

**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 of inequity and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential;
- Promoting continuums of care that deliver accessible, 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 (OHA); and Office of Veterans Services (VETS). 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

	2023 Actuals	2024 Actuals	2025 Enacted Budget	2025 Revised Budget	2026 Recommended
Expenditures by Program					
Central Management	207,056,427	249,844,269	316,417,203	328,237,256	288,656,140
Medical Assistance (Including Medicaid)	3,134,446,012	3,359,853,613	3,701,334,670	3,638,874,492	3,913,445,550
Total Expenditures	3,341,502,439	3,609,697,882	4,017,751,873	3,967,111,748	4,202,101,690
Expenditures by Object					
Salary and Benefits	31,166,377	37,442,081	38,558,041	41,347,303	44,562,245
Contract Professional Services	114,141,567	145,245,880	219,989,536	215,190,462	196,505,478
Operating Supplies and Expenses	10,831,725	12,157,313	21,669,274	12,721,180	15,181,217
Assistance and Grants	3,185,303,052	3,413,617,173	3,737,417,001	3,697,817,043	3,945,813,390
Subtotal: Operating	3,341,442,720	3,608,462,447	4,017,633,852	3,967,075,988	4,202,062,330
Capital Purchases and Equipment	59,719	1,235,435	118,021	35,760	39,360
Subtotal: Other	59,719	1,235,435	118,021	35,760	39,360
Total Expenditures	3,341,502,439	3,609,697,882	4,017,751,873	3,967,111,748	4,202,101,690
Expenditures by Source of Funds					
General Revenue	1,076,415,174	1,265,715,000	1,416,418,232	1,390,933,011	1,469,676,177
Federal Funds	2,232,280,998	2,299,863,309	2,543,855,296	2,515,710,990	2,708,539,855
Restricted Receipts	32,806,267	44,119,574	57,478,345	60,467,747	23,885,658
Total Expenditures	3,341,502,439	3,609,697,882	4,017,751,873	3,967,111,748	4,202,101,690
FTE Authorization	204.0	218.0	233.0	233.0	243.0

Personnel Agency Summary

Executive Office of Health and Human Services

	FY 2025		FY 2026	
	FTE	Cost	FTE	Cost
Classified	232.0	26,112,151	242.0	28,808,642
Unclassified	1.0	238,598	1.0	238,598
Subtotal	233.0	26,350,749	243.0	29,047,240
Transfer Out		(509,965)		(542,241)
Transfer In		2,179,246		1,862,799
Overtime		105,000		54,600
Seasonal/Special Salaries/Wages		3,000		3,000
Turnover		(2,803,315)		(3,126,927)
Total Salaries		25,324,715		27,298,471
Benefits				
FICA		1,974,395		2,140,746
Health Benefits		3,857,161		4,223,250
Payroll Accrual		152,133		164,376
Retiree Health		1,024,586		916,387
Retirement		8,260,171		9,001,342
Subtotal		15,268,446		16,446,101
Total Salaries and Benefits	233.0	40,593,161	243.0	43,744,572
Cost Per FTE Position		174,220		180,019
Statewide Benefit Assessment		754,142		817,673
Payroll Costs	233.0	41,347,303	243.0	44,562,245
Purchased Services				
Clerical and Temporary Services		6,790,291		1,632,403
Information Technology		51,105,730		56,956,127
Legal Services		300,000		475,000
Management & Consultant Services		143,555,764		131,264,845
Medical Services		98,100		93,600
Other Contracts		12,214,610		5,893,403
Training and Educational Services		150,100		150,100
University and College Services		975,867		40,000
Subtotal		215,190,462		196,505,478
Total Personnel	233.0	256,537,765	243.0	241,067,723
Distribution by Source of Funds				
General Revenue	218.0	52,124,109	228.0	61,010,307
Federal Funds	9.0	182,515,253	9.0	174,670,831
Restricted Receipts	6.0	21,898,403	6.0	5,386,585
Total All Funds	233.0	256,537,765	243.0	241,067,723

