# VOLUME II: HEALTH AND HUMAN SERVICES

# **EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES**

### **Agency Summary**

### **Executive Office of Health and Human Services**

### **Agency Mission**

The Secretariat is on the path to addressing health equity and improving the health and wellbeing of Rhode Islanders by:

- Focusing on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential;
- Promoting continuums of care that deliver efficient, effective, and equitable services across the life course;
- Addressing addiction, improving the behavioral health system, and combating stigma, bias, and discrimination.
- Developing and supporting a robust and diverse health and human services workforce to meet the needs of every Rhode Islander; and
- Modernizing, integrating, and transforming health information technology and data systems to support value-based systems of care.

All of the Executive Office of Health and Human Services' work focuses on the following three guiding principles:

Voice - Consumer, Provider and Community Voice

- Ensure that the voices of our communities are heard and respected without assuming we know what is best.
- Intentionally involve community members in programs and policies from the onset and purposefully ask "what is needed?" throughout the process.
- Create a new balance of power by committing to transparency, accountability, and partnerships.

Choice – Responsive to the Uniqueness of Every Individual

- The needs and aspirations of individuals, families, and community are heard, valued, and respected.
- The whole person, the family unit, and the community in which they live are recognized.
- Policies and systems have options that allow people to exercise choice and make healthy decisions.

Equity – Achieving Equity for All

- Ensuring that all Rhode Islanders have the resources and opportunity to achieve their full potential.
- Meeting the needs of all people regardless of gender, gender identity, sexual orientation, race/ethnicity, age, and disability status.
- Asking "what role, if any, is race, racial discrimination, and social injustice playing in our decision making?"

### **Agency Description**

The Executive Office of Health and Human Services (EOHHS) serves as the principal agency of the executive branch of state government (R.I.G.L. §42-7.2-2) responsible for overseeing the organization, finance and delivery of publicly-funded health and human services. In this capacity, the EOHHS convenes state agencies, including HealthSource RI and the Office of the Health Insurance Commissioner, to establish priorities and ensure progress toward state-wide health and human services goals. Our mission is to foster and strengthen a community-driven, equitable, comprehensive, responsive, and high-quality health and human services system in Rhode Island.

EOHHS directly administers the state Medicaid program and provides strategic support and direction to Rhode Island's other health and human services agencies: RI Department of Health (RIDOH); RI Department of Human Services (DHS); RI Department of Children, Youth and Families (DCYF); RI Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH); Office of Healthy Aging; and RI Division of Veterans Services. EOHHS and the agencies under its direction provide direct safety net services to over 350,000 Rhode Islanders in every city and town, every day.

EOHHS focuses on improving agency performance, achieving greater efficiency across agencies, and breaking down silos between them. Through strategic support and regular oversight, and by ensuring alignment between core Secretariat and Medicaid functions, EOHHS facilitates the modernization of existing systems, the maximization of resources, and the streamlining of service delivery and payment to promote a high-quality, cost-effective health and human service system for Rhode Islanders.

### **Agency Summary**

### **Executive Office of Health and Human Services**

### **Statutory History**

Title 42 Chapter 7.2 of the Rhode Island General Laws, as amended established the Executive Office of Health and Human Services within the Executive Branch of state government. Title 40, Chapter 8 of the Rhode Island General Laws provides the state with a statutory foundation for the Medicaid Program. Title 42, Chapter 12.4 entitled Medicaid Reform Act of 2008 is the statutory authority for the adoption of rules and regulations to implement the provisions of the state's Section 1115 demonstration waiver.

