.gov">OHHS.FederalPolicyTracking</a>
<a href="https://ohns.ri.gov">@ohhs.ri.gov</a>.

PARTNER CONVENINGS

Agency leadership will be available to present at existing key forums.

SOURCE DOCUMENTS

Key resources from National partners will be available for public consumption.

## Draft Timeline and Proposed Next Steps







- Introductions
- Level-Setting
- Guiding Principles
- Group Agreements



#### MEETING #2

The analysis Analysis

- Potential Solutions Brainstorm
- Community Idea Review



#### MEETING #3

MedicaidAnalysis

SEPTE

- Potential Solutions Brainstorm
- System and Tech Priorities

#### MEETING #4

- HSRI Analysis

- Potential Policy Review
- Draft Report Discussion

#### MEETING #5

- Report Overview

- Other Policy or Grant Changes
- Process Evaluation





### Next Meeting Reminder

August 19, 20251:00-2:30 PMEOHHS Virks Building

- Hybrid Option Available for Members of the Public
- Secretary of State Posting:
   <a href="https://bit.ly/FederalComplianceAdvisoryGroup">https://bit.ly/FederalComplianceAdvisoryGroup</a>

#### **SAVE THE DATES:**

August: 8/19 (1-2:30 PM) Virks Building

**September:** 9/09 (10-11:30 AM) TBD

October: 10/7 (1-2:30 PM) Virks Building

November: 11/5 (11:30-1 PM) Virks Building

"

Teamwork is the ability to work together toward a common vision... It is the fuel that allows common people to attain uncommon results.

- Andrew Carnegie



#### THANK YOU FOR YOUR PARTICIPATION TODAY!