SBHC Coordinators Meeting

1/30/19

Budget

- SBHC Budget is stable through this biennium (June 30, 2019).
- Confirming spending and any surplus for this biennium.
- Several Bills being considered in legislature may increase SBHC budget.

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Staffing Updates

- Congratulations to Kate O'Donnell! Now officially in the School Mental Health Specialist position.
- SBHC Systems Development Specialist position moving through recruitment process!

QUESTIONS???

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Question:

What subjects would you like resources/trainings on?

Respond in the chat box

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SBHC Contracts

- Proposed policy recommendation to allow for direct contracts with non-county medical sponsors has been **approved and will move forward.**

- New contracts will be in place by July 1, 2019.
  (fingers crossed)

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SBHC Contracts
New policy

- **LPHAs will be given the right of first refusal for SBHC contracts with the state.** LPHAs can choose to either manage SPO contracts and receive state funding (current policy) or have the SPO contract directly with non-county medical sponsor.
- LPHA would determine the contract relationship for each medical sponsor in their county.
- Contracts agreements would be reviewed with LPHAs each biennium, or when there is a medical sponsor change or new SBHC opens.

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SBHC Contracts:
New policy

- SBHC funding awards and contracts with LPHAs and non-county medical sponsors will include ALL state funding (Base, MH, other grants).

- Contracts with Planning Grants are still to be determined.

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SBHC Contracts
Implementation Activities

- SPO to send out a "right of first refusal" survey to all LPHAs. → Feb 4 (closed Mar 4)
- Informational call → Feb 13
- SPO to confirm new contract agreements → mid to late March
- SPO to work with the State Contracts Office to draft contracts for non-county medical sponsors → Apr-Jun
  - Scope of work
  - Deliverables

  will mirror Program Element 44
  - Invoicing – new process

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SBHC Contract
Work to come…

- Develop a process for reviewing contract agreements each biennium or when there is a change in medical sponsor or new SBHC.
- Revise Certification Standards to build in stronger partnerships between medical sponsors, MH, LPHAs, school districts.
- So much we don't know yet!

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"Change is hardest at the beginning, messiest in the middle, and best at the end."

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QUESTIONS???

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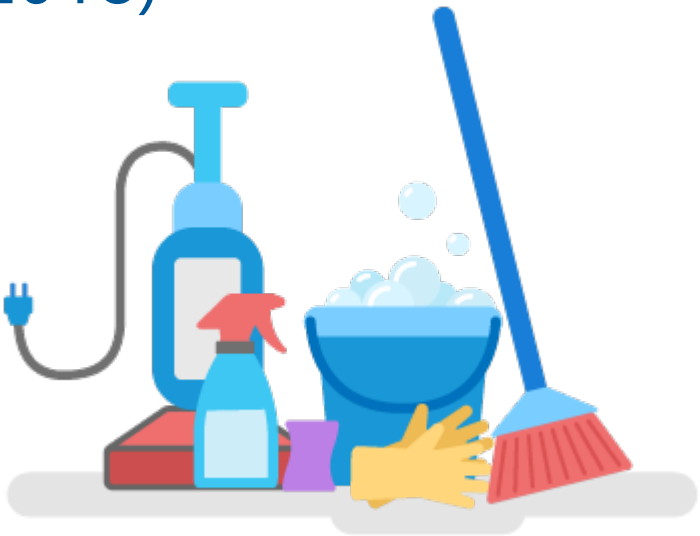
Mental Health Expansion Grant (MHEG) Updates

- Quarter 3 Reports (Jul – Dec 2018)
- MHEG in the 2019-2021 Governor's Budget!
  - Additional $1.1 million for SBHC MH capacity
  - Final budget **TBD July 2019**



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Mental Health Expansion Grant (MHEG) Updates

- 2019-2021 Capacity Application process:
  - Funding formula
  - "Pooled" funding
- 2019-2021 YAC Grants
  - More information to come!
- Timeline:
  - April: Applications open
  - June: Awards announced
  - July: Final award amounts confirmed (based on leg. budget)

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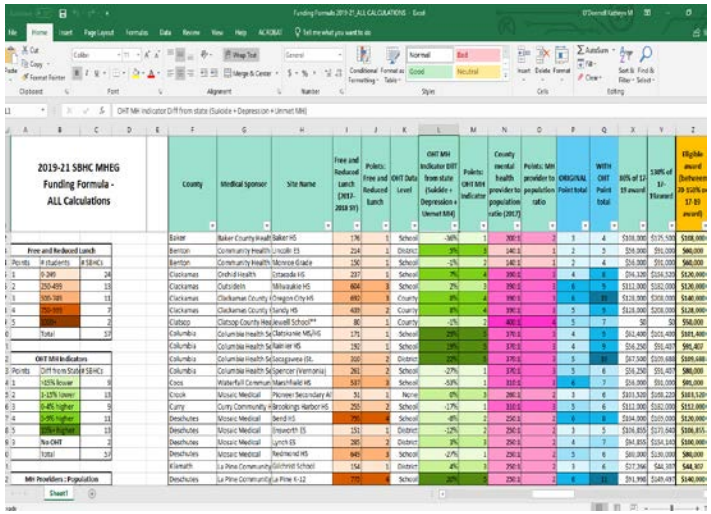
Mental Health Expansion Grant (MHEG) Updates

- 2019-2021 Funding Formula
  - Releasing via email
- Q&A webinar
  - Monday, February 11th 1-2PM
  - Registration information via email



2019-21 SBHC MHEG Funding Formula - ALL Calculations

County	Medical Sponsor	Site Name	Free and Reduced Lunch (2017-2018 SY)	Points: Free and Reduced lunch	OHT Data Level	OHT MH Indicator Diff from state (Suicide + Depression + Unmet MH)	Points: OHT MH Indicator	County mental health provider to population ratio (2017)	Points: MH provider to population ratio	ORIGINAL Point total	WITH OHT Point total	80% of 17-19 award	130% of 17-19 award	Eligible award (between 20-150% of 17-19 award)
Baker	Baker County Health	Baker HS	176	1	School	-36%	1	300:1	2	3	4	$108,000	$175,500	$108,000
Benton	Community Health	Lincoln ES	214	1	District	3%	3	140:1	1	2	5	$54,000	$91,000	$60,000
Benton	Community Health	Monroe Grade	150	1	School	-1%	2	140:1	1	2	4	$54,000	$91,000	$60,000
Clackamas	Orchid Health	Estacada HS	237	1	School	7%	4	390:1	1	4	6	$94,320	$154,529	$120,000
Clackamas	Outside In	Milwaukie HS	604	3	School	2%	3	390:1	1	6	9	$112,000	$182,000	$120,000
Clackamas	Clackamas County	Oregon City HS	693	3	County	8%	4	390:1	1	8	11	$128,000	$208,000	$140,000
Clackamas	Clackamas County	Sandy HS	439	2	County	8%	4	390:1	1	7	9	$128,000	$208,000	$128,000
Clatsop	Clatsop County Hea	Jewell School**	80	1	County	-1%	2	400:1	1	5	7	50	50	$50,000
Columbia	Columbia Health Se	Clatskanie MS/HS	175	1	School	29%	5	370:1	1	4	9	$62,400	$101,400	$101,400
Columbia	Columbia Health Se	Rainier HS	192	1	School	19%	5	370:1	1	4	9	$54,250	$91,437	$91,437
Columbia	Columbia Health Se	Scappoose (St.	260	2	District	10%	3	370:1	1	5	10	$67,500	$109,688	$109,688
Columbia	Columbia Health Se	Spencer (Vernonia)	261	2	School	-27%	1	370:1	1	5	6	$54,250	$91,437	$80,000
Coos	Waterfall Commun	Marshfield HS	537	3	School	-10%	1	310:1	1	4	7	$54,000	$91,000	$80,000
Crook	Mosaic Medical	Pioneer Secondary Al	91	1	None	0%	3	280:1	1	3	6	$101,520	$169,225	$101,520
Curry	Curry Community H	Brookings Harbor HS	250	2	School	-17%	1	310:1	1	5	6	$112,000	$182,000	$112,000
Deschutes	Mosaic Medical	Bend HS	795	4	School	-8%	2	250:1	2	6	8	$134,000	$220,000	$120,000
Deschutes	Mosaic Medical	Tumalo ES	151	1	District	-12%	2	250:1	2	3	5	$104,855	$171,640	$104,855
Deschutes	Mosaic Medical	Lynch ES	285	2	District	3%	3	250:1	2	4	7	$84,855	$134,140	$100,000
Deschutes	Mosaic Medical	Redmond HS	845	3	School	-27%	1	250:1	2	5	6	$80,000	$130,000	$80,000
Klamath	La Pine Community	Gilchrist School	154	1	District	4%	3	250:1	2	3	6	$27,366	$44,355	$44,355
Deschutes	La Pine Community	La Pine K-12	777	4	School	10%	3	250:1	2	9	11	$91,996	$149,493	$140,000

Free and Reduced Lunch	
Points (# students)	# SBHCs
1 0-249	24
2 250-499	13
3 500-749	11
4 750-999	7
5 1000+	2
Total	57

OHT MH Indicators	
Points	Diff from State (# SBHCs)
1 -15% lower	8
2 1-15% lower	18
3 0-4% higher	9
4 5-9% higher	11
5 10%+ higher	13
6 No OHT	2
Total	57