# Budget

# **Executive Office of Health and Human Services**

	2022 Actuals	2023 Actuals	2024 Enacted Budget	2024 Revised Budget	2025 Recommended
Expenditures by Program					
Central Management	186,070,955	207,056,427	253,531,253	287,654,449	305,297,077
Medical Assistance (Including Medicaid)	3,121,434,866	3,134,446,012	3,561,482,505	3,420,620,733	3,663,482,906
Total Expenditures	3,307,505,821	3,341,502,439	3,815,013,758	3,708,275,182	3,968,779,983
Expenditures by Object					
Salary and Benefits	28,946,951	31,166,377	36,358,849	37,227,556	39,002,494
Contract Professional Services	100,308,025	114,141,567	174,703,985	164,891,469	207,616,939
Operating Supplies and Expenses	7,757,930	10,831,725	12,542,619	13,165,486	24,899,515
Assistance and Grants	3,170,451,292	3,185,303,052	3,591,222,090	3,492,872,441	3,697,143,014
Subtotal: Operating	3,307,464,198	3,341,442,720	3,814,827,543	3,708,156,952	3,968,661,962
Capital Purchases and Equipment	41,623	59,719	186,215	118,230	118,021
Subtotal: Other	41,623	59,719	186,215	118,230	118,021
Total Expenditures	3,307,505,821	3,341,502,439	3,815,013,758	3,708,275,182	3,968,779,983
Expenditures by Source of Funds					
General Revenue	993,245,343	1,076,415,174	1,314,146,804	1,280,599,214	1,408,896,492
Federal Funds	2,249,239,652	2,232,280,998	2,448,794,456	2,367,067,094	2,504,657,492
Restricted Receipts	65,020,826	32,806,267	52,072,498	60,608,874	55,225,999
Total Expenditures	3,307,505,821	3,341,502,439	3,815,013,758	3,708,275,182	3,968,779,983
FTE Authorization	190.0	204.0	218.0	218.0	233.0

# Personnel Agency Summary

# Executive Office of Health and Human Services

		FY 2024	F	FY 2025	
	FTE	Cost	FTE	Cost	
Classified	217.0	22,752,952	232.0	24,809,617	
Unclassified	1.0	182,685	1.0	182,685	
Subtotal	218.0	22,935,637	233.0	24,992,302	
Transfer Out		(136,402)		(455,060)	
Transfer In		2,306,412		2,094,859	
Overtime		66,940		66,940	
Seasonal/Special Salaries/Wages		3,000		3,000	
Turnover		(1,954,397)		(2,538,769)	
Total Salaries		23,221,190		24,163,272	
Benefits					
FICA		1,761,603		1,859,620	
Health Benefits		3,189,671		3,684,143	
Payroll Accrual		135,359		141,736	
Retiree Health		1,046,583		962,082	
Retirement		6,960,536		7,229,204	
Subtotal		13,093,752		13,876,785	
Total Salaries and Benefits	218.0	36,314,942	233.0	38,040,057	
Cost Per FTE Position		166,582		163,262	
Statewide Benefit Assessment		912,614		962,437	
Payroll Costs	218.0	37,227,556	233.0	39,002,494	
Purchased Services					
Clerical and Temporary Services		7,579,276		3,192,293	
Information Technology		55,074,762		57,094,794	
Legal Services		450,000		450,000	
Management & Consultant Services		95,290,835		142,402,700	
Medical Services		104,600		93,600	
Other Contracts		3,569,740		4,208,454	
Training and Educational Services		250,062		135,100	
University and College Services		2,572,194		39,998	
Subtotal		164,891,469		207,616,939	
Total Personnel	218.0	202,119,025	233.0	246,619,433	
Distribution by Source of Funds					
General Revenue	202.0	43,696,784	217.0	52,517,065	
Federal Funds	10.0	130,800,912	10.0	172,813,326	
Restricted Receipts	6.0	27,621,329	6.0	21,289,042	
Total All Funds	218.0	202,119,025	233.0	246,619,433	

### **Executive Office of Health and Human Services**

#### **Central Management**

#### Mission

To efficiently and effectively manage the major programmatic and administrative operations of the Executive Office.

### Description

The Central Management program is comprised of several distinct units with functional responsibilities across the health and human services subsidiary departments and include: Executive and Senior Leadership; Budget and Finance; Strategy; Public Affairs; Data Analytics; Health Policy, and Planning; Race Equity and Community Engagement; and Legal Services. The structure of EOHHS is designed to achieve greater efficiency in the organization, finance, design, and delivery of services. The centralization of certain functions modernizes existing systems, leverages available resources, and streamlines service delivery and payment systems. The transfer of the Medicaid Administration function from the Department of Human Services established EOHHS as the "Single State Agency" for Medicaid Administration in Rhode Island. Medical Assistance Administration strives to ensure access to high quality health care services, to assure the efficiency and economy of those services, to coordinate service-delivery efforts with other state departments and agencies, and to administer programs in a manner consistent with federal and state laws and regulations.