Program Summary

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

Central Management

Expenditures by Sub Program	2023 Actuals	2024 Actuals	2025 Enacted Budget	2025 Revised Budget	2026 Recommended
Operations	160,085,773	191,670,288	248,921,794	270,325,888	212,725,484
UHIP	46,970,654	58,173,981	67,495,409	57,911,368	75,930,656
Total Expenditures	207,056,427	249,844,269	316,417,203	328,237,256	288,656,140
Expenditures by Object					
Salary and Benefits	31,166,377	37,442,081	38,558,041	41,347,303	44,562,245
Contract Professional Services	113,861,567	144,965,880	218,554,536	215,985,462	197,300,478
Operating Supplies and Expenses	10,878,358	11,782,233	21,669,274	12,721,180	15,181,217
Assistance and Grants	51,090,406	54,418,640	37,517,331	58,147,551	31,572,840
Subtotal: Operating	206,996,708	248,608,834	316,299,182	328,201,496	288,616,780
Capital Purchases and Equipment	59,719	1,235,435	118,021	35,760	39,360
Subtotal: Other	59,719	1,235,435	118,021	35,760	39,360
Total Expenditures	207,056,427	249,844,269	316,417,203	328,237,256	288,656,140
Expenditures by Source of Funds					
General Revenue	45,916,824	45,522,091	58,336,613	57,130,819	66,192,009
Federal Funds	147,209,443	176,196,068	210,410,919	224,049,092	207,000,533
Restricted Receipts	13,930,160	28,126,110	47,669,671	47,057,345	15,463,598
Total Expenditures	207,056,427	249,844,269	316,417,203	328,237,256	288,656,140

Personnel

Executive Office of Health and Human Services

Central Management

		FY 2025		FY 2026	
		FTE	Cost	FTE	Cost
Classified					
ADMINISTRATIVE AND LEGAL SUPPORT SERVICES ADMINISTRATOR	0145 A	6.0	967,390	6.0	1,020,154
ADMINISTRATOR- FAMILY AND ADULT SERVICES	0141 A	1.0	122,018	1.0	133,072
ADMINISTRATOR, FINANCIAL MANAGEMENT	0137 A	2.0	223,253	2.0	232,182
ADMINISTRATOR FOR MEDICAL SERVICES	0141 A	8.0	1,046,914	8.0	1,102,228
ADMINISTRATOR II (BHDDH)	0138 A	1.0	112,648	1.0	117,155
ADMINISTRATOR MANAGEMENT INFORMATION SYSTEMS	0140 A	1.0	117,023	2.0	240,296
ADMINISTRATOR OF PROGRAM MANAGEMENT (BHDDH)	0135 A	1.0	101,372	1.0	105,427
APPEALS OFFICER	0A30 A	10.0	935,208	10.0	989,008
ASSISTANT ADMINISTRATIVE OFFICER	AB21 A	1.0	70,752	1.0	73,578
ASSISTANT ADMINISTRATOR FAMILY AND CHILDREN'S SERVICES	0A35 A	1.0	111,467	1.0	115,833
ASSISTANT ADMINISTRATOR- FINANCIAL MANAGEMENT	0134 A	1.0	97,751	1.0	101,660
ASSISTANT CHIEF OF PLANNING	0137 A	0.0	0	1.0	101,720
ASSISTANT DIRECTOR FINANCIAL AND CONTRACT MANAGEMENT	0141 A	4.0	500,914	5.0	657,971
ASSISTANT DIRECTOR FOR ADMINISTRATIVE SERVICES	0143 A	2.0	265,980	2.0	285,365
ASSISTANT DIRECTOR II (DOH)	0143 A	1.0	157,998	1.0	164,170
ASSISTANT DIRECTOR OF HEALTH (COMMUNITY AFFAIRS)	0141 A	1.0	121,140	1.0	132,161
ASSISTANT DIRECTOR OF HEALTH (LEGAL SERVICES)	0142 A	1.0	126,156	1.0	137,375
ASSISTANT TO THE DIRECTOR (DHS)	0136 A	1.0	96,039	1.0	103,533
ASSOCIATE DIRECTOR (DHS) DIV OF COMMUNITY SERVICES	0143 A	1.0	157,943	1.0	164,114
ASSOCIATE DIRECTOR (DHS) DIV OF MANAGEMENT SERVICES	0146 A	1.0	158,098	1.0	164,423
ASSOCIATE DIRECTOR (DHS) PROGRAM OPERATIONS	0143 A	1.0	147,287	1.0	153,178
ASSOCIATE DIRECTOR (FINANCIAL MANAGEMENT)	0144 A	4.0	565,864	4.0	594,452
ASSOCIATE DIRECTOR II (BHDDH)	0144 A	1.0	160,838	1.0	167,270
CHIEF DATA ANALYST	0145 A	1.0	152,158	1.0	158,244
CHIEF ECONOMIC AND POLICY ANALYST	0142 A	2.0	274,059	2.0	284,805
CHIEF FAMILY HEALTH SYSTEMS	0137 A	6.0	642,809	6.0	677,966
CHIEF FINANCIAL OFFICER II	0144 A	2.0	292,597	2.0	316,216
CHIEF FINANCIAL OFFICER III	0147 A	3.0	510,874	3.0	535,111
CHIEF HEALTH PROGRAM EVALUATOR	0137 A	2.0	217,808	2.0	226,520