MH Providers : Population

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MHEG Report Back

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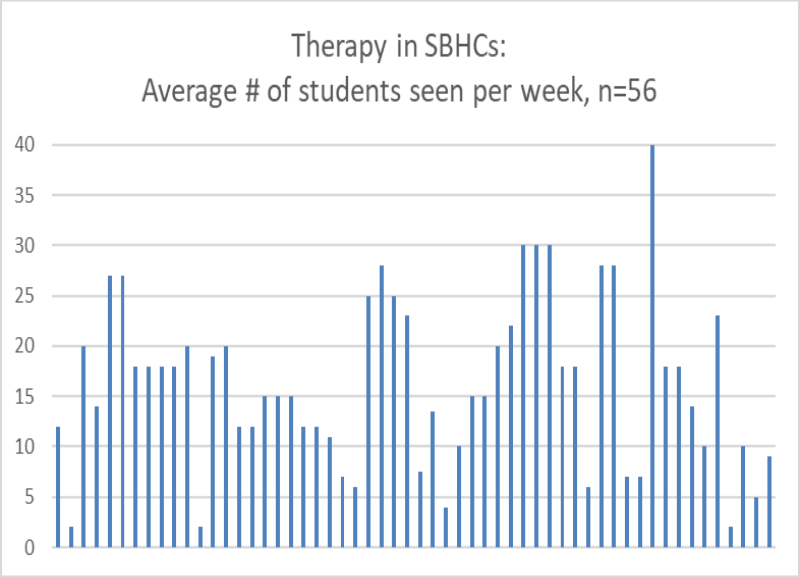
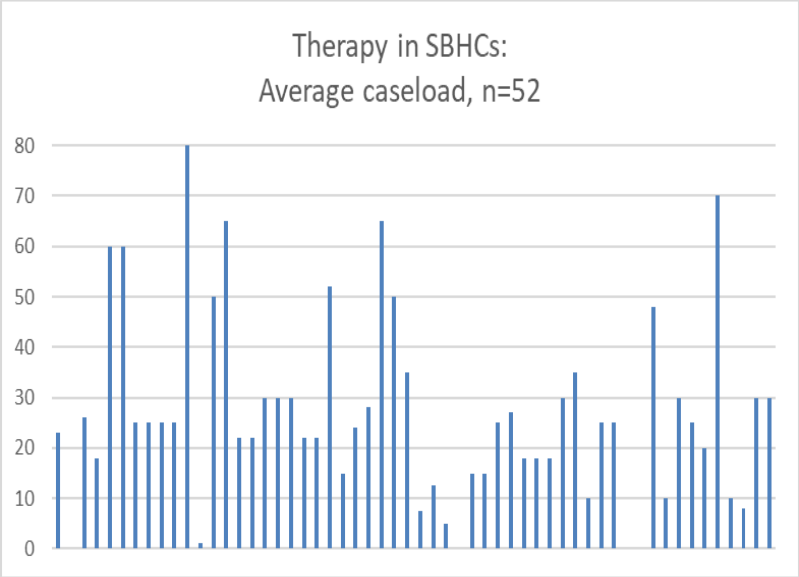
Therapy at MHEG SBHCs

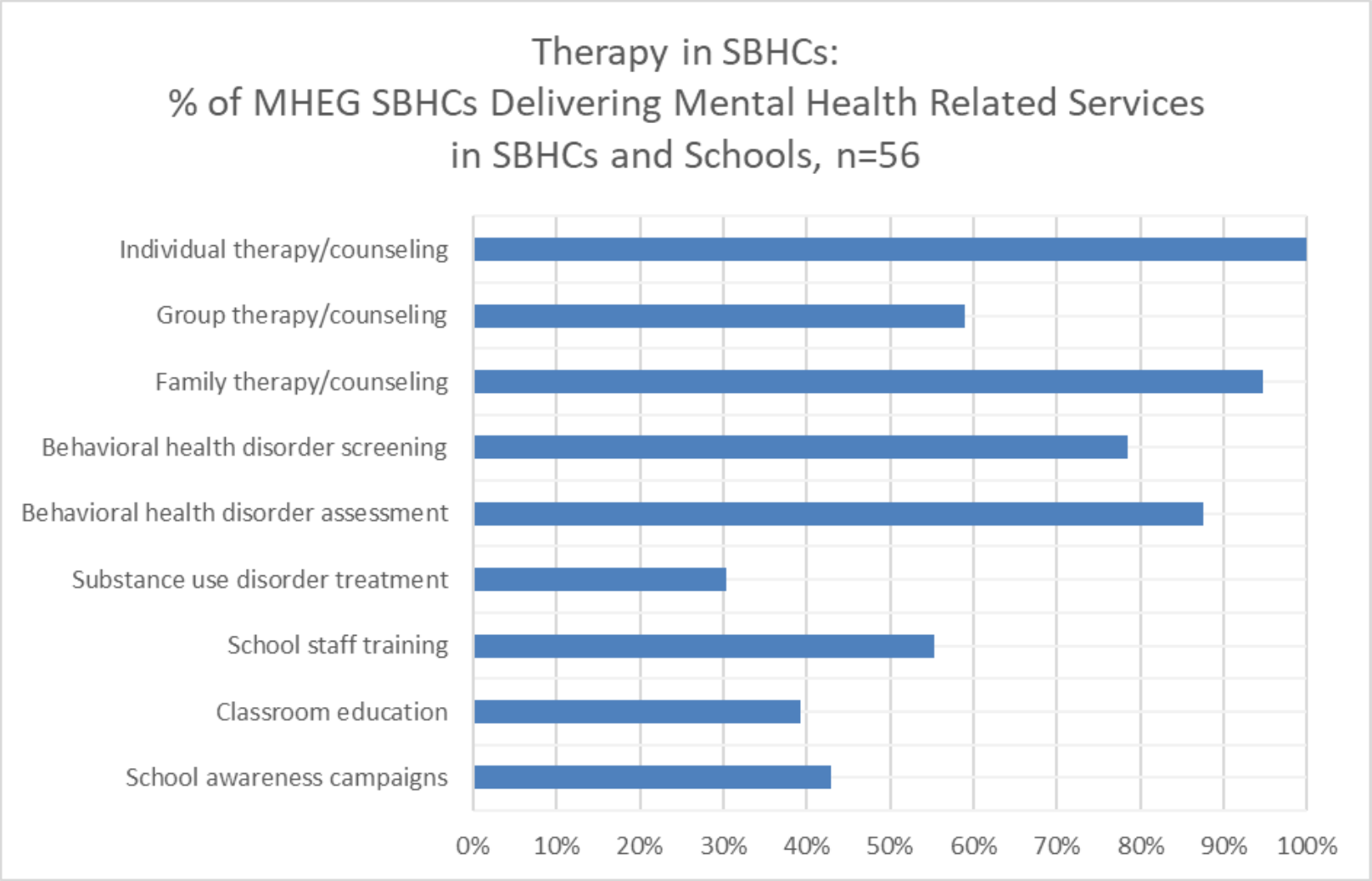
- # of students seen per week:
  - Average: **16**
  - Median: **15**
- Length of therapy session:
  - Average: **6o minutes**
  - Median: **45 minutes**
- # students on caseload:
  - Average: **29**
  - Median: **25**





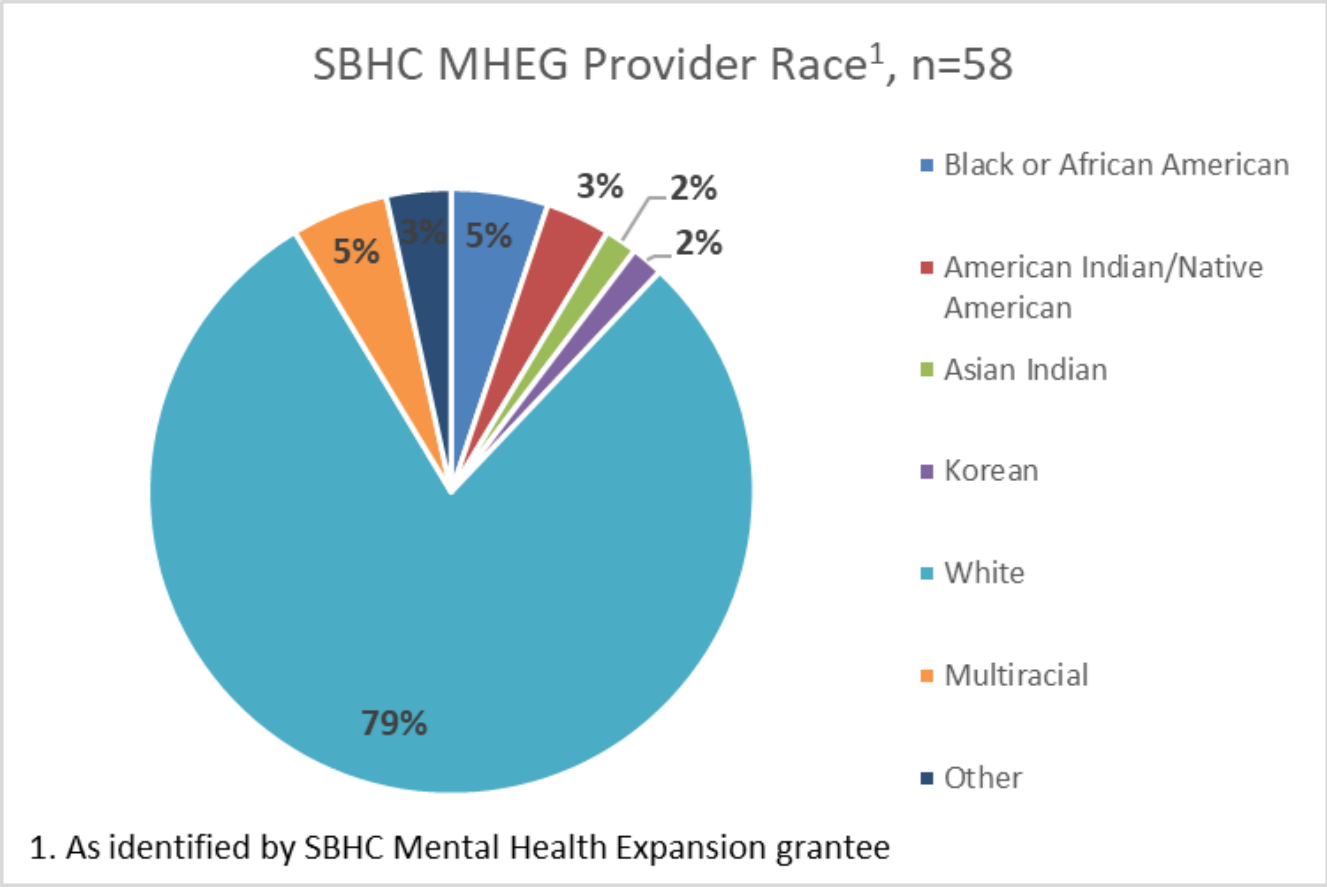
Data source: Q3 SBHC MHEG Reports (July – December 2018)

Therapy at MHEG SBHCs



Data source: Q3 SBHC MHEG Reports (July – December 2018)

