

ARTICLE 10

RELATING TO HEALTH AND HUMAN SERVICES

SECTION 1. Section 23-13-22 of the General Laws in Chapter 23-13 entitled "Maternal and Child Health Services for Children with Special Health Care Needs" is hereby amended to read as follows:

23-13-22. Early intervention program for developmentally disabled infants.

(a) The ~~director~~ secretary of the ~~department of human services~~ executive office of health and human services (EOHHS) shall ensure that all developmentally disabled infants from birth to three (3) years of age shall be enrolled in the early intervention program. Beginning July 1, 2026, EOHHS and the department of elementary and secondary education shall create a plan to allow children to remain in early intervention until September 1 after their third birthday, as allowed by federal law 20 U.S.C. § 1435(c). Further, such plan shall include, but not be limited to, seeking any federal approvals necessary or desirable to implement the aforesaid policy. By January 1, 2028, EOHHS shall allow children who turn three (3) years old between May 1 and August 31 to remain in early intervention until September 1 after the child's third birthday. Regulations governing the delivery of services under this program, including eligibility criteria, shall be promulgated by the ~~department of human services~~ EOHHS, with the advice of the interagency coordinating council; provided, however, that all regulations promulgated by the department of health shall remain in full force and effect until the time they are replaced by regulations promulgated by the ~~department of human services~~ EOHHS. The regulations shall stipulate, at a minimum, the following provisions that are consistent with the intent of this chapter:

(1) The ~~director~~ secretary shall develop and maintain a procedure for the earliest possible identification and efficient referral of all developmentally disabled infants;

(2) The ~~director~~ secretary shall ensure that every infant identified and referred to this program is enrolled as soon as possible after birth; and further, that for infants placed on a waiting list for facility based group programming, an early intervention program shall be made available within a thirty (30) day period from the time a need is identified in the individual program plan;

(3) Unless parents refuse the service, the home visiting component of the program shall commence as soon as the infant has been identified as having a possible developmental disability;

(4) Any parent(s) who is/are dissatisfied with decisions or termination of service or with

1 practices and procedures of a particular agency or the ~~department of human services~~ [EOHHS](#) shall
2 notify the ~~director~~ [secretary](#) of the ~~department of human services~~ [EOHHS](#) in writing within thirty
3 (30) calendar days and the complaint shall be reviewed in accordance with ~~department of health~~
4 [EOHHS](#) policy and procedures, as amended, and the Administrative Procedures Act, chapter 35 of
5 title 42.

6 (5) An early intervention program for purposes of this section shall mean a comprehensive
7 array of educational, developmental, health, and social services provided on a calendar year basis
8 to eligible infants, children, and their families as specified in program regulations.

9 (b) Within ninety (90) days after October 1, 2004, an evaluation plan describing outcome
10 measures that document the program's successes and shortcomings from the previous fiscal year
11 shall be submitted to the speaker of the house of representatives, the president of the senate and the
12 house oversight committee and the governor and the interagency coordinating council.
13 Development of the plan shall be made in consultation with the entities with expertise in this area
14 and the interagency coordinating council. The plan shall include a memorandum of understanding
15 between the department of health, department of human services and the department of elementary
16 and secondary education that demonstrates coordination and continuity of early intervention
17 services among these departments.

18 (c) Within six (6) months after January 1, 2005 where prescribed outcomes documented in
19 the evaluation plan have not been accomplished the responsible agencies shall submit written
20 explanations for the shortfalls, together with their proposed remedies. The report shall also include
21 evaluation of the progress of the coordination efforts between the department of health and the
22 department of human services and the department of elementary and secondary education and the
23 interagency coordinating council and shall include any recommendations regarding modifications
24 of the reimbursement mechanisms of this chapter.

25 (d) Within twelve (12) months after August 1, 2005 a final report shall include the progress
26 of the coordination efforts between the department of health and the department of human services
27 and department of elementary and secondary education, interagency coordinating council and shall
28 include any recommendations regarding modifications to the comprehensive array of educational,
29 developmental, health and social services provided on a calendar year basis to eligible infants,
30 children and their families as specified in an early intervention system.

31 (e) All reports or documents required to be produced pursuant to 20 U.S.C. § 1471 et seq.,
32 shall be submitted to the speaker of the house, president of the senate and the chairpersons of the
33 appropriate house of representatives and senate oversight committees and the governor and the
34 interagency coordinating council. Adherence to such plans and reporting requirements, and budgets

1 and the timely achievement of goals contained therein shall be considered by the oversight
2 committees of the house of representatives and senate, among other relevant factors, in determining
3 appropriations or other systemic changes.

4 (f) In developing and implementing the plan to extend early intervention services beyond
5 age three (3) as provided in subsection (a) of this section, the secretary shall:

6 (1) Appoint and convene an implementation advisory committee to advise on the
7 implementation of the plan. The committee shall include:

8 (i) The individual designated by the state to serve as the coordinator for Part C in EOHHS;

9 (ii) The individual designated by the state to serve as the coordinator for Section 619 of the
10 Individuals with Disabilities Education Act (IDEA) in the department of elementary and secondary
11 education;

12 (iii) Not fewer than three (3) representatives of early intervention provider agencies;

13 (iv) Not fewer than two (2) representatives of local education agencies (“LEA”);

14 (v) Not fewer than two (2) advocates or experts with demonstrated expertise in early
15 intervention or early childhood special education; and

16 (vi) Not fewer than two (2) parents of children who have received early intervention
17 services and have transitioned to early childhood special education within the preceding three (3)
18 years.