### **Statutory History**

Title 42 Chapter 7.2 of the Rhode Island General Laws established the Executive Office of Health and Human Services within the Executive Branch of state government.

# Budget

# **Executive Office of Health and Human Services**

Expenditures by Sub Program	2022 Actuals	2023 Actuals	2024 Enacted Budget	2024 Revised Budget	2025 Recommended
Operations	186,070,955	207,056,427	253,531,253	287,654,449	305,297,077
Total Expenditures	186,070,955	207,056,427	253,531,253	287,654,449	305,297,077
Expenditures by Object					
Salary and Benefits	28,946,951	31,166,377	36,358,849	37,227,556	39,002,494
Contract Professional Services	100,128,403	113,861,567	175,498,985	165,686,469	208,411,939
Operating Supplies and Expenses	7,734,182	10,878,358	12,542,619	13,165,486	24,899,515
Assistance and Grants	49,219,796	51,090,406	28,944,585	71,456,708	32,865,108
Subtotal: Operating	186,029,332	206,996,708	253,345,038	287,536,219	305,179,056
Capital Purchases and Equipment	41,623	59,719	186,215	118,230	118,021
Subtotal: Other	41,623	59,719	186,215	118,230	118,021
Total Expenditures	186,070,955	207,056,427	253,531,253	287,654,449	305,297,077
Expenditures by Source of Funds					
General Revenue	39,682,055	45,916,824	47,288,469	47,505,537	56,010,456
Federal Funds	132,302,899	147,209,443	172,720,592	200,213,395	203,893,766
Restricted Receipts	14,086,001	13,930,160	33,522,192	39,935,517	45,392,855
Total Expenditures	186,070,955	207,056,427	253,531,253	287,654,449	305,297,077

### **Executive Office of Health and Human Services**

		FY	Z <b>2024</b>	FY	2025
		FTE	Cost	FTE	Cost
Classified					
ADMINISTRATIVE AND LEGAL SUPPORT SERVICES ADMINISTRATOR	0145 A	5.0	736,323	5.0	739,048
ADMINISTRATOR- FAMILY AND ADULT SERVICES	0141 A	1.0	122,290	1.0	122,290
ADMINISTRATOR, FINANCIAL MANAGEMENT	0137 A	3.0	295,613	3.0	309,226
ADMINISTRATOR FOR MEDICAL SERVICES	0141 A	10.0	1,221,201	10.0	1,241,551
ADMINISTRATOR II (BHDDH)	0138 A	0.0	0	1.0	107,285
ADMINISTRATOR MANAGEMENT INFORMATION SYSTEMS	0140 A	1.0	105,738	1.0	111,392
ADMINISTRATOR OF PROGRAM MANAGEMENT (BHDDH)	0135 A	1.0	96,545	1.0	96,545
APPEALS OFFICER	0A30 A	10.0	829,416	10.0	872,665
ASSISTANT ADMINISTRATIVE OFFICER	0A21 A	1.0	72,851	1.0	72,851
ASSISTANT ADMINISTRATOR FAMILY AND CHILDREN'S SERVICES	0A35 A	1.0	106,268	1.0	106,268
ASSISTANT ADMINISTRATOR- FINANCIAL MANAGEMENT	0134 A	1.0	83,674	1.0	86,773
ASSISTANT DIRECTOR FINANCIAL AND CONTRACT MANAGEMENT	0141 A	4.0	471,569	4.0	482,982
ASSOCIATE DIRECTOR DEPARTMENT OF ELDERLY AFFAIRS	0141 A	1.0	140,634	1.0	140,634
ASSOCIATE DIRECTOR (DHS) DIV OF COMMUNITY SERVICES	0143 A	1.0	150,596	1.0	150,596
ASSOCIATE DIRECTOR (DHS) DIV OF MANAGEMENT SERVICES	0146 A	3.0	443,749	3.0	451,711
ASSOCIATE DIRECTOR (DHS) PROGRAM OPERATIONS	0143 A	1.0	136,316	1.0	140,273
ASSOCIATE DIRECTOR (FINANCIAL MANAGEMENT)	0144 A	4.0	549,185	4.0	560,693
ASSOCIATE DIRECTOR II (BHDDH)	0144 A	1.0	153,178	1.0	153,178
CHIEF DATA ANALYST	0145 A	1.0	144,912	1.0	144,912
CHIEF ECONOMIC AND POLICY ANALYST	0142 A	2.0	261,262	2.0	261,262
CHIEF FAMILY HEALTH SYSTEMS	0137 A	5.0	510,718	5.0	514,809
CHIEF FINANCIAL OFFICER II	0144 A	2.0	261,162	2.0	272,866
CHIEF FINANCIAL OFFICER III	0147 A	3.0	490,440	3.0	503,727
CHIEF HEALTH PROGRAM EVALUATOR	0137 A	3.0	260,485	3.0	295,158
CHIEF HUMAN SERVICES BUSINESS OFFICER	0A33 A	4.0	408,273	4.0	416,641
CHIEF IMPLEMENTATION AIDE	0128 A	4.0	290,091	4.0	294,986
CHIEF MEDICAL CARE SPECIALIST	0A34 A	3.0	343,735	3.0	348,712
CHIEF OFFICE OF HEALTH PROMOTION	0137 A	0.0	0	1.0	105,319
CHIEF OF LEGAL SERVICES	0141 A	8.0	945,931	8.0	994,366
CHIEF OF PHARMACY AND RELATED SERVICES	0138 A	1.0	96,369	1.0	99,938