SBHC MHEG Provider Race/Ethnicity



1. As identified by SBHC Mental Health Expansion grantee

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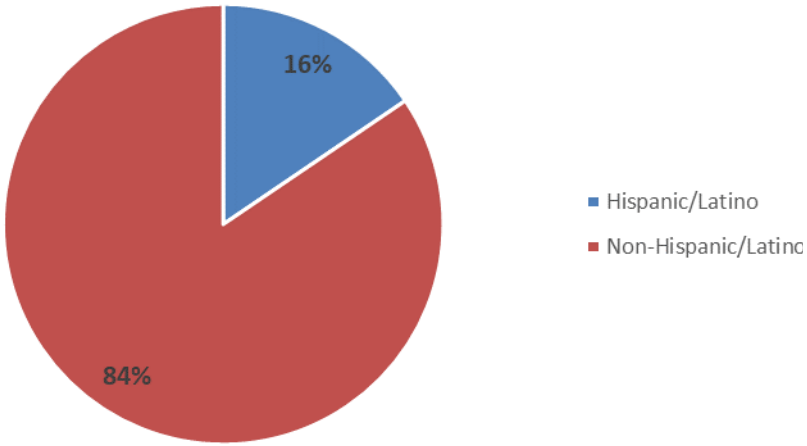
MHEG Provider Race/Ethnicity



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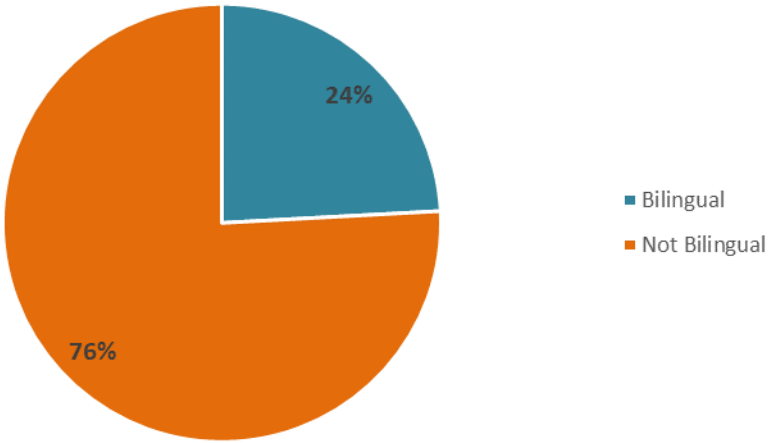
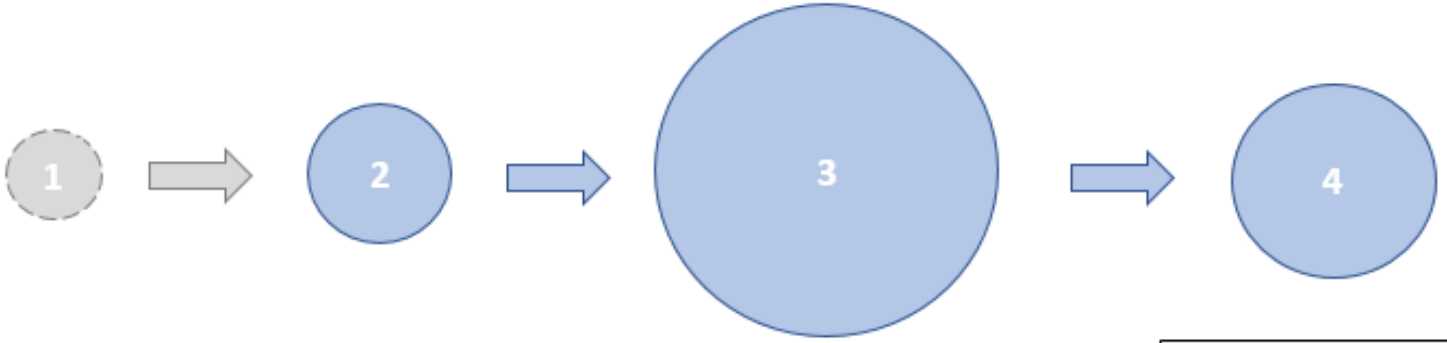


1. As identified by SBHC Mental Health Expansion grantee

Integration



Coordinated Care

Separate facilities (Often) Separate agencies

- SBHC has outside (non-SBHC) referral sources for mental health services
- Separate scheduling and EHR systems
- Communicate infrequently about shared clients
- May never meet in-person or may meet as part of larger community

Co-located Care

Co-located in school

- MH provider located in school
- MH provider and PCP work for different agencies
- Separate scheduling and EHR systems
- Communicate occasionally about shared clients
- May have regular face-to-face meetings about some clients
- Separate billing practices

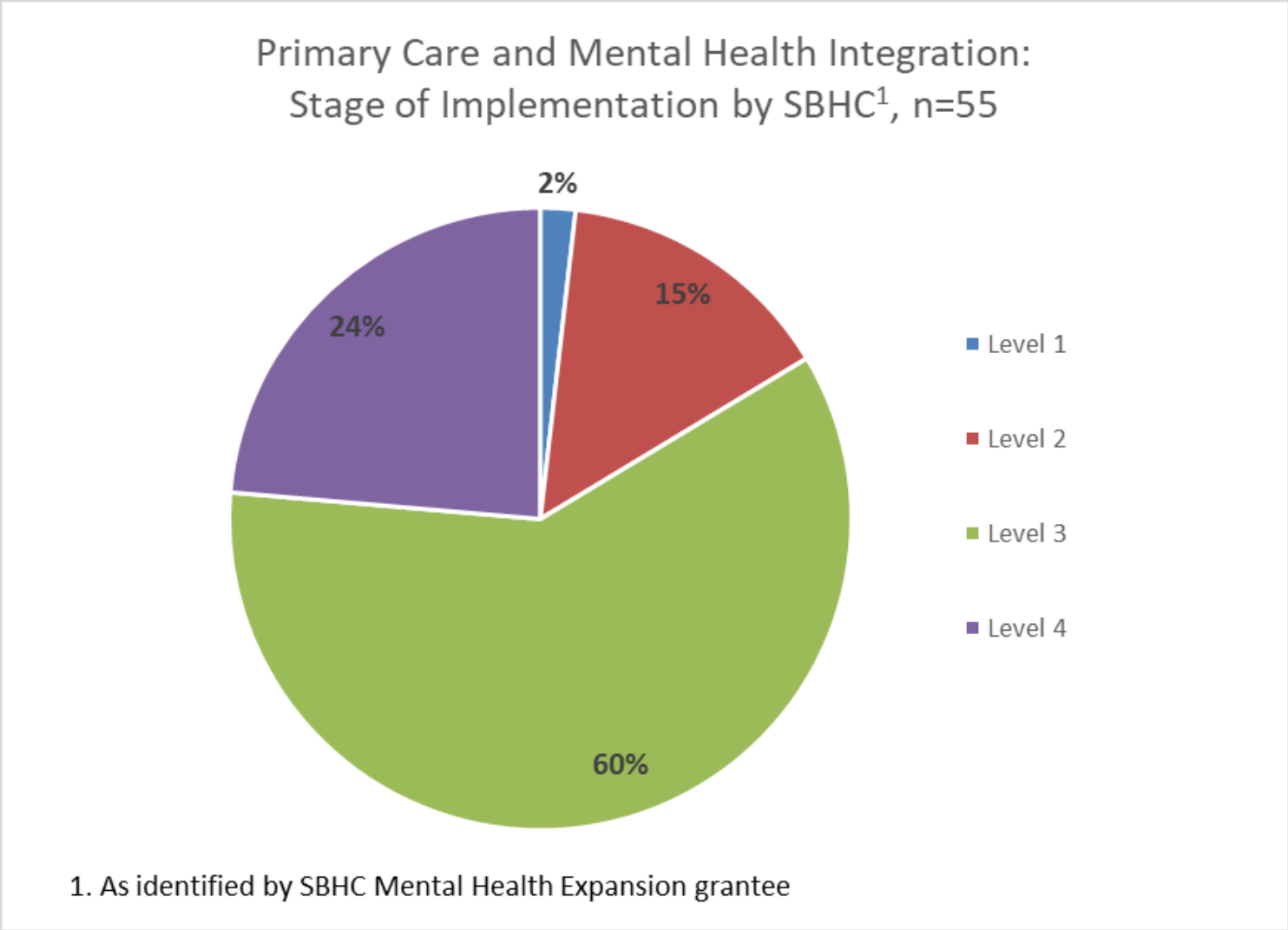
Co-located in SBHC

- MH provider located within SBHC
- MH provider and PCP work for different OR same agencies
- Separate scheduling and EHR systems
- Communicate regularly about shared clients
- Have regular face-to-face meetings about shared clients
- Separate billing practices