19 (2) The implementation advisory committee shall:

20 (i) Meet for a period of at least one year following the official effective date of the extension
21 policy;

22 (ii) Identify strategies to reduce administrative burdens on families, early intervention
23 providers, LEA, and the state including, but not limited to, the use of federal funds earmarked for
24 early intervention extension to the extent allowable;

25 (iii) Earmark appropriate federal early intervention funding and develop shared resources
26 to support training and development for early intervention providers and LEA regarding the
27 extension option; and

28 (iv) Develop strategies to maximize providers’ ability to support the new over-three (3)
29 population during spring and summer months, including through the appropriate use of group-based
30 therapies while maintaining services necessary to meet individualized developmental needs.

31 (3) All meetings of the implementation advisory committee shall be open to the public and
32 conducted in accordance with chapter 46 of title 42.

33 (4) Not later than September 30, 2031, the secretary shall prepare and submit to the speaker
34 of the house of representatives and the president of the senate a report evaluating the

1 [implementation of the extension plan provided for in subsection \(a\) of this section. The report shall](#)
2 [include, but not be limited to: data regarding the number of families who elected to extend early](#)
3 [intervention services and the number of families who declined to extend early intervention services;](#)
4 [and an assessment of the impact of the extension provided for in subsection \(a\) of this section on](#)
5 [children, families, early intervention providers, LEA, and the state.](#)

6 SECTION 2. Section 27-18-64 of the General Laws in Chapter 27-18 entitled "Accident
7 and Sickness Insurance Policies" is hereby amended to read as follows:

8 **27-18-64. Coverage for early intervention services.**

9 (a) Every individual or group hospital or medical expense insurance policy or contract
10 providing coverage for dependent children, delivered or renewed in this state on or after July 1,
11 2004, shall include coverage of early intervention services which coverage shall take effect no later
12 than January 1, 2005. Such coverage shall not be subject to deductibles and coinsurance factors.
13 Any amount paid by an insurer under this section for a dependent child shall not be applied to any
14 annual or lifetime maximum benefit contained in the policy or contract. For the purpose of this
15 section, "early intervention services" means, but is not limited to, speech and language therapy,
16 occupational therapy, physical therapy, evaluation, case management, nutrition, service plan
17 development and review, nursing services, and assistive technology services and devices for:

18 [\(1\) ~~dependents~~ Dependents](#) from birth to age three (3) who are certified by the executive
19 office of health and human services ("[EOHHS](#)") as eligible for services under ~~part~~ [Part](#) C of the
20 Individuals with Disabilities Education Act (20 U.S.C. § 1471 et seq.); [or](#)

21 [\(2\) Dependents who are older than age three \(3\) and are eligible for services pursuant to §](#)
22 [23-13-22 and are certified by the EOHHS as eligible for services under Part C of the Individuals](#)
23 [with Disabilities Education Act \(20 U.S.C. § 1431 et seq.\).](#)

24 (b) Insurers shall reimburse certified, early intervention providers, who are designated as
25 such by the ~~executive office of health and human services~~ ([EOHHS](#)), for early intervention services
26 as defined in this section at rates of reimbursement equal to, or greater than, the prevailing
27 integrated state Medicaid rate for early intervention services as established by the ~~executive office~~
28 ~~of health and human services~~ ([EOHHS](#)).

29 (c) This section shall not apply to insurance coverage providing benefits for: (1) Hospital
30 confinement indemnity; (2) Disability income; (3) Accident only; (4) Long-term care; (5) Medicare
31 supplement; (6) Limited benefit health; (7) Specified disease indemnity; (8) Sickness or bodily
32 injury or death by accident or both; and (9) Other limited benefit policies.

33 SECTION 3. Section 27-19-55 of the General Laws in Chapter 27-19 entitled "Nonprofit
34 Hospital Service Corporations" is hereby amended to read as follows:

1 **27-19-55. Coverage for early intervention services.**

2 (a) Every individual or group hospital or medical expense insurance policy or contract
3 providing coverage for dependent children, delivered or renewed in this state on or after July 1,
4 2004, shall include coverage of early intervention services which coverage shall take effect no later
5 than January 1, 2005. The coverage shall be limited to a benefit of five thousand dollars (\$5,000)
6 per dependent child per policy or calendar year and shall not be subject to deductibles and
7 coinsurance factors. Any amount paid by an insurer under this section for a dependent child shall
8 not be applied to any annual or lifetime maximum benefit contained in the policy or contract. For
9 the purpose of this section, "early intervention services" means, but is not limited to: speech and
10 language therapy, occupational therapy, physical therapy, evaluation, case management, nutrition,
11 service plan development and review, nursing services, and assistive technology services and
12 devices for;

13 (1) ~~dependents~~ Dependents from birth to age three (3) who are certified by the ~~department~~
14 ~~of executive office of health and~~ human services ("EOHHS") as eligible for services under ~~part~~
15 Part C of the Individuals with Disabilities Education Act (20 U.S.C. § 1431 et seq.); or

16 (2) Dependents who are older than age three (3) and are eligible for services pursuant to §
17 23-13-22 and are certified by the EOHHS as eligible for services under Part C of the Individuals
18 with Disabilities Education Act (20 U.S.C. § 1431 et seq.).