### **Executive Office of Health and Human Services**

		FY	2024	FY	2025
		FTE	Cost	FTE	Cost
Classified					
CHIEF OF STRATEGIC PLANNING- MONITORING AND EVALUATION	0143 A	7.0	898,390	8.0	1,037,510
CHIEF PROGRAM DEVELOPMENT	0134 A	0.0	0	1.0	106,700
CHIEF PUBLIC AFFAIRS OFFICER	0137 A	1.0	97,258	2.0	202,755
CHIEF RATE SETTING ANALYST	0A35 A	1.0	122,596	1.0	122,596
COMMUNITY LIAISON/RELATIONS COORDINATOR (DCYF)	0135 A	0.0	0	1.0	90,448
CONSULTANT PUBLIC HEALTH NURSE	0926 A	4.0	507,996	4.0	538,050
CUSTOMER SERVICE SPECIALIST II	0319 A	1.0	50,422	1.0	52,060
CUSTOMER SERVICE SPECIALIST III	0323 A	1.0	56,936	1.0	59,144
DATA ANALYST II	0138 A	1.0	107,285	1.0	107,285
DATA ANALYST III	0142 A	2.0	212,565	2.0	247,557
DATA CONTROL CLERK	0315 A	1.0	54,250	1.0	54,250
DEPUTY CHIEF OF LEGAL SERVICES	0139 A	12.0	1,323,889	12.0	1,376,468
DEPUTY DIRECTOR DEPARTMENT OF HUMAN SERVICES	0148 A	1.0	178,065	1.0	178,065
DIRECTOR, INTERAGENCY OPERATIONS (EOHHSS)	0151 A	3.0	540,382	3.0	546,105
ECONOMIC AND POLICY ANALYST I	0130 A	1.0	96,857	1.0	96,857
EXECUTIVE ASSISTANT	0318 A	1.0	51,127	1.0	52,389
HEALTH PROGRAM ADMINISTRATOR	0135 A	4.0	356,324	9.0	796,658
HUMAN SERVICES BUSINESS OFFICER	0A22 A	1.0	63,013	1.0	63,013
HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A24 A	1.0	66,362	1.0	68,103
IMPLEMENTATION DIRECTOR POLICY AND PROGRAMS	0140 A	8.0	902,228	8.0	931,624
INFORMATION SYSTEMS GROUP COORDINATOR (OIP)	0138 A	2.0	183,952	2.0	197,826
INTERDEPARTMENTAL PROJECT MANAGER	0139 A	14.0	1,527,785	16.0	1,786,639
INVESTIGATIVE AUDITOR	0133 A	0.0	0	1.0	82,932
JUNIOR HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A22 A	2.0	132,328	2.0	132,328
LEGAL ASSISTANT	0119 A	3.0	155,613	3.0	157,329
LEGAL COUNSEL	0134 A	1.0	85,594	1.0	88,974
LEGAL COUNSEL (BHDDH)	0136 A	1.0	90,992	1.0	94,397
MEDICAID PROGRAM DIRECTOR	0152 A	1.0	177,173	1.0	182,941
MEDICAL CARE SPECIALIST	0A25 A	4.0	329,806	4.0	329,806
OFFICE MANAGER	0123 A	2.0	120,258	2.0	122,420
PRINCIPAL HUMAN SERVICES BUSINESS OFFICER	0A28 A	3.0	236,893	3.0	242,363
PRINCIPAL HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A30 A	4.0	393,986	4.0	393,986