Personnel

Executive Office of Health and Human Services

Central Management

		FY 2025		FY 2026	
		FTE	Cost	FTE	Cost
Classified					
CHIEF HUMAN SERVICES BUSINESS OFFICER	0A33 A	4.0	437,043	4.0	460,584
CHIEF IMPLEMENTATION AIDE	0128 A	3.0	236,681	3.0	249,753
CHIEF MEDICAL CARE SPECIALIST	0A34 A	4.0	444,874	4.0	471,199
CHIEF OF LEGAL SERVICES	0141 A	8.0	1,017,352	8.0	1,095,734
CHIEF OF PHARMACY AND RELATED SERVICES	0138 A	1.0	112,650	1.0	117,156
CHIEF OF STRATEGIC PLANNING- MONITORING AND EVALUATION	0143 A	10.0	1,373,451	11.0	1,589,432
CHIEF PROGRAM DEVELOPMENT	0134 A	2.0	207,364	2.0	218,574
CHIEF PUBLIC AFFAIRS OFFICER	0137 A	2.0	213,012	2.0	226,522
CHIEF RATE SETTING ANALYST	0A35 A	1.0	128,316	1.0	133,120
COMMUNITY LIAISON/RELATIONS COORDINATOR (DCYF)	0135 A	1.0	99,599	1.0	105,428
CONSULTANT PUBLIC HEALTH NURSE	0926 A	4.0	641,600	4.0	672,006
CUSTOMER SERVICE SPECIALIST II	0319 A	1.0	54,468	1.0	57,566
CUSTOMER SERVICE SPECIALIST III	0323 A	1.0	62,136	1.0	66,196
DATA ANALYST II	0138 A	3.0	313,144	4.0	435,887
DATA ANALYST III	0142 A	3.0	384,086	3.0	411,797
DATA CONTROL CLERK	0315 A	1.0	56,963	1.0	59,241
DEPUTY CHIEF OF LEGAL SERVICES	0139 A	11.0	1,293,974	11.0	1,386,231
DEPUTY DIRECTOR DEPARTMENT OF HUMAN SERVICES	0148 A	2.0	325,586	2.0	350,966
DIRECTOR, INTERAGENCY OPERATIONS (EOHHSS)	0151 A	4.0	767,881	4.0	805,150
ECONOMIC AND POLICY ANALYST I	0130 A	1.0	101,639	1.0	105,655
EXECUTIVE ASSISTANT	0318 A	1.0	55,016	1.0	58,724
EXECUTIVE/ASSOCIATE DIRECTOR (BHDDH)	0146 A	1.0	144,618	1.0	156,581
HEALTH PROGRAM ADMINISTRATOR	0135 A	8.0	738,286	10.0	966,570
HEALTH RESEARCH PROJECT DIRECTOR	0136 A	0.0	0	1.0	98,254
HUMAN SERVICES BUSINESS OFFICER	0A22 A	1.0	58,855	1.0	63,149
IMPLEMENTATION DIRECTOR POLICY AND PROGRAMS	0140 A	7.0	827,873	7.0	875,762
INFORMATION SYSTEMS GROUP COORDINATOR (OIP)	0138 A	1.0	112,649	1.0	117,156
INTERDEPARTMENTAL PROJECT MANAGER	0139 A	14.0	1,581,663	17.0	2,007,665
INVESTIGATIVE AUDITOR	0133 A	1.0	83,084	0.0	0
JUNIOR HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A22 A	2.0	138,944	2.0	144,504
LEGAL ASSISTANT	0119 A	3.0	165,224	3.0	172,285
LEGAL COUNSEL (BHDDH)	0136 A	2.0	196,000	2.0	213,260
MEDICAID PROGRAM DIRECTOR	0152 A	1.0	192,133	1.0	201,479