19 (b) Subject to the annual limits provided in this section, insurers shall reimburse certified
20 early intervention providers, who are designated as such by the ~~department of human services~~
21 EOHHS, for early intervention services as defined in this section at rates of reimbursement equal
22 to or greater than the prevailing integrated state/Medicaid rate for early intervention services as
23 established by the ~~department of human services~~ EOHHS.

24 (c) This section shall not apply to insurance coverage providing benefits for: (1) Hospital
25 confinement indemnity; (2) Disability income; (3) Accident only; (4) Long-term care; (5) Medicare
26 supplement; (6) Limited benefit health; (7) Specified disease indemnity; (8) Sickness or bodily
27 injury or death by accident, or both; and (9) Other limited benefit policies.

28 SECTION 4. Section 27-20-50 of the General Laws in Chapter 27-20 entitled "Nonprofit
29 Medical Service Corporations" is hereby amended to read as follows:

30 **27-20-50. Coverage for early intervention services.**

31 (a) Every individual or group hospital or medical expense insurance policy or contract
32 providing coverage for dependent children, delivered or renewed in this state on or after July 1,
33 2004, shall include coverage of early intervention services which coverage shall take effect no later
34 than January 1, 2005. The coverage shall be limited to a benefit of five thousand dollars (\$5,000)

1 per dependent child per policy or calendar year and shall not be subject to deductibles and
2 coinsurance factors. Any amount paid by an insurer under this section for a dependent child shall
3 not be applied to any annual or lifetime maximum benefit contained in the policy or contract. For
4 the purpose of this section, “early intervention services” means, but is not limited to: speech and
5 language therapy; occupational therapy; physical therapy; evaluation; case management; nutrition;
6 service plan development and review; nursing services; and assistive technology services and
7 devices for:

8 (1) ~~dependents~~ Dependents from birth to age three (3) who are certified by the ~~department~~
9 ~~of executive office of health and~~ human services (“EOHHS”) as eligible for services under ~~part~~
10 Part C of the Individuals with Disabilities Education Act (20 U.S.C. § 1431 et seq.); or

11 (2) Dependents who are older than age three (3) and are eligible for services pursuant to §
12 23-13-22 and are certified by the EOHHS as eligible for services under Part C of the Individuals
13 with Disabilities Education Act (20 U.S.C. § 1431 et seq.).

14 (b) Subject to the annual limits provided in this section, insurers shall reimburse certified
15 early intervention providers, who are designated as such by the ~~department of human services~~
16 EOHHS, for early intervention services as defined in this section at rates of reimbursement equal
17 to or greater than the prevailing integrated state/Medicaid rate for early intervention services as
18 established by the ~~department of human services~~ EOHHS.

19 (c) This section shall not apply to insurance coverage providing benefits for: (1) Hospital
20 confinement indemnity; (2) Disability income; (3) Accident only; (4) Long-term care; (5) Medicare
21 supplement; (6) Limited benefit health; (7) Specified disease indemnity; (8) Sickness or bodily
22 injury or death by accident or both; and (9) Other limited benefit policies.

23 SECTION 5. Section 27-41-68 of the General Laws in Chapter 27-41 entitled "Health
24 Maintenance Organizations" is hereby amended to read as follows:

25 **27-41-68. Coverage for early intervention services.**

26 (a) Every individual or group hospital or medical expense insurance policy or contract
27 providing coverage for dependent children, delivered or renewed in this state on or after July 1,
28 2004, shall include coverage of early intervention services which coverage shall take effect no later
29 than January 1, 2005. The coverage shall be limited to a benefit of five thousand dollars (\$5,000)
30 per dependent child per policy or calendar year and shall not be subject to deductibles and
31 coinsurance factors. Any amount paid by an insurer under this section for a dependent child shall
32 not be applied to any annual or lifetime maximum benefit contained in the policy or contract. For
33 the purpose of this section, “early intervention services” means, but is not limited to: speech and
34 language therapy, occupational therapy, physical therapy, evaluation, case management, nutrition,

1 service plan development and review, nursing services, and assistive technology services and
2 devices for:

3 ~~(1) dependents~~ Dependents from birth to age three (3) who are certified by the ~~department~~
4 ~~of executive office of health and~~ human services (“EOHHS”) as eligible for services under ~~part~~
5 Part C of the Individuals with Disabilities Education Act (20 U.S.C. § 1431 et seq.); or

6 (2) Dependents who are older than age three (3) and are eligible for services pursuant to §
7 23-13-22 and are certified by the EOHHS as eligible for services under Part C of the Individuals
8 with Disabilities Education Act (20 U.S.C. § 1431 et seq.).

9 (b) Subject to the annual limits provided in this section, insurers shall reimburse certified
10 early intervention providers, who are designated as such by the ~~department of human services~~
11 EOHHS, for early intervention services as defined in this section at rates of reimbursement equal
12 to or greater than the prevailing integrated state/Medicaid rate for early intervention services as
13 established by the ~~department of human services~~ EOHHS.