Integrated Care

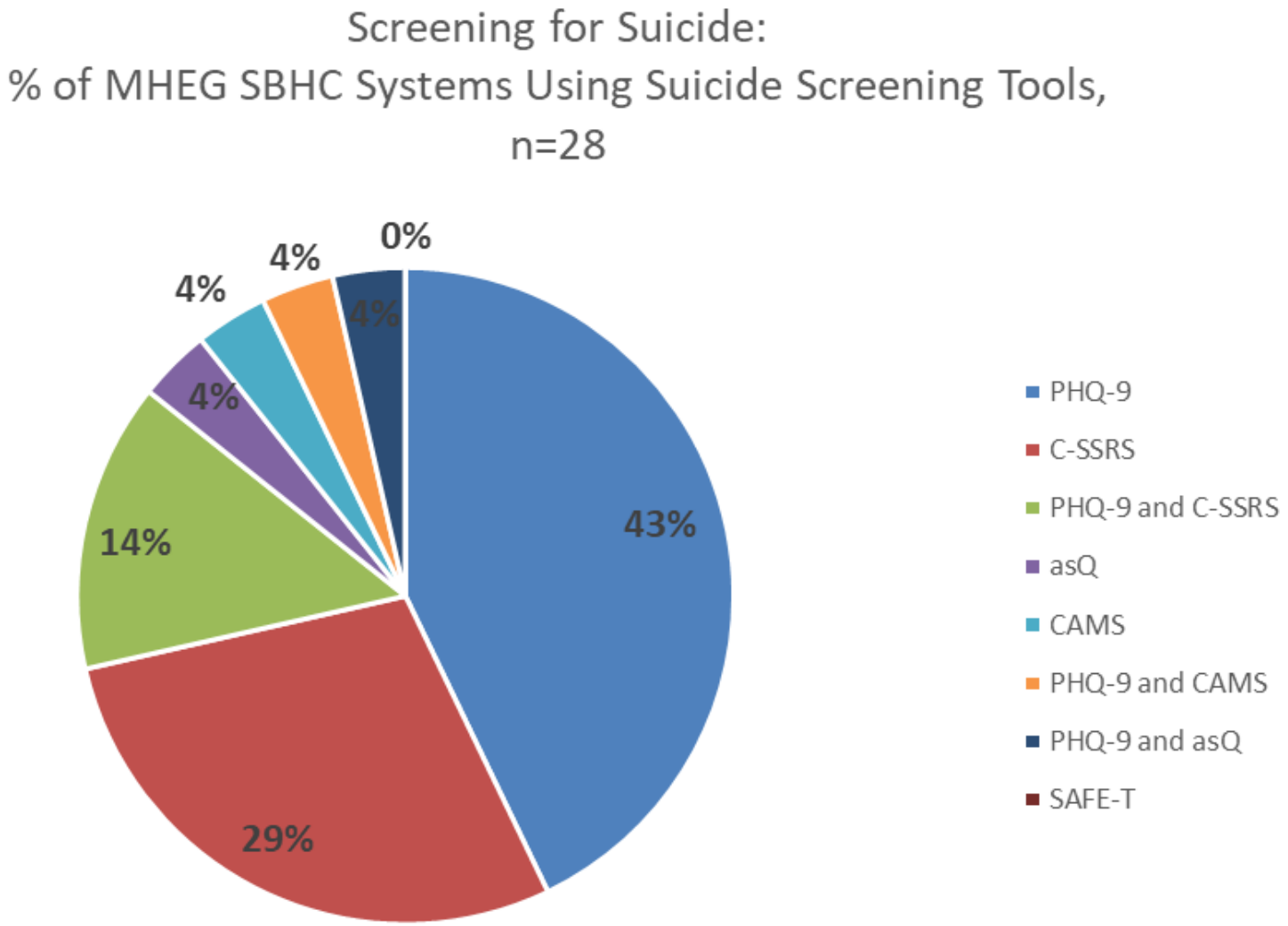
- Full clinical, administrative and financial integration of primary care and mental health services and staff
- Function as one integrated system
- Communicate consistently at the system, team, and individual level
- Population-based medical and behavioral health screening is standard practice
- Billing maximize for integrated model and single billing structure

Integration



Data source: Q3 SBHC MHEG Reports (July – December 2018)

MHEG SBHCs & Suicide Screening

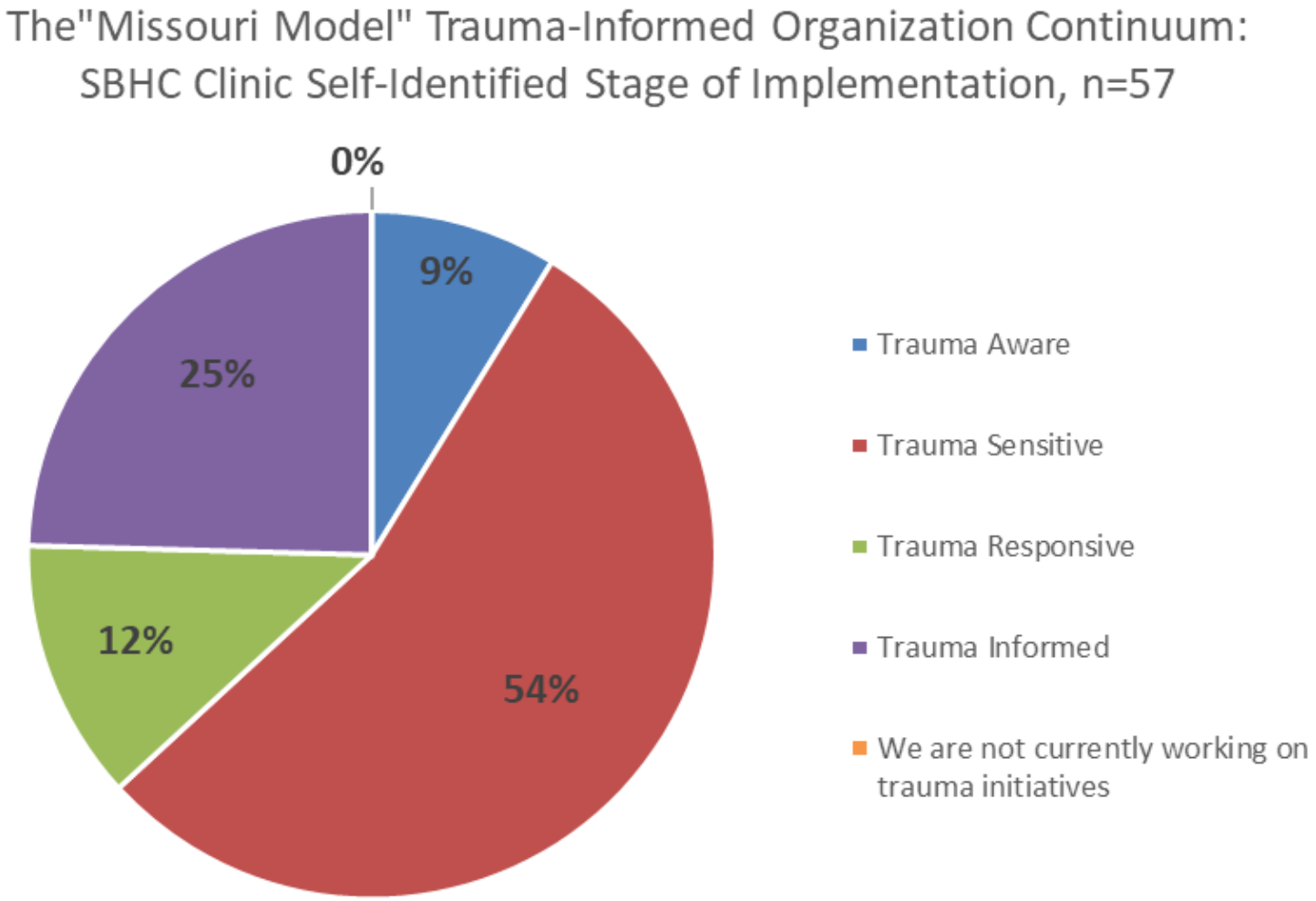


Data source: Q2 SBHC MHEG Reports (January – June 2018)

Trauma-Informed Clinics & Schools

- "Missouri Model"
  - Trauma Aware
  - Trauma Sensitive
  - Trauma Responsive
  - Trauma Informed
- More information:
  - https://dmh.mo.gov/trauma/

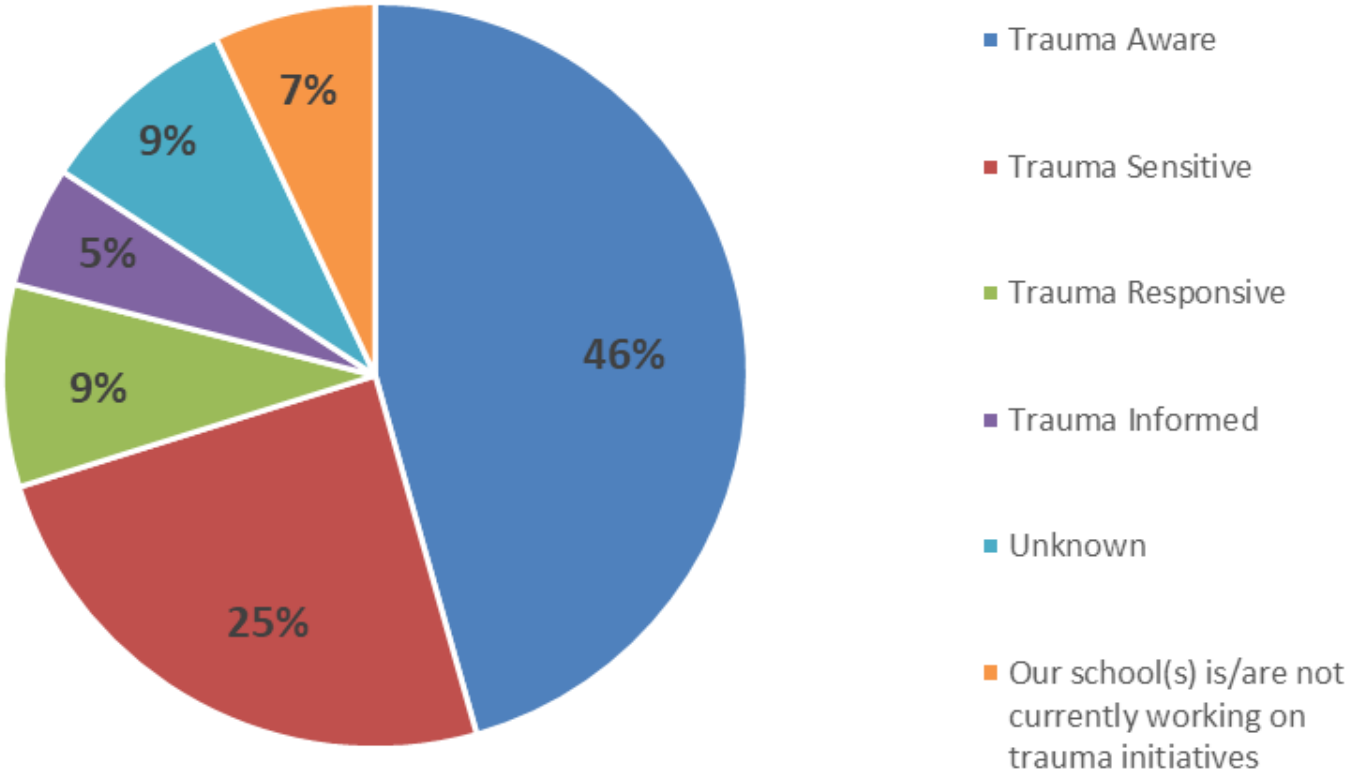
Trauma-Informed SBHCs



Data source: Q2 SBHC MHEG Reports (January – June 2018)

Trauma-Informed Schools

The"Missouri Model" Trauma-Informed Organization Continuum:
SBHC Host School Stage of Implementation[1], n=57



1. As identified by SBHC Mental Health Expansion grantee

Data source: Q2 SBHC MHEG Reports (January – June 2018)

QUESTIONS???