### **Executive Office of Health and Human Services**

		F	Y 2024	F	Y 2025
		FTE	Cost	FTE	Cost
Classified					
PRINCIPAL PUBLIC HEALTH PROMOTION SPECIALIST	0333 A	1.0	105,979	1.0	105,979
PROGRAMMING SERVICES OFFICER	0131 A	6.0	461,517	6.0	480,551
QUALITY CONTROL REVIEWER	0A24 A	2.0	136,204	3.0	195,800
SENIOR ECONOMIC AND POLICY ANALYST	0134 A	3.0	261,581	3.0	271,623
SENIOR HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A28 A	6.0	515,841	6.0	519,620
SENIOR LEGAL COUNSEL	0136 A	16.0	1,553,441	16.0	1,614,656
SENIOR LEGAL COUNSEL	0137 A	1.0	83,035	1.0	96,646
SENIOR MEDICAL CARE SPECIALIST	0A30 A	3.0	280,744	3.0	280,744
SENIOR QUALITY CONTROL REVIEW SUPERVISOR	0A30 A	1.0	102,320	1.0	102,320
SENIOR SYSTEMS ANALYST	0A26 A	1.0	90,075	1.0	90,075
SOCIAL CASE WORKER II	0A24 A	3.0	216,822	3.0	216,822
SUPERVISOR FINANCIAL MANAGEMENT AND REPORTING	0135 A	1.0	96,544	1.0	96,546
Subtotal Classified		217.0	22,752,952	232.0	24,809,617
Unclassified					
SECRETARY OF HEALTH AND HUMAN SERVICES	0954KF	1.0	182,685	1.0	182,685
Subtotal Unclassified		1.0	182,685	1.0	182,685
Subtotal		218.0	22,935,637	233.0	24,992,302
Transfer Out			(136,402)		(455,060)
Transfer In			2,306,412		2,094,859
Overtime			66,940		66,940
Seasonal/Special Salaries/Wages			3,000		3,000
Turnover			(1,954,397)		(2,538,769)
Total Salaries			23,221,190		24,163,272
Benefits					
FICA			1,761,603		1,859,620
Health Benefits			3,189,671		3,684,143
Payroll Accrual			135,359		141,736
Retiree Health			1,046,583		962,082
Retirement			6,960,536		7,229,204
Subtotal			13,093,752		13,876,785
Total Salaries and Benefits		218.0	36,314,942	233.0	38,040,057
Cost Per FTE Position			166,582		163,262
Statewide Benefit Assessment			912,614		962,437