14 (c) This section shall not apply to insurance coverage providing benefits for: (1) Hospital
15 confinement indemnity; (2) Disability income; (3) Accident only; (4) Long-term care; (5) Medicare
16 supplement; (6) Limited benefit health; (7) Specified disease indemnity; (8) Sickness or bodily
17 injury or death by accident or both; and (9) Other limited benefit policies.

18 SECTION 6. Sections 40-5.2-20 and 40-5.2-35 of the General Laws in Chapter 40-5.2
19 entitled "The Rhode Island Works Program" are hereby amended to read as follows:

20 **40-5.2-20. Childcare assistance — Families or assistance units eligible.**

21 (a) The department shall provide appropriate child care to every participant who is eligible
22 for cash assistance and who requires child care in order to meet the work requirements in
23 accordance with this chapter.

24 (b) **Low-income child care.** The department shall provide child care to all other working
25 families with incomes at or below ~~two hundred sixty-one percent (261%)~~ two hundred eighty-five
26 percent (285%) of the federal poverty level if, and to the extent, these other families require child
27 care in order to work at paid employment as defined in the department’s rules and regulations. The
28 department shall also provide child care to families with incomes below ~~two hundred sixty-one~~
29 ~~percent (261%)~~ two hundred eighty-five percent (285%) of the federal poverty level if, and to the
30 extent, these families require child care to participate on a short-term basis, as defined in the
31 department’s rules and regulations, in training, apprenticeship, internship, on-the-job training, work
32 experience, work immersion, or other job-readiness/job-attachment program sponsored or funded
33 by the human resource investment council (governor’s workforce board) or state agencies that are
34 part of the coordinated program system pursuant to § 42-102-11. Effective from January 1, 2021,

1 through June 30, 2022, the department shall also provide childcare assistance to families with
2 incomes below one hundred eighty percent (180%) of the federal poverty level when such
3 assistance is necessary for a member of these families to enroll or maintain enrollment in a Rhode
4 Island public institution of higher education provided that eligibility to receive funding is capped
5 when expenditures reach \$200,000 for this provision. Effective July 1, 2022 through December 31,
6 2024, the department shall also provide childcare assistance to families with incomes below two
7 hundred percent (200%) of the federal poverty level when such assistance is necessary for a
8 member of these families to enroll or maintain enrollment in a Rhode Island public institution of
9 higher education. Effective [from](#) January 1, 2025 [through December 31, 2026](#), the department shall
10 also provide childcare assistance to families with incomes below two hundred sixty-one percent
11 (261%) of the federal poverty level when such assistance is necessary for a member of these
12 families to enroll or maintain enrollment in a Rhode Island public institution of higher education.
13 [Effective on January 1, 2027, the department shall also provide childcare assistance to families](#)
14 [with incomes below two hundred eighty-five percent \(285%\) of the federal poverty level when such](#)
15 [assistance is necessary for a member of these families to enroll or maintain enrollment in a Rhode](#)
16 [Island public institution of higher education.](#)

17 [\(c\) The department shall also provide childcare assistance to families who meet the](#)
18 [requirements of the protective services category. For the purposes of this section, "protective](#)
19 [services category" means foster or kinship children served through the department of children,](#)
20 [youth and families.](#)

21 ~~(d)~~(d) No family/assistance unit shall be eligible for childcare assistance under this chapter
22 if the combined value of its liquid resources exceeds one million dollars (\$1,000,000), which
23 corresponds to the amount permitted by the federal government under the state plan and set forth
24 in the administrative rulemaking process by the department. Liquid resources are defined as any
25 interest(s) in property in the form of cash or other financial instruments or accounts that are readily
26 convertible to cash or cash equivalents. These include, but are not limited to: cash, bank, credit
27 union, or other financial institution savings, checking, and money market accounts; certificates of
28 deposit or other time deposits; stocks; bonds; mutual funds; and other similar financial instruments
29 or accounts. These do not include educational savings accounts, plans, or programs; retirement
30 accounts, plans, or programs; or accounts held jointly with another adult, not including a spouse.
31 The department is authorized to promulgate rules and regulations to determine the ownership and
32 source of the funds in the joint account.

33 ~~(e)~~(e) As a condition of eligibility for childcare assistance under this chapter, the parent or
34 caretaker relative of the family must consent to, and must cooperate with, the department in

1 establishing paternity, and in establishing and/or enforcing child support and medical support
2 orders for any children in the family receiving appropriate child care under this section in
3 accordance with the applicable sections of title 15, as amended, unless the parent or caretaker
4 relative is found to have good cause for refusing to comply with the requirements of this subsection.

5 ~~(e)~~(f) For purposes of this section, “appropriate child care” means child care, including
6 infant, toddler, preschool, nursery school, and school-age, that is provided by a person or
7 organization qualified, approved, and authorized to provide the care by the state agency or agencies
8 designated to make the determinations in accordance with the provisions set forth herein.