Oregon SBHC School-Based Health Centers

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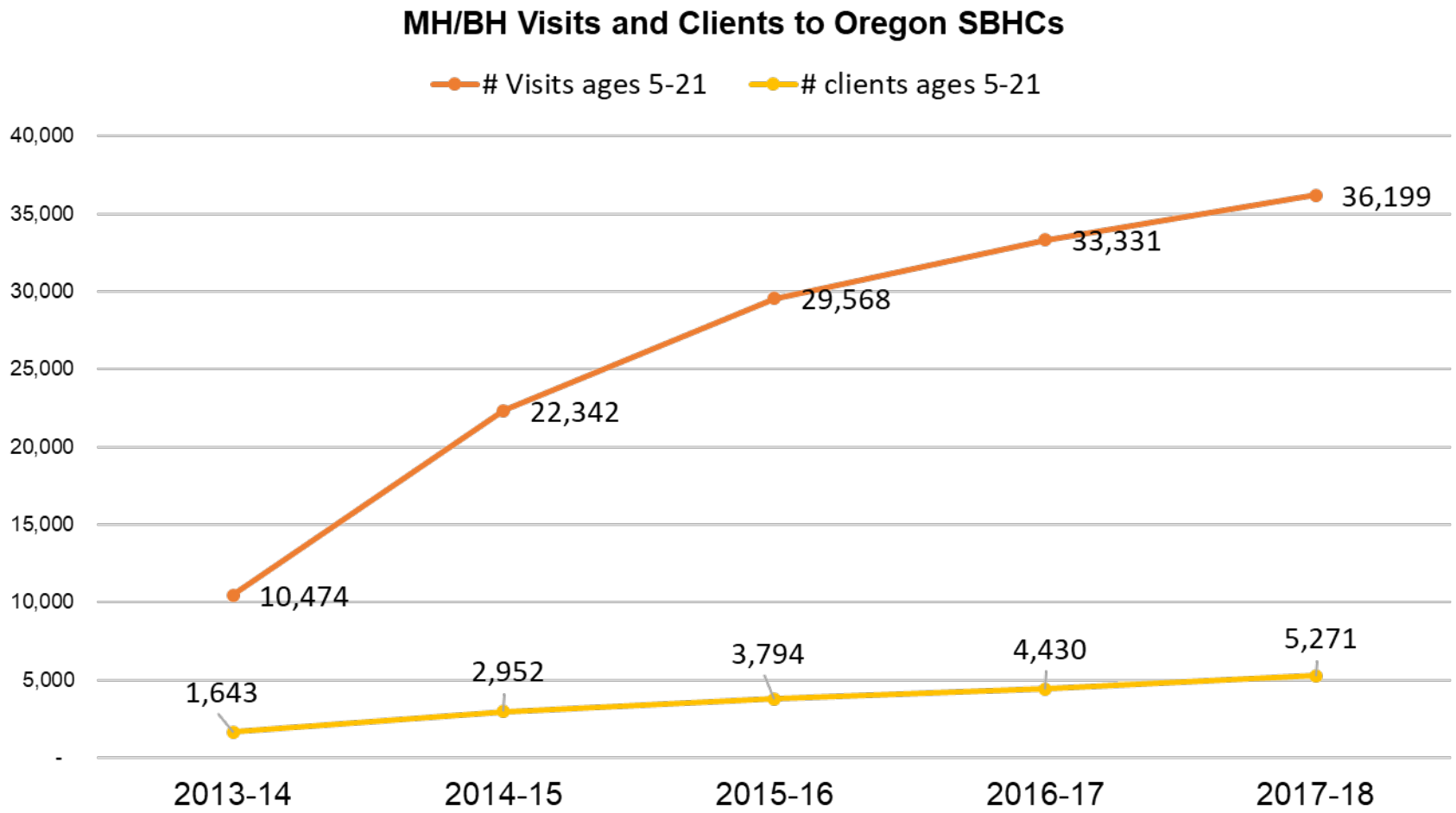
Data & Resources

- Mental/Behavioral Health Data Snapshot
- New research on SBHCs and school connectedness

Oregon SBHC School-Based Health Centers

Oregon Health Authority

Trends in MH/BH Visits & Clients 2013 - 2018



Oregon SBHC School-Based Health Centers

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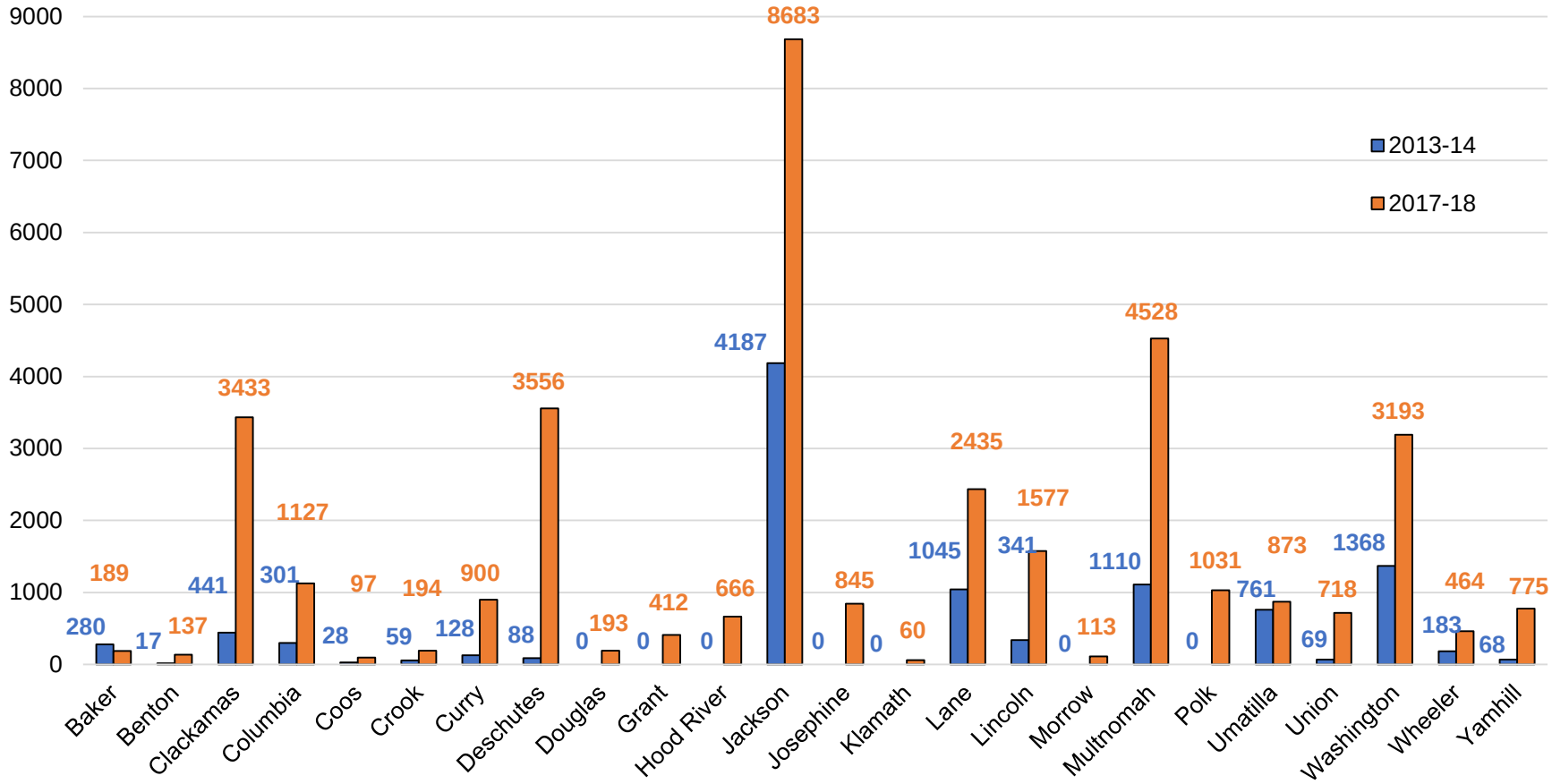
MH/BH School-Aged Visits by County 2013-14 vs 2017-18



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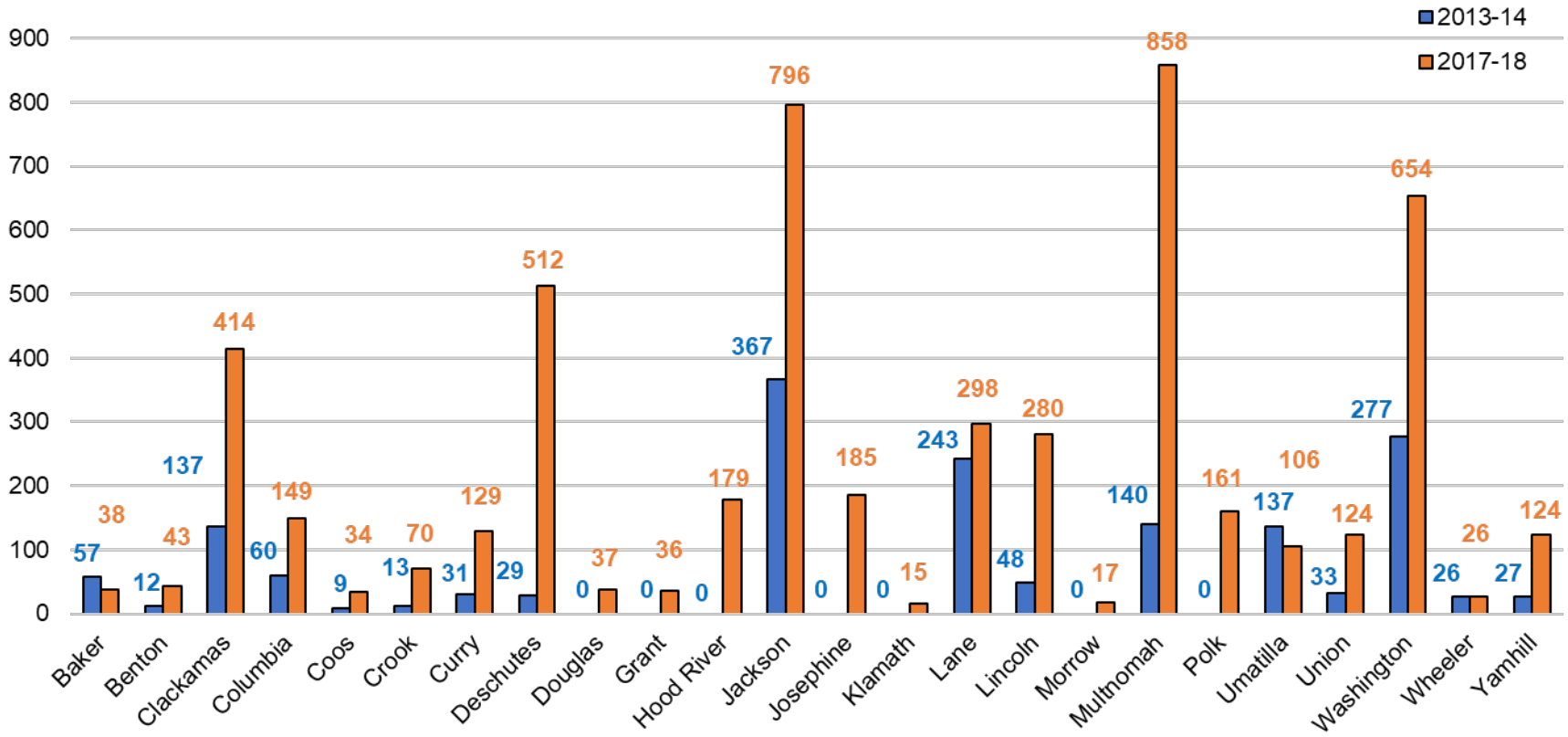
MH/BH School-Aged Clients by County 2013-14 vs 2017-18