Personnel

Executive Office of Health and Human Services

Central Management

		FY 2025		FY 2026	
		FTE	Cost	FTE	Cost
Classified					
MEDICAL CARE SPECIALIST	0A25 A	2.0	162,000	2.0	171,034
OFFICE MANAGER	0123 A	2.0	128,588	2.0	135,574
PRINCIPAL HUMAN SERVICES BUSINESS OFFICER	0A28 A	3.0	250,341	3.0	260,356
PRINCIPAL HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A30 A	5.0	509,566	5.0	532,987
PRINCIPAL PUBLIC HEALTH PROMOTION SPECIALIST	0333 A	1.0	111,162	1.0	115,515
PROGRAMMING SERVICES OFFICER	0131 A	2.0	163,767	3.0	263,210
PROGRAMMING SERVICES OFFICER	AB31 A	2.0	170,455	2.0	181,546
QUALITY CONTROL REVIEWER	0A24 A	3.0	208,052	3.0	216,372
SENIOR ECONOMIC AND POLICY ANALYST	0134 A	2.0	182,611	2.0	191,339
SENIOR HUMAN SERVICES POLICY AND SYSTEMS SPECIALIST	0A28 A	6.0	511,063	6.0	539,704
SENIOR LEGAL COUNSEL	0136 A	17.0	1,758,697	17.0	1,865,990
SENIOR MEDICAL CARE SPECIALIST	0A30 A	4.0	396,941	4.0	416,392
SENIOR PUBLIC HEALTH PROMOTION SPECIALIST	0131 A	1.0	78,942	1.0	85,090
SENIOR QUALITY CONTROL REVIEW SUPERVISOR	0A30 A	1.0	84,700	1.0	92,138
SENIOR SYSTEMS ANALYST	0A26 A	1.0	68,708	1.0	71,458
SOCIAL CASE WORKER II	0A24 A	3.0	204,664	3.0	215,736
SUPERVISOR FINANCIAL MANAGEMENT AND REPORTING	0135 A	1.0	101,372	1.0	105,428
ZFTE RECONCILIATION TO AUTHORIZATION (CLASSIFIED)	0000 A	0.0	0	(1.0)	0
Subtotal Classified		232.0	26,112,151	242.0	28,808,642
Unclassified					
SECRETARY OF HEALTH AND HUMAN SERVICES	0954KF	1.0	238,598	1.0	238,598
Subtotal Unclassified		1.0	238,598	1.0	238,598
Subtotal		233.0	26,350,749	243.0	29,047,240
Transfer Out			(509,965)		(542,241)
Transfer In			2,179,246		1,862,799
Overtime			105,000		54,600
Seasonal/Special Salaries/Wages			3,000		3,000
Turnover			(2,803,315)		(3,126,927)
Total Salaries			25,324,715		27,298,471

Personnel

Executive Office of Health and Human Services

Central Management

	FY 2025		FY 2026	
	FTE	Cost	FTE	Cost
Benefits				
FICA		1,974,395		2,140,746
Health Benefits		3,857,161		4,223,250
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Retirement		8,260,171		9,001,342
Subtotal		15,268,446		16,446,101
Total Salaries and Benefits	233.0	40,593,161	243.0	43,744,572
Cost Per FTE Position		174,220		180,019
Statewide Benefit Assessment		754,142		817,673
Payroll Costs	233.0	41,347,303	243.0	44,562,245
Purchased Services				
Clerical and Temporary Services		6,790,291		1,632,403
Information Technology		51,105,730		56,956,127
Legal Services		300,000		475,000
Management & Consultant Services		144,350,764		132,059,845
Medical Services		98,100		93,600
Other Contracts		12,214,610		5,893,403
Training and Educational Services		150,100		150,100
University and College Services		975,867		40,000
Subtotal		215,985,462		197,300,478
Total Personnel	233.0	257,332,765	243.0	241,862,723
Distribution by Source of Funds				
General Revenue	218.0	52,124,109	228.0	61,010,307
Federal Funds	9.0	182,515,253	9.0	174,670,831
Restricted Receipts	6.0	22,693,403	6.0	6,181,585
Total All Funds	233.0	257,332,765	243.0	241,862,723

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, which provides cost savings and improves 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].

	<i>Reporting Period: State Fiscal Year</i>				
<i>Frequency: Annual</i>	2022	2023	2024	2025	2026
Target	--	50%	50%	50%	50%
Actual	49.0%	48.6%	52.9%	--	--

Overdoses

Overdoses are a leading cause of accidental death in Rhode Island. Overdose rates are important to track as they inform 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 2024 data is preliminary, final data will be available until April 2025 .]

	<i>Reporting Period: State Fiscal Year</i>				
<i>Frequency: Annual</i>	2022	2023	2024	2025	2026
Target	--	1,075	914	876	--
Actual	1,204	1,069	796	--	--

Home and Community-Based Services (HCBS) Employee Retention Rate

The figures below represent the percentage of employees who worked at the same Home and Community-Based Services (HCBS) organization during the reporting quarter in the current year as the same reporting quarter the previous year. The denominator is the total number of employees who had a wage record with the Department of Labor and Training for the specific quarter for a given participating HCBS organization in the prior year. The numerator finds the total number of employees from the denominator who had a wage record for the specific quarter with the same organization in the current year. [Note: This measure was established in FY 2025 and historical targets are not available.]