### **Executive Office of Health and Human Services**

	F	FY 2024		Y 2025
	FTE	Cost	FTE	Cost
Payroll Costs	218.0	37,227,556	233.0	39,002,494
Purchased Services				
Clerical and Temporary Services		7,579,276		3,192,293
Information Technology		55,074,762		57,094,794
Legal Services		450,000		450,000
Management & Consultant Services		96,085,835		143,197,700
Medical Services		104,600		93,600
Other Contracts		3,569,740		4,208,454
Training and Educational Services		250,062		135,100
University and College Services		2,572,194		39,998
Subtotal		165,686,469		208,411,939
Total Personnel	218.0	202,914,025	233.0	247,414,433
Distribution by Source of Funds				
General Revenue	202.0	43,696,784	217.0	52,517,065
Federal Funds	10.0	130,800,912	10.0	172,813,326
Restricted Receipts	6.0	28,416,329	6.0	22,084,042
Total All Funds	218.0	202,914,025	233.0	247,414,433

### **Performance Measures**

### **Executive Office of Health and Human Services**

#### **Central Management**

#### Long-Term Services and Support Spending

Home and Community-Based Services (HCBS) are a preferred alternative to institutional long-term care. HCBS Programs are designed around the intensity of a patient's need, providing cost savings, and improved patient experience. The figures below represent the percent of long-term care spending on HCBSs. [Note: This was a new performance measure in FY 2023 and historical targets are not available].

	Reporting Period: State Fiscal Year					
2021 20	2023	2024	2025			
Target	50%	50%	50%			
<b>Actual</b> 47.0% 49.	% 48.6%					

#### Overdoses

Overdoses are a leading cause of accidental death in Rhode Island. Overdose rates are important to track as they inform our prevention and response efforts. The figures below are a count of confirmed overdoses in the state that were reversed or resulted in death. [Note: This was a new performance measure in FY 2023 and historical targets are not available. FY 2023 actual will likely increase as claims data can lag by up to six months.]

Frequency: Annual		Reporting Period: State Fiscal Year				
	2021	2022	2023	2024	2025	
Target			1,075	914	876	
Actual	1,195	1,160	627			

#### Behavioral Health Services via Telehealth

COVID-19 created the need to implement alternative ways to access care, most notably behavioral health services. Providing telehealth options increased the number of individuals who are able to access behavioral health care. The figures below represent the percent of behavioral health services accessed through telehealth. [Note: This was a new performance measure in FY 2023 and targets are subject to change based on development of telehealth best practices. Data for FY 2023 are incomplete due to a one year data lag in the All Payer Claims Database.]

Frequency: A	nnual	Reporting Period: State Fiscal Year				
	2021	2022	2023	2024	2025	
Target				44.2%	50.0%	
Actual	49.70%	41.95%	38.80%			

### **Executive Office of Health and Human Services**

### Medical Assistance (Including Medicaid)

### Mission

To assure the availability of high quality health care services to program recipients.

### Description

EOHHS is responsible for ensuring access to high-quality, cost-effective Medicaid funded services, coordinating the organization, finance and delivery of those services state-wide, and administering the program in accordance with federal and state laws and regulations. In addition, EOHHS is also the principal agency in the executive branch with responsibility for implementing Rhode Island's Section 1115 demonstration waiver and the Medicaid State Plan, which provide the necessary federal authorizations to operate the program. The Medicaid program operates under the guiding principles to 1) pay for value, not volume; 2) coordinate physical, behavioral and long-term health; 3) rebalance the delivery system away from high-cost settings; and, 4) promote efficiency, transparency and flexibility. In the coming year, the Medicaid program's primary priorities include: renewal of the 1115 Waiver Demonstration, the planning for the sunsetting of the Medicaid-Medicare Program by Centers for Medicare and Medicaid Services (CMS), procurements of managed care, nonemergency medical transportation, and MMIS planning and implementation.

The Medicaid Program is currently organized to include three major units: (1) Managed Care and Contract Oversight: which includes Managed Care Oversight, children and adult behavioral health, compliance and contracting, (2) Program Operations: which includes Program Services, Customer Resolution, LTSS Escalation and Contingency Payments, and RIte Share; and (3) Systems, Technology and Program Integrity.