Oregon SBHC School-Based Health Centers

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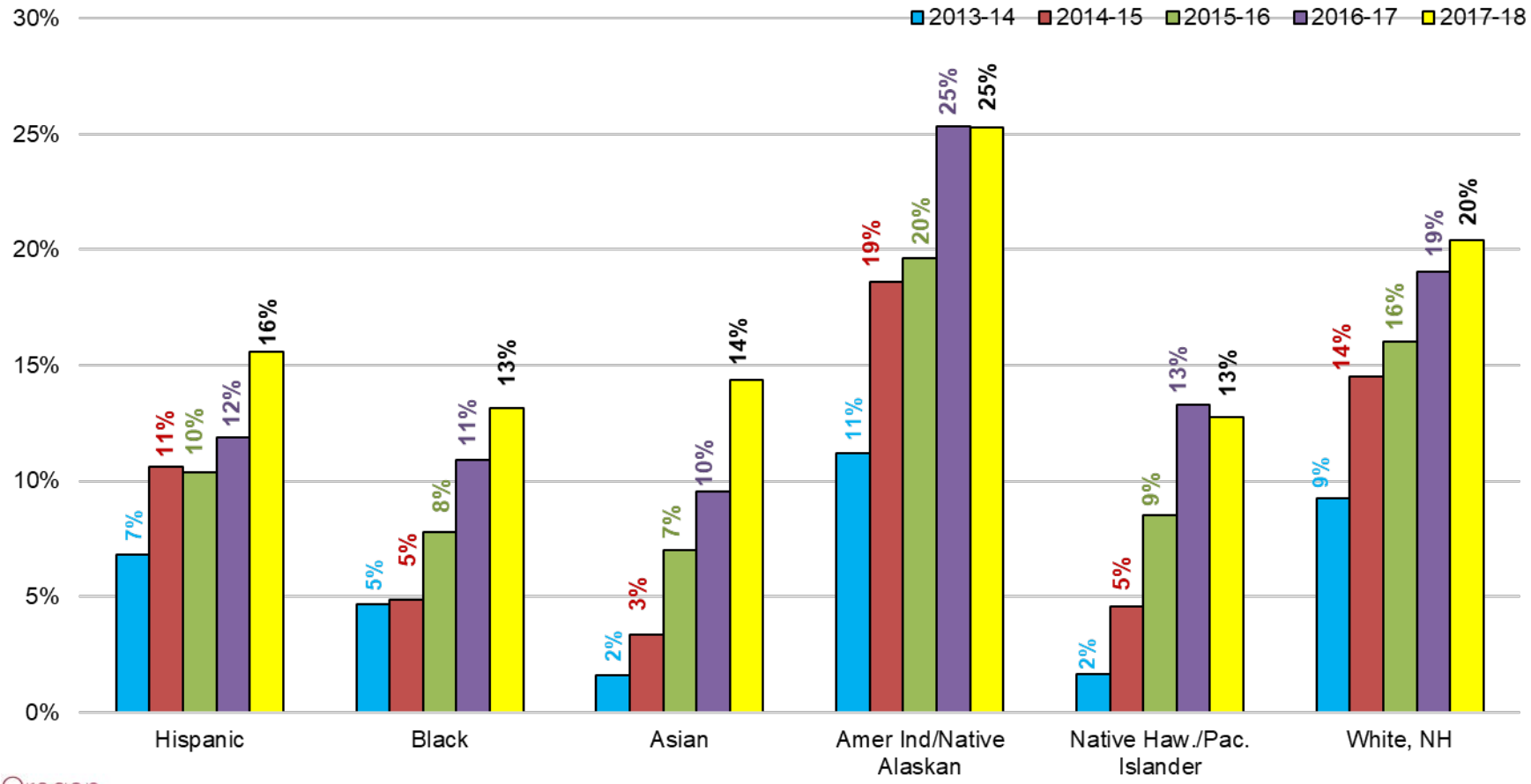
% of SBHC clients ages 5-21 receiving MH visits, by Race/Ethnicity 2013-18



Oregon SBHC School-Based Health Centers

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Top 5 MH diagnoses, Ages 5-21yrs by Sex 2017-18

Female

Diagnosis Code	Description	# of visits	% of visits
F41.1	Generalized anxiety disorder	2,798	13.1%
F43.10	Post-traumatic stress disorder, unspecified	2,531	11.8%
F34.1	Dysthymic disorder	2,208	10.3%
F43.23	Adjustment disorder with mixed anxiety and depressed mood	1,407	6.6%
F43.21	Adjustment disorder with depressed mood	1,246	5.8%
	Total MH visits	**21,407**	

Male

Diagnosis Code	Description	# of visits	% of visits
F43.25	Adjustment disorder with mixed disturbance of emotions and conduct	1,333	9.2%
F43.10	Post-traumatic stress disorder, unspecified	1,225	8.4%
F90.2	Attention-deficit hyperactivity disorder, combined type	1,174	8.1%
F41.1	Generalized anxiety disorder	1,106	7.6%
F91.3	Oppositional defiant disorder	734	5.1%
	Total MH Visits	**14,508**	

Oregon SBHC School-Based Health Centers

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Top 5 MH diagnoses, Ages 5-21yrs by Sex 2017-18

Other

Diagnosis Code	Description	# of visits	% of visits
F64.0	Transsexualism	90	32.3%
F33.1	Major depressive disorder, recurrent, moderate	76	27.2%
F41.1	Generalized anxiety disorder	74	26.5%
F64.9	Gender identity disorder, unspecified	36	12.9%
F32.9	Major depressive disorder, single episode, unspecified	18	6.5%
	Total MH Visits	**279**	

Oregon SBHC School-Based Health Centers

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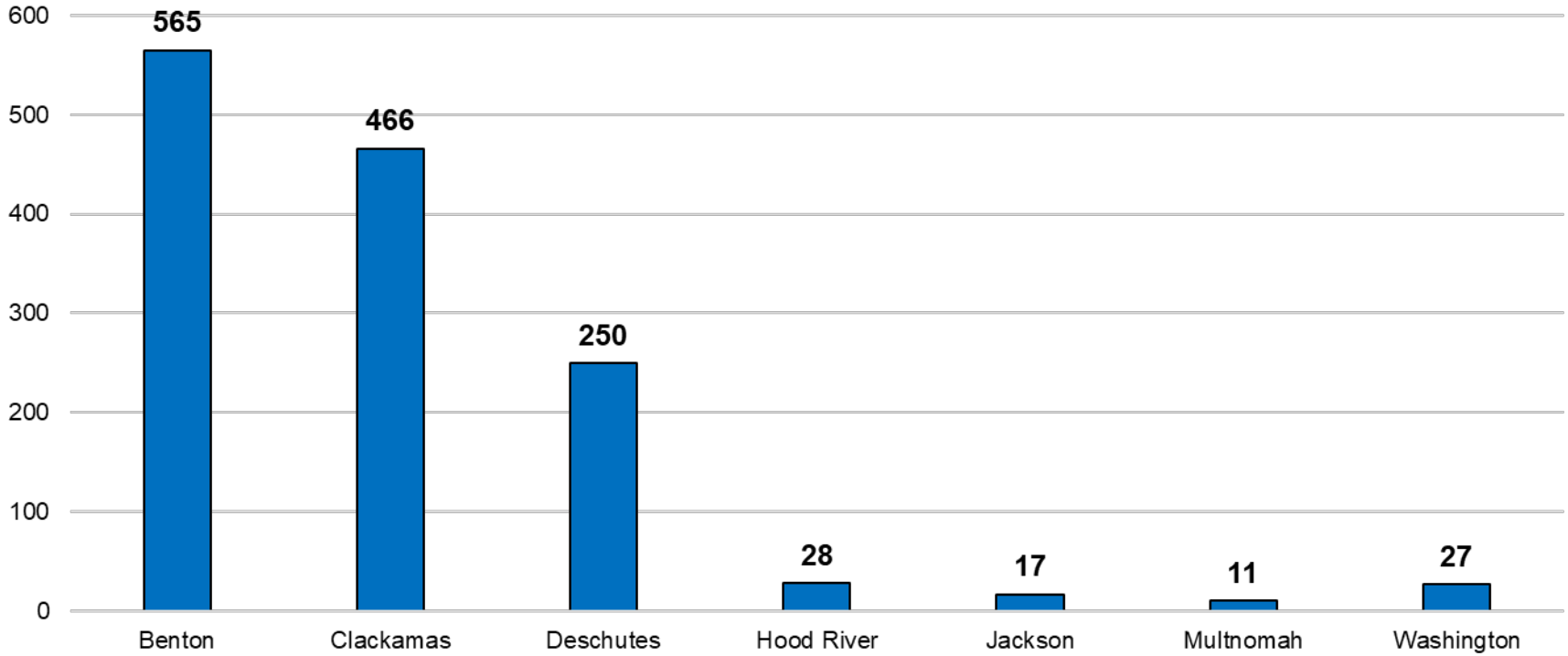
Behavioral Health Visits; Ages 5-21
2017-18



Only visits by Behaviorists were included; Procedure codes: 96150-96155

- 1369 total BH visits conducted by behaviorists were 1,369 in 7 counties

Oregon SBHC School-Based Health Centers

Oregon Health Authority

QUESTIONS???