9 ~~(f)~~(g)(1) Families with incomes below one hundred percent (100%) of the applicable
10 federal poverty level guidelines shall be provided with free child care. Families with incomes
11 greater than one hundred percent (100%) and less than two hundred percent (200%) of the
12 applicable federal poverty guideline shall be required to pay for some portion of the child care they
13 receive, according to a sliding-fee scale adopted by the department in the department’s rules, not
14 to exceed seven percent (7%) of income as defined in subsection (h) of this section.

15 (2) Families who are receiving childcare assistance and who become ineligible for
16 childcare assistance as a result of their incomes exceeding ~~two hundred sixty one percent (261%)~~
17 two hundred eighty-five percent (285%) of the applicable federal poverty guidelines shall continue
18 to be eligible for childcare assistance until their incomes exceed three hundred percent (300%) of
19 the applicable federal poverty guidelines. To be eligible, the families must continue to pay for some
20 portion of the child care they receive, as indicated in a sliding-fee scale adopted in the department’s
21 rules, not to exceed seven percent (7%) of income as defined in subsection (h) of this section, and
22 in accordance with all other eligibility standards.

23 ~~(g)~~(h) In determining the type of child care to be provided to a family, the department shall
24 take into account the cost of available childcare options; the suitability of the type of care available
25 for the child; and the parent’s preference as to the type of child care.

26 ~~(h)~~(i) For purposes of this section, “income” for families receiving cash assistance under §
27 40-5.2-11 means gross, earned income and unearned income, subject to the income exclusions in
28 §§ 40-5.2-10(g)(2) and 40-5.2-10(g)(3), and income for other families shall mean gross, earned and
29 unearned income as determined by departmental regulations.

30 ~~(i)~~(j) The caseload estimating conference established by chapter 17 of title 35 shall forecast
31 the expenditures for child care in accordance with the provisions of § 35-17-1.

32 ~~(j)~~(k) In determining eligibility for childcare assistance for children of members of reserve
33 components called to active duty during a time of conflict, the department shall freeze the family
34 composition and the family income of the reserve component member as it was in the month prior

1 to the month of leaving for active duty. This shall continue until the individual is officially
2 discharged from active duty.

3 ~~(*)~~(L) Effective from August 1, 2023, through July 31, ~~2028~~2030, the department shall
4 provide funding for child care for eligible childcare educators, and childcare staff, who work at
5 least twenty (20) hours a week in licensed childcare centers and licensed family childcare homes
6 as defined in the department's rules and regulations. Eligibility is limited to qualifying childcare
7 educators and childcare staff with family incomes up to three hundred percent (300%) of the
8 applicable federal poverty guidelines and will have no copayments. Qualifying participants may
9 select the childcare center or family childcare home for their children. The department shall
10 promulgate regulations necessary to implement this section, and will collect applicant and
11 participant data to report estimated demand for state-funded child care for eligible childcare
12 educators and childcare staff. The report shall be due annually to the governor and the general
13 assembly by November 1.

14 **40-5.2-35. Child support pass-through.**

15 For any month in which a noncustodial parent makes a child support payment in the month
16 when due and the support is collected by the department of human services, for a child or children
17 receiving cash assistance pursuant to this chapter, the first ~~fifty dollars (\$50.00)~~ one hundred dollars
18 (\$100) of the child support payment, or the actual amount of the child support payment if the
19 payment is less than ~~fifty dollars (\$50.00)~~ one hundred dollars (\$100), shall be paid to the family
20 in which the child resides. ~~If more than one noncustodial parent makes a child support payment to~~
21 ~~children living in the same family, there shall only be one payment of fifty (\$50.00) paid to the~~
22 ~~family from the child support collected.~~ If more than one child resides in a Rhode Island Works
23 household, then any child support payment to children living in the same household receiving
24 Rhode Island Works would increase the payment to two hundred dollars (\$200), a maximum
25 payment of two hundred dollars (\$200) paid to the family from the child support collected per
26 month. This payment is known as the "pass through" payment and shall be sent to the family within
27 two (2) business days of the determination that the amount is due and owing and no later than
28 within two (2) business days of the end of the month in which the support was collected.

29 SECTION 7. Section 40-6.2-1.1 of the General Laws in Chapter 40-6.2 entitled "Child
30 Care — State Subsidies" is hereby amended to read as follows:

31 **40-6.2-1.1. Rates established.**

32 (a) Through June 30, 2015, subject to the payment limitations in subsection (c), the
33 maximum reimbursement rates to be paid by the departments of human services and children, youth
34 and families for licensed childcare centers and licensed family childcare providers shall be based

1 on the following schedule of the 75th percentile of the 2002 weekly market rates adjusted for the
2 average of the 75th percentile of the 2002 and the 2004 weekly market rates:

3	Licensed Childcare Centers	75th Percentile of Weekly Market Rate
4	Infant	\$182.00
5	Preschool	\$150.00
6	School-Age	\$135.00
7	Licensed Family Childcare Providers	75th Percentile of Weekly Market Rate
8	Infant	\$150.00
9	Preschool	\$150.00
10	School-Age	\$135.00

11 Effective July 1, 2015, subject to the payment limitations in subsection (c), the maximum
12 reimbursement rates to be paid by the departments of human services and children, youth and
13 families for licensed childcare centers and licensed family childcare providers shall be based on the
14 above schedule of the 75th percentile of the 2002 weekly market rates adjusted for the average of
15 the 75th percentile of the 2002 and the 2004 weekly market rates. These rates shall be increased by
16 ten dollars (\$10.00) per week for infant/toddler care provided by licensed family childcare
17 providers and license-exempt providers and then the rates for all providers for all age groups shall
18 be increased by three percent (3%). For the fiscal year ending June 30, 2018, licensed childcare
19 centers shall be reimbursed a maximum weekly rate of one hundred ninety-three dollars and sixty-
20 four cents (\$193.64) for infant/toddler care and one hundred sixty-one dollars and seventy-one
21 cents (\$161.71) for preschool-age children.