### **Statutory History**

Title XIX of the Social Security Act was enacted by Congress under the provision of Public Law 89-97 on July 30, 1965. The Rhode Island Medical Assistance Program was implemented under Title 40, Chapter 8 of the Rhode Island General Laws. Title 42 Chapter 12.3 and Title 40-6.2 of the Rhode Island General Laws authorized the Department of Human Services to establish and administer the RIte Care Program. EOHHS has since become the administering agency for Medical Assistance.

# Budget

# **Executive Office of Health and Human Services**

# Medical Assistance (Including Medicaid)

Expenditures by Sub Program	2022 Actuals	2023 Actuals	2024 Enacted Budget	2024 Revised Budget	2025 Recommended
Hospitals	356,438,245	224,166,726	361,665,896	361,838,872	357,738,872
Long-Term Care	389,353,024	419,476,286	478,190,000	481,000,000	587,339,892
Managed Care	838,985,622	971,485,566	1,069,954,164	1,018,700,000	1,070,342,209
Other Programs	176,598,389	42,539,490	42,282,875	50,281,861	22,697,227
Other Services	867,715,171	943,785,360	1,010,387,931	930,100,000	976,143,434
Pharmacy	68,367,555	79,054,752	97,000,000	97,700,000	107,100,000
Rhody Health Partners	423,976,859	453,937,832	502,001,639	481,000,000	542,121,272
Total Expenditures	3,121,434,866	3,134,446,012	3,561,482,505	3,420,620,733	3,663,482,906
Expenditures by Object					
Contract Professional Services	179,622	280,000	(795,000)	(795,000)	(795,000)
Operating Supplies and Expenses	23,748	(46,634)	0	0	0
Assistance and Grants	3,121,231,496	3,134,212,645	3,562,277,505	3,421,415,733	3,664,277,906
Subtotal: Operating	3,121,434,866	3,134,446,012	3,561,482,505	3,420,620,733	3,663,482,906
Total Expenditures	3,121,434,866	3,134,446,012	3,561,482,505	3,420,620,733	3,663,482,906
Expenditures by Source of Funds					
General Revenue	953,563,288	1,030,498,350	1,266,858,335	1,233,093,677	1,352,886,036
Federal Funds	2,116,936,753	2,085,071,555	2,276,073,864	2,166,853,699	2,300,763,726
Restricted Receipts	50,934,825	18,876,107	18,550,306	20,673,357	9,833,144
Total Expenditures	3,121,434,866	3,134,446,012	3,561,482,505	3,420,620,733	3,663,482,906

### **Performance Measures**

### **Executive Office of Health and Human Services**

### Medical Assistance (Including Medicaid)

**NEMT Complaints** 

Rhode Island's non-emergency medical transportation (NEMT) vendor is responsible for safely transporting individuals to their appointment, on time and in a courteous fashion. The figures below are calculated by dividing the number of complaints (customer service, driver and vehicle, early/late pickup, and driver no show) by the total number of NEMT rides. [Note: This was a new performance measure in FY 2023 and historical targets are not available.]

Frequency: An	cy: Annual Reporting Period: State Fiscal Year				
	2021	2022	2023	2024	2025
Target			0.10%	0.09%	0%
Actual	0.13%	0.11%	0.09%		

#### **Timeliness of Early Intervention Evaluation**

Timely assessment of pre-school children is critical for ensuring the most effective services are in place when they are needed. This measure, the Individuals with Disabilities Education Act (IDEA) indicator 7 requires that children have an individualized Family Service Plan in place within 45 calendar days of referral to Early Intervention. The figures below represent the percent of children that have had the following required activities completed within 45 calendar days of referral to Early Intervention; a family assessment, a child evaluation that identifies developmental delays, strengths and needs, and informs eligibility decisions, a routines-based assessment to identify child/family goals, activities and interventions, and an Individualized Family Service Plan that outlines outcomes, services, and supports the family will receive while enrolled in Early Intervention. A significant and steady increase in this indicator is expected over the next few years as providers continue to increase staffing capacity and stabilize their programs. [Note: This was a new performance measure in FY 2023 and historical targets are not available.]

Frequency: Annual		Reporting Period: State Fiscal Year			
	2021	2022	2023	2024	2025
Target			100%	100%	100%
Actual	98%	35%	34%		