New SBHC Research: School Connectedness

Bersamin, M., Coulter, R.W.S., Gaarde, J., Garbers, S., Mair, C. & Santelli, J. (2019). School-Based Health Centers and school connectedness. *J School Health*, 89(1): 11-19.

Research Questions:

1. Do youth who attend schools with SBHCs show higher levels of school connectedness than those at schools without SBHCs?
2. Is this relationship stronger among lower SES youth?

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SBHCs & School Connectedness Study Overview

- Population: High school-aged youth in California
- Data source: 2013-14 California Healthy Kids Survey (similar to Oregon Healthy Teens survey)
- Results: No relationship between youth with access to SBHCs and school connectedness measures overall, but strong relationship among youth with lower SES.
- School connectedness defined by:
  - Adult Caring ("At my schools there is a teacher or other adult who really cares about me.")
  - Adult Expectations ("At my school there is a teacher or other adult who always wants me to do my best.")
  - Meaningful Participation ("At school I do things that make a difference.")

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Detailed Findings

Of 333,058 students in 503 high schools…

- 12% of students attended schools with SBHCs
- Students at SBHC schools had lower parent education levels (SES) and were less likely to be non-Hispanic white than students at non-SBHC schools
- SBHC schools had higher percentages of free/reduced lunch & non-white students than non-SBHC schools
- SBHC students also had lower levels of school connectedness BUT once you take demographics into account, there was no difference
- BUT, for low SES students (those with lower parent education), there was a difference in school connectedness for those in SBHC vs non-SBHC schools

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SBHCs Matter for Low SES Youth

- Attending an SBHC school significantly increased reports of school connectedness among youth whose parents had a high school degree or less
- This applies across
  - Adult caring
  - Adult expectations
  - Meaningful participation

QUESTIONS???

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Change to CCO Metric: Depression Screening and Follow-up

- Use of the PHQ9 as a follow-up to a positive PHQ2 no longer counts as additional evaluation and cannot be counted for numerator compliance.
- Link to Metric: 2019 CCO Depression Screening Specifications
- **DOES NOT impact requirements for the SBHC Optional KPM for Depression Screening**

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QUESTIONS???

Oregon SBHC School-Based Health Centers

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Varnishing?

Karen Phillips

State School Oral Health Program Coordinator

Courtney Kappes

Multnomah County Program Supervisor for School and Community Oral Health Programs

OrOHC https://www.orohc.org/

Oregon SBHC School-Based Health Centers

Oregon Health Authority

Comprehensive Pediatric Health Care Minimum Requirements:

Oral Health Services

Onsite

- Visual inspection of teeth and gums
- Preventive oral health education and counseling
- Fluoride supplement prescription

Onsite or referral

- Comprehensive oral health evaluation and treatment
  Referral

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Adolescent Oral Health

Unique Challenges and Opportunities

Oregon SBHC School-Based Health Centers

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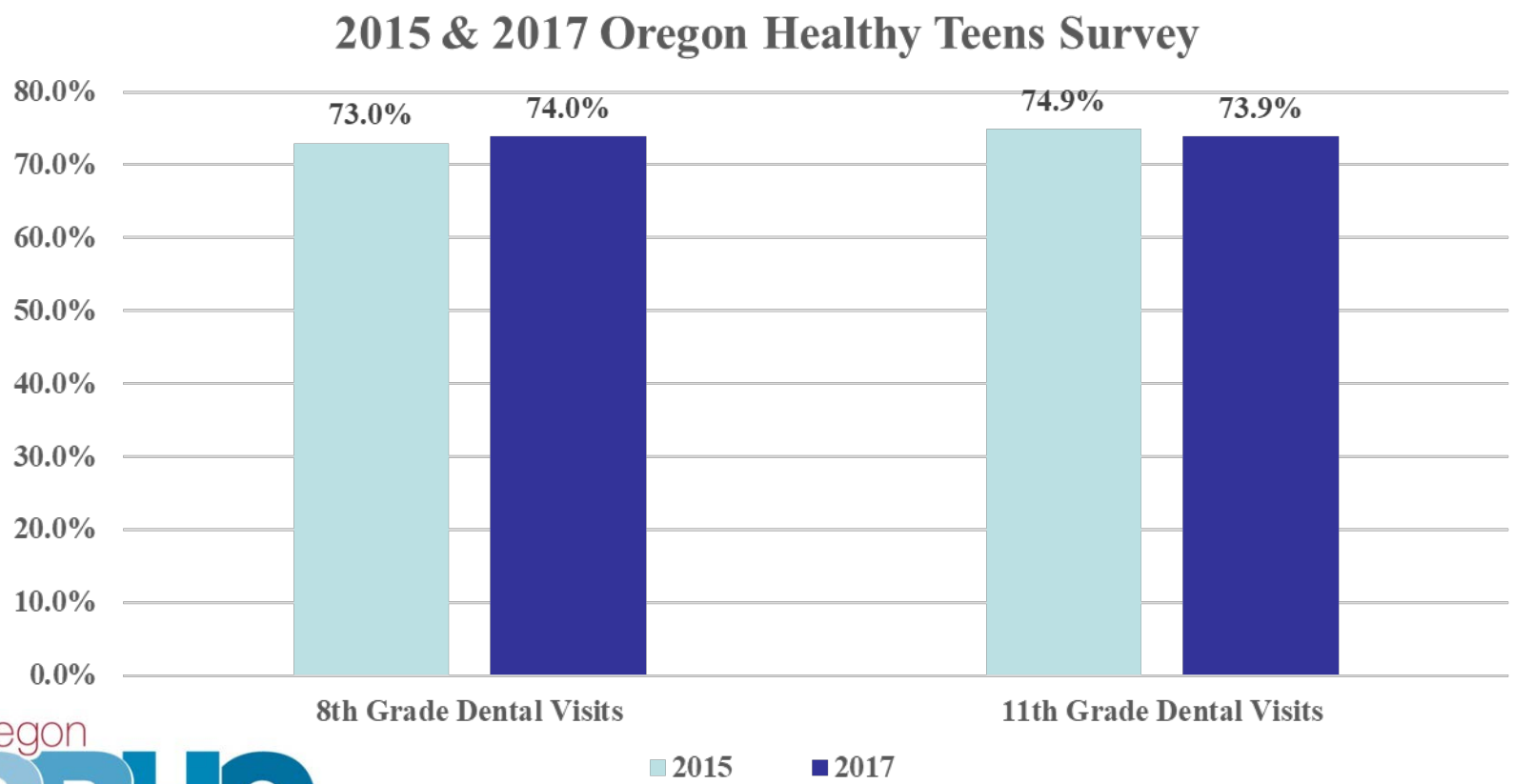
Adolescent Oral Health

- Caries rates remain high
  - ❑ Immature permanent enamel
  - ❑ Increase in susceptible tooth surfaces
  - ❑ Independence in seeking or avoiding care
  - ❑ Oral hygiene may be a low priority
  - ❑ Possible poor nutritional habits

Adolescent Oral Health

- Higher rates of gingivitis
  - ❑ Increase in sex hormones
  - ❑ Orthodontia
  - ❑ Oral hygiene may be a low priority

Adolescent Oral Health



Oregon SBHC School-Based Health Centers

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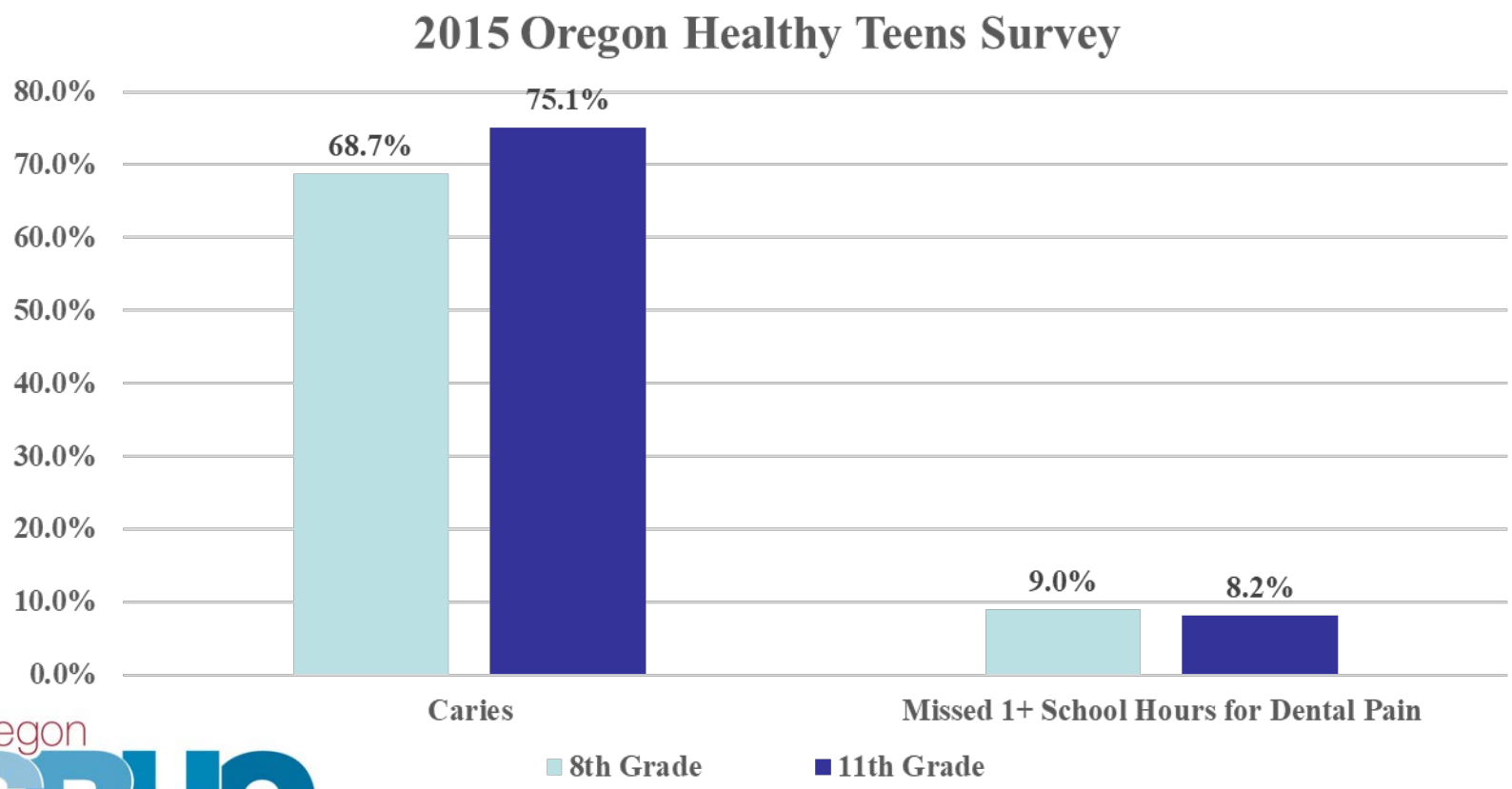
Adolescent Oral Health



