

2020 Blue Shield Promise Health Plan Model of Care Attestation Page of the Online Training

blue shield of california
Promise Health Plan

Cal MediConnect and Dual-Eligible Special Needs Plan

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12. Coordination
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Attestation

To earn credit for completion, you must complete this attestation.

"I acknowledge that I have completed this Cal MediConnect and Dual Eligible Special Needs Plan provider training course."

First click **Agree** and then click **Submit**.

Agree

1st **2nd**

Submit

2:08 PM 5/29/2020

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You have completed the module!

[Click here to take a 30 second survey.](#)

Thank you!

Click the "X" button in the upper-right corner of your browser window to close.

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