22 (b) Effective July 1, 2018, subject to the payment limitations in subsection (c), the
23 maximum infant/toddler and preschool-age reimbursement rates to be paid by the departments of
24 human services and children, youth and families for licensed childcare centers shall be
25 implemented in a tiered manner, reflective of the quality rating the provider has achieved within
26 the state's quality rating system outlined in § 42-12-23.1.

27 (1) For infant/toddler child care, tier one shall be reimbursed two and one-half percent
28 (2.5%) above the FY 2018 weekly amount, tier two shall be reimbursed five percent (5%) above
29 the FY 2018 weekly amount, tier three shall be reimbursed thirteen percent (13%) above the FY
30 2018 weekly amount, tier four shall be reimbursed twenty percent (20%) above the FY 2018 weekly
31 amount, and tier five shall be reimbursed thirty-three percent (33%) above the FY 2018 weekly
32 amount.

33 (2) For preschool reimbursement rates, tier one shall be reimbursed two and one-half
34 percent (2.5%) above the FY 2018 weekly amount, tier two shall be reimbursed five percent (5%)

1 above the FY 2018 weekly amount, tier three shall be reimbursed ten percent (10%) above the FY
2 2018 weekly amount, tier four shall be reimbursed thirteen percent (13%) above the FY 2018
3 weekly amount, and tier five shall be reimbursed twenty-one percent (21%) above the FY 2018
4 weekly amount.

5 (c) [Deleted by P.L. 2019, ch. 88, art. 13, § 4.]

6 (d) By June 30, 2004, and biennially through June 30, 2014, the department of labor and
7 training shall conduct an independent survey or certify an independent survey of the then-current
8 weekly market rates for child care in Rhode Island and shall forward the weekly market rate survey
9 to the department of human services. The next survey shall be conducted by June 30, 2016, and
10 triennially thereafter. The departments of human services and labor and training will jointly
11 determine the survey criteria including, but not limited to, rate categories and sub-categories.

12 (e) In order to expand the accessibility and availability of quality child care, the department
13 of human services is authorized to establish, by regulation, alternative or incentive rates of
14 reimbursement for quality enhancements, innovative or specialized child care, and alternative
15 methodologies of childcare delivery, including nontraditional delivery systems and collaborations.

16 (f) Effective January 1, 2007, all childcare providers have the option to be paid every two
17 (2) weeks and have the option of automatic direct deposit and/or electronic funds transfer of
18 reimbursement payments.

19 (g) Effective July 1, 2019, the maximum infant/toddler reimbursement rates to be paid by
20 the departments of human services and children, youth and families for licensed family childcare
21 providers shall be implemented in a tiered manner, reflective of the quality rating the provider has
22 achieved within the state's quality rating system outlined in § 42-12-23.1. Tier one shall be
23 reimbursed two percent (2%) above the prevailing base rate for step 1 and step 2 providers, three
24 percent (3%) above prevailing base rate for step 3 providers, and four percent (4%) above the
25 prevailing base rate for step 4 providers; tier two shall be reimbursed five percent (5%) above the
26 prevailing base rate; tier three shall be reimbursed eleven percent (11%) above the prevailing base
27 rate; tier four shall be reimbursed fourteen percent (14%) above the prevailing base rate; and tier
28 five shall be reimbursed twenty-three percent (23%) above the prevailing base rate.

29 (h) Through December 31, 2021, the maximum reimbursement rates paid by the
30 departments of human services, and children, youth and families to licensed childcare centers shall
31 be consistent with the enhanced emergency rates provided as of June 1, 2021, as follows:

	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
32 Infant/Toddler	\$257.54	\$257.54	\$257.54	\$257.54	\$273.00
33 Preschool Age	\$195.67	\$195.67	\$195.67	\$195.67	\$260.00

1 School Age \$200.00 \$200.00 \$200.00 \$200.00 \$245.00

2 The maximum reimbursement rates paid by the departments of human services, and
 3 children, youth and families to licensed family childcare providers shall be consistent with the
 4 enhanced emergency rates provided as of June 1, 2021, as follows:

5		Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
6	Infant/Toddler	\$224.43	\$224.43	\$224.43	\$224.43	\$224.43
7	Preschool Age	\$171.45	\$171.45	\$171.45	\$171.45	\$171.45
8	School Age	\$162.30	\$162.30	\$162.30	\$162.30	\$162.30

9 (i) Effective January 1, 2022, the maximum reimbursement rates to be paid by the
 10 departments of human services and children, youth and families for licensed childcare centers
 11 shall be implemented in a tiered manner, reflective of the quality rating the provider has achieved
 12 within the state’s quality rating system outlined in § 42-12-23.1. Maximum weekly rates shall be
 13 reimbursed as follows:

14 Licensed Childcare Centers

15		Tier One	Tier Two	Tier Three	Tier Four	Tier Five
16	Infant/Toddler	\$236.36	\$244.88	\$257.15	\$268.74	\$284.39
17	Preschool	\$207.51	\$212.27	\$218.45	\$223.50	\$231.39
18	School-Age	\$180.38	\$182.77	\$185.17	\$187.57	\$189.97

19 The maximum reimbursement rates for licensed family childcare providers paid by the
 20 departments of human services, and children, youth and families is determined through collective
 21 bargaining. The maximum reimbursement rates for infant/toddler and preschool age children paid
 22 to licensed family childcare providers by both departments is implemented in a tiered manner that
 23 reflects the quality rating the provider has achieved in accordance with § 42-12-23.1.

24 (j) Effective July 1, 2022, the maximum reimbursement rates to be paid by the departments
 25 of human services and children, youth and families for licensed childcare centers shall be
 26 implemented in a tiered manner, reflective of the quality rating the provider has achieved within
 27 the state’s quality rating system outlined in § 42-12-23.1. Maximum weekly rates shall be
 28 reimbursed as follows:

29 Licensed Childcare Centers

30		Tier One	Tier Two	Tier Three	Tier Four	Tier Five
31	Infant/Toddler	\$265	\$270	\$282	\$289	\$300
32	Preschool	\$225	\$235	\$243	\$250	\$260
33	School-Age	\$200	\$205	\$220	\$238	\$250

34 (k) Effective July 1, 2024, the maximum reimbursement rates to be paid by the departments

1 of human services and children, youth and families for licensed childcare centers shall be
 2 implemented in a tiered manner, reflective of the quality rating the provider has achieved within
 3 the state’s quality rating system outlined in § 42-12-23.1. Maximum weekly rates shall be
 4 reimbursed as follows:

5 Licensed Childcare Centers

6	Tier One	Tier Two	Tier Three	Tier Four	Tier Five
7 Infant/Toddler	\$278	\$284	\$296	\$303	\$315
8 Preschool	\$236	\$247	\$255	\$263	\$273
9 School-Age	\$210	\$215	\$231	\$250	\$263

10 (l) Effective July 1, 2025, the maximum reimbursement rates to be paid by the departments
 11 of human services and children, youth and families for licensed childcare centers shall be
 12 implemented in a tiered manner, reflective of the quality rating the provider has achieved within
 13 the state’s quality rating system outlined in § 42-12-23.1. Maximum weekly rates shall be
 14 reimbursed as follows:

15	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
16 Infant	\$334	\$341	\$355	\$364	\$378
17 Toddlers	\$278	\$284	\$296	\$303	\$315
18 Preschoolers	\$236	\$247	\$255	\$263	\$273
19 School Age	\$210	\$215	\$231	\$250	\$263

20 (m) Effective July 1, 2026, the maximum reimbursement rates to be paid by the
 21 departments of human services and children, youth and families for licensed childcare centers shall
 22 be implemented in a tiered manner, reflective of the quality rating the provider has achieved within
 23 the state's quality rating system outlined in § 42-12-23.1. Maximum weekly rates shall be
 24 reimbursed as follows:

25	<u>Tier 1</u>	<u>Tier 2</u>	<u>Tier 3</u>	<u>Tier 4</u>	<u>Tier 5</u>
26 <u>Infant</u>	<u>\$351</u>	<u>\$358</u>	<u>\$373</u>	<u>\$382</u>	<u>\$397</u>
27 <u>Toddlers</u>	<u>\$278</u>	<u>\$284</u>	<u>\$296</u>	<u>\$303</u>	<u>\$315</u>
28 <u>Preschoolers</u>	<u>\$236</u>	<u>\$247</u>	<u>\$255</u>	<u>\$263</u>	<u>\$273</u>
29 <u>School Age</u>	<u>\$210</u>	<u>\$215</u>	<u>\$231</u>	<u>\$250</u>	<u>\$263</u>

30 SECTION 8. Section 40.1-1-13 of the General Laws in Chapter 40.1-1 entitled
 31 “Department of Behavioral Healthcare, Developmental Disabilities and Hospitals” is hereby
 32 amended to read as follows:

33 **40.1-1-13. Powers and duties of the office.**

34 Notwithstanding any provision of the Rhode Island general laws to the contrary, the

1 department of behavioral healthcare, developmental disabilities and hospitals shall have the
2 following powers and duties:

3 (1) To establish and promulgate the overall plans, policies, objectives, and priorities for
4 state substance abuse education, prevention, and treatment; provided, however, that the director
5 shall obtain and consider input from all interested state departments and agencies prior to the
6 promulgation of any such plans or policies;

7 (2) Evaluate and monitor all state grants and contracts to local substance abuse service
8 providers;

9 (3) Develop, provide for, and coordinate the implementation of a comprehensive state plan
10 for substance abuse education, prevention, and treatment;

11 (4) Ensure the collection, analysis, and dissemination of information for planning and
12 evaluation of substance abuse services;

13 (5) Provide support, guidance, and technical assistance to individuals, local governments,
14 community service providers, public and private organizations in their substance abuse education,
15 prevention, and treatment activities;

16 (6) Confer with all interested department directors to coordinate the administration of state
17 programs and policies that directly affect substance abuse treatment and prevention;

18 (7) Seek and receive funds from the federal government and private sources in order to
19 further the purposes of this chapter;

20 (8) To act in conjunction with the executive office of health and human services as the
21 state's co-designated agency (42 U.S.C. § 300x-30(a)) for administering federal aid and for the
22 purposes of the calculation of the expenditures relative to the substance abuse block grant and
23 federal funding maintenance of effort. The department of behavioral healthcare, developmental
24 disabilities and hospitals, as the state's substance abuse authority, will have the sole responsibility
25 for the planning, policy and implementation efforts as it relates to the requirements set forth in
26 pertinent substance abuse laws and regulations including 42 U.S.C. § 300x-21 et seq.;

27 (9) Propose, review, and/or approve, as appropriate, proposals, policies, or plans involving
28 insurance and managed care systems for substance abuse services in Rhode Island;

29 (10) To enter into, in compliance with the provisions of chapter 2 of title 37, contractual
30 relationships and memoranda of agreement as necessary for the purposes of this chapter;

31 (11) To license facilities and programs for the care and treatment of substance abusers and
32 for the prevention of substance abuse, and provide the list of licensed chemical dependency
33 professionals (LCDP) and licensed chemical dependency clinical supervisors (LCDCS) (licensed
34 by the department of health pursuant to chapter 69 of title 5) for use by state agencies including,

1 but not limited to, the adjudication office of the department of transportation, the district court and
2 superior court and the division of probation and parole for referral of individuals requiring
3 substance use disorder treatment;

4 (12) To promulgate rules and regulations necessary to carry out the requirements of this
5 chapter;

6 (13) Perform other acts and exercise any other powers necessary or convenient to carry out
7 the intent and purposes of this chapter;

8 (14) To exercise the authority and responsibilities relating to education, prevention, and
9 treatment of substance abuse, as contained in, but not limited to, the following chapters: chapters
10 1.10, 10.1, and 28.2 of title 23; chapters 21.2 and 21.3 of title 16; chapter 50.1 of title 42 [repealed];
11 chapter 109 of title 42; chapter 69 of title 5; and § 35-4-18;

12 (15) To establish a Medicare Part D restricted-receipt account in the hospitals and
13 community rehabilitation services program and the Rhode Island state psychiatric hospital program
14 to receive and expend Medicare Part D reimbursements from pharmacy benefit providers consistent
15 with the purposes of this chapter;

16 (16) To establish a RICLAS group home operations restricted-receipt account in the
17 services for the developmentally disabled program to receive and expend rental income from
18 RICLAS group clients for group home-related expenditures, including food, utilities, community
19 activities, and the maintenance of group homes;

20 (17) To establish a non-Medicaid, third-party payor restricted-receipt account in the
21 hospitals and community rehabilitation services program to receive and expend reimbursement
22 from non-Medicaid, third-party payors to fund hospital patient services that are not Medicaid
23 eligible; and

24 (18) To certify any and all recovery housing facilities directly, or through a contracted
25 entity, as defined by department guidelines, which includes adherence to using National Alliance
26 for Recovery Residences (NARR) standards. In accordance with a schedule to be determined by
27 the department, all referrals from state agencies or state-funded facilities shall be to certified
28 houses, and only certified recovery housing facilities shall be eligible to receive state funding to
29 deliver recovery housing services. As of January 1, 2027, all recovery housing facilities shall be
30 registered with the department and shall adhere to the NARR certification process.

31 [\(19\) To establish, operate, and/or designate a RI 9-8-8 Suicide & Crisis Lifeline center or](#)
32 [centers to provide telephone, text and chat crisis intervention services and crisis care coordination](#)
33 [to individuals accessing the RI 9-8-8 Suicide & Crisis Lifeline.](#)

34 SECTION 9. Title 40.1 of the General Laws entitled “Behavioral Healthcare, Development

1 Disabilities and Hospitals” is hereby amended by adding thereto the following chapter:

2 CHAPTER 8.6

3 RHODE ISLAND 9-8-8 SUICIDE & CRISIS LIFELINE

4 **40.1-8.6-1. Definitions.**

5 As used in this chapter:

6 (1) "9-8-8 Suicide & Crisis Lifeline" or "lifeline" means the national network system
7 operated by the National Suicide Prevention Lifeline ("NSPL") or its successor entity, within which
8 the department-approved or department-operated RI 9-8-8 Suicide & Crisis Lifeline Center
9 participates.

10 (2) "Department" means the department of behavioral healthcare, developmental
11 disabilities and hospitals.

12 (3) "Director" means the director of the department of behavioral healthcare,
13 developmental disabilities and hospitals.

14 (4) "National Suicide Prevention Lifeline" ("NSPL") means the national network of local
15 crisis centers providing free and confidential emotional support to people in suicidal crisis or
16 emotional distress twenty-four (24) hours a day, seven (7) days a week. Membership as an NSPL
17 center requires nationally recognized certification which includes evidence-based training for all
18 staff and volunteers in the management of NSPL calls.

19 (5) "Rhode Island (RI) 9-8-8 state administrator" means the administrator designated by