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Emergency Department Use 2014 Oregon Study

- Among Oregon young adults, ages 20-39 years, non-traumatic dental conditions are the second most common ED discharge diagnosis
- ED visits rarely result in definitive dental care and patients often return to the ED for the same condition
- Work upstream to prevent dental caries and gum disease

Oregon SBHC School-Based Health Centers

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Opportunities

- Check teeth and gums at adolescent well child visits
- Apply fluoride varnish
- Discuss sugar sweetened beverage and sugar consumption
- Discuss the use of any form of tobacco
- Refer for regular dental check-up and/or dental treatment
- Bill for oral health services

Questions?

Thank you

Karen Phillips, MPH, RDH, EPP

School Oral Health Programs Coordinator

karen.phillips@dhsoha.state.or.us

971-673-0235

Oregon SBHC School-Based Health Centers

Oregon Health Authority

Oral Health – SBHC Reimbursement

SBHCs are **losing revenue** by not billing for varnish and oral health exams

Example: HealthShare **reimburses $54** for both services for CPT 99188 and D1901

with the oral exam completed by a primary care provider.

Varnish supplies cost approximately $2.50 per unit, therefore **ROI** is almost **2000%**

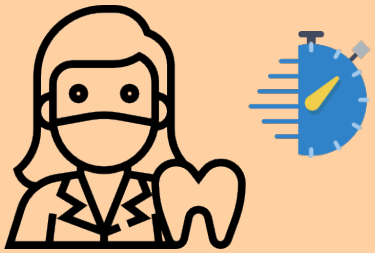
Professional application of fluoride varnish **prevents 37% of decay** in primary teeth[1]

Oregon SBHC School-Based Health Centers

Oregon Health Authority

Oral Health – SBHC Data

Oregon ranks **48th lowest** in the country with only **22%** of people receiving fluoridated water (CDC, 2014), which puts most **Oregon Youth in the high risk** category



Varnish application can be provided by an MA and takes about **1 minute**

An online training is required by **First Tooth** or **Smiles For Life** to provide varnish services.

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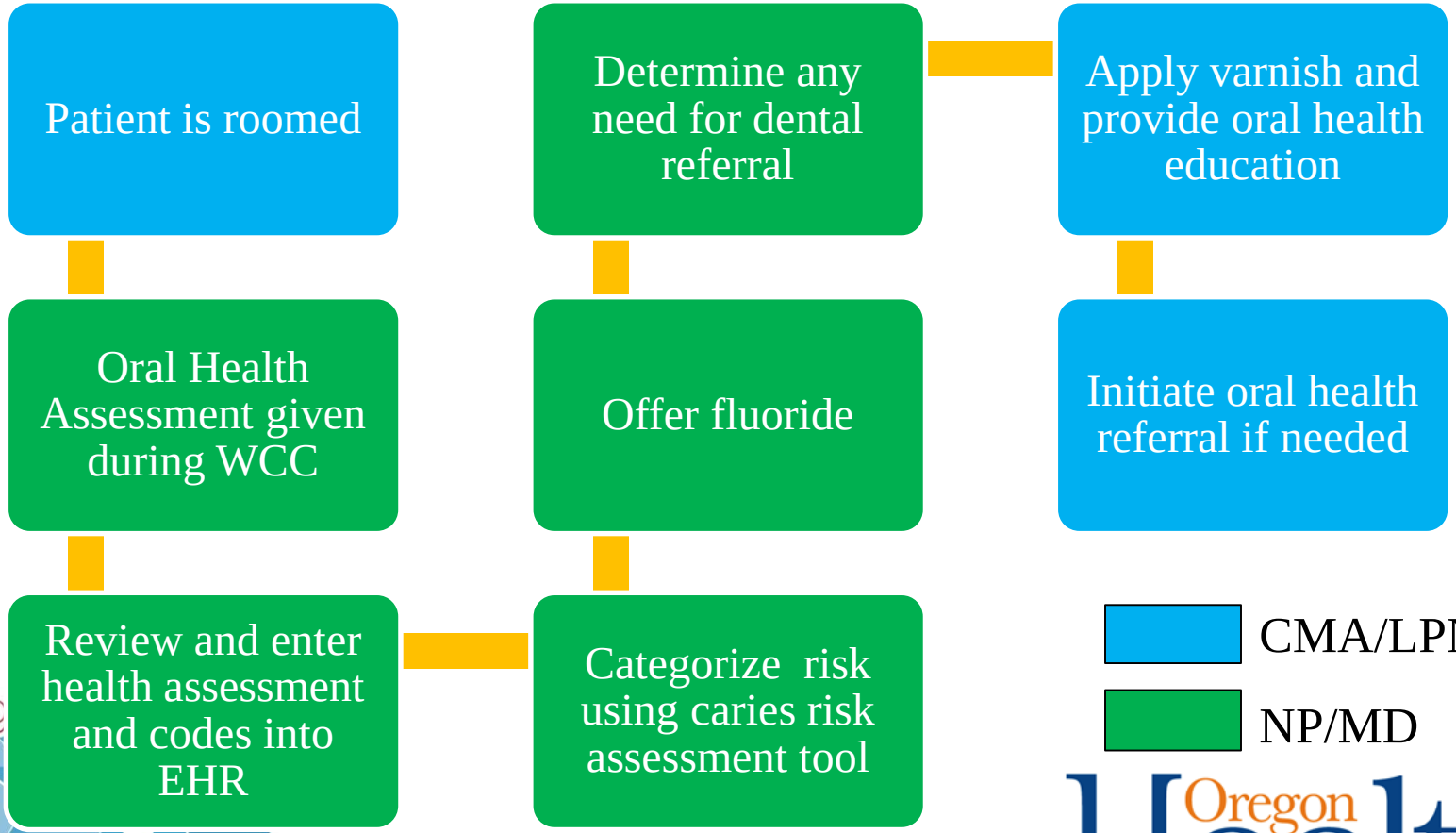
Example Workflow for Integration of Oral Health Assessment at WCC



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QUESTIONS???

Oregon SBHC School-Based Health Centers

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Certification Update

- Minimum requirement: STD prevention education and treatment occurs onsite
  - Medications available:
    - Ceftriaxone 250mg injectable
    - Azithromycin 1 gm po

Certification Update

- Why is STD treatment onsite important?
  - Best practice to test for STDs, and treat in a timely fashion
  - STD rates epidemic
  - Supports adolescent health
  - Ceftriaxone and azithromycin are relatively easy to administer in the office
  - SBHC is point of access
  - Confidentiality
  - Empirical treatment
  - Partner treatment
  - SBHCs can do better

QUESTIONS???

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Question #1:

Do you use social media to promote your SBHC? Yes/No

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Question #2:

If yes, what platforms do you use?

Respond in the chat box

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Question #3:

What subjects would you like resources/trainings on?

Respond in the chat box

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Question #4:

Would you be interested in a quarterly newsletter from SPO? Yes/No

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Question #5:

If yes, what type of content would you like to see?

Respond in the chat box

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OREGON
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HEALTH ALLIANCE

OREGON SCHOOL-BASED HEALTH ALLIANCE

SBHC Coordinator's Meeting
January 30th, 2019

OREGON SCHOOL-BASED HEALTH ALLIANCE

The OSBHA Team

Laurie Huffman
Executive Director

Antonia Rangel-Caril
Program and Advocacy Coordinator

Maureen Hinman
Director of Policy and Strategic Initiatives

Jessica Chambers
Administrative Coordinator

Ashley McAllister
Program Manager

OREGON SCHOOL-BASED HEALTH ALLIANCE

Legislative Agenda

- Extend and Expand Trauma informed schools
- School Nursed and SBHC Telehealth Pilot
- School Health Planning Grants and Flexible Funding

HPV Work

- Youth to Youth HPV Education
- Eye to Eye Training with HPV Focus
- HPV Advisory Council

Student Health Advocates

- We currently have 14 Student Health Advocates and 1 Coach
- Mentorship with Representative Teresa Alonso Leon

UPCOMING EVENTS:

- Youth and Community HPV Summit, Jan. 30th
- School Health Advocacy Day, Feb. 28th
- Mental Health Summit Panel, April 12th
- YAC Summit, April 19th
- Adolescent Health Day, April 3rd

OREGON SCHOOL-BASED HEALTH ALLIANCE

Upcoming Events

- School Health Advocacy Day - February 28, 2019 in Salem
- Mental Health Summit – April 12, 2019 in Bend
- YAC Summit – April 19, 2019 in Salem
- ACTION Grant 2019-2021 Request for Applications Due March 15, 2019

OREGON SCHOOL-BASED HEALTH ALLIANCE

Membership

Keep in Touch with OSBHA

- Email our staff:
  - Laurie Huffman: *Laurie@osbha.org*
  - Maureen Hinman: *Maureen@osbha.org*
  - Ashley McAllister: *Ashley@osbha.org*
  - Antonia Rangel-Caril: *Antonia@osbha.org*
  - Jessica Chambers: *Jessica@osbha.org*
- Visit osbha.org to sign up to receive our new bimonthly newsletter
- Connect with us on Facebook, Instagram, and Twitter @OregonSBHA

Contact Us

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