	<i>Reporting Period: State Fiscal Year</i>				
<i>Frequency: Annual</i>	2022	2023	2024	2025	2026
Target	--	--	--	70	70
Actual	67.7	68.5	70.0	--	--

Program Summary

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. In the coming year, the Medicaid program's primary priorities include: renewal of the 1115 Waiver Demonstration, the planning for the sunset of the Medicaid-Medicare Program by Centers for Medicare and Medicaid Services (CMS), procurement of managed care services, MMIS modernization planning and implementation, CCBHC implementation, implementation of new rates for nursing homes and rates resulting from the OHIC rate review process, and implementation of several new requirements from CMS regarding access and managed care.

The Medicaid Program is currently organized to include three major units: (1) Managed Care and Contract Oversight: managed care oversight, children and adult behavioral health, compliance and contracting, (2) Program Services and Operations: fee-for-service program services, customer resolution, LTSS escalation, and contingency payments, clinical operations, and RIte Share; and (3) Medicaid Program Administration: systems, technology, finance, policy, and legal compliance 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	2023 Actuals	2024 Actuals	2025 Enacted Budget	2025 Revised Budget	2026 Recommended
Hospitals	224,166,726	368,914,236	367,138,873	379,038,871	395,626,496
Long-Term Care	419,476,286	519,268,664	615,003,676	649,500,000	726,552,554
Managed Care	971,485,566	1,007,366,165	1,070,082,576	1,058,499,999	1,126,226,291
Other Programs	42,539,490	38,804,918	33,415,280	36,235,621	27,100,454
Other Services	943,785,360	862,165,921	960,151,764	874,903,628	945,808,207
Pharmacy	79,054,752	93,655,558	96,500,000	93,800,000	100,400,000
Rhody Health Partners	453,937,832	469,678,151	559,042,501	546,896,373	591,731,548
Total Expenditures	3,134,446,012	3,359,853,613	3,701,334,670	3,638,874,492	3,913,445,550
Expenditures by Object					
Contract Professional Services	280,000	280,000	1,435,000	(795,000)	(795,000)
Operating Supplies and Expenses	(46,634)	375,080	0	0	0
Assistance and Grants	3,134,212,646	3,359,198,533	3,699,899,670	3,639,669,492	3,914,240,550
Subtotal: Operating	3,134,446,012	3,359,853,613	3,701,334,670	3,638,874,492	3,913,445,550
Total Expenditures	3,134,446,012	3,359,853,613	3,701,334,670	3,638,874,492	3,913,445,550
Expenditures by Source of Funds					
General Revenue	1,030,498,350	1,220,192,908	1,358,081,619	1,333,802,192	1,403,484,168
Federal Funds	2,085,071,555	2,123,667,241	2,333,444,377	2,291,661,898	2,501,539,322
Restricted Receipts	18,876,107	15,993,464	9,808,674	13,410,402	8,422,060
Total Expenditures	3,134,446,012	3,359,853,613	3,701,334,670	3,638,874,492	3,913,445,550

Performance Measures

Executive Office of Health and Human Services

Medical Assistance (Including Medicaid)

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.]

	<i>Reporting Period: State Fiscal Year</i>				
<i>Frequency: Annual</i>	2022	2023	2024	2025	2026
Target	--	100%	100%	100%	100%
Actual	35.0%	33.9%	61.0%	--	--

Access to quality care for Children in Early Intervention

The figures below represent the percentage of children enrolled in Early Intervention (EI) who completed their program individualized Family Service Plan (IFSP) or turned 3 years old. [Note: This measure was established in FY 2025 and historical targets are not available.]

	<i>Reporting Period: State Fiscal Year</i>				
<i>Frequency: Annual</i>	2022	2023	2024	2025	2026
Target	--	--	--	80%	80%
Actual	--	82.9%	79.0%	--	--

Passive Medicaid Renewals

The figures below represent the percent of renewals automatically renewed without requiring the individual to submit additional information or forms. [Note: This measure was established in FY 2025 and historical targets are not available.]

	<i>Reporting Period: State Fiscal Year</i>				
<i>Frequency: Annual</i>	2022	2023	2024	2025	2026
Target	--	--	--	65%	65%
Actual	--	72.2%	57.7%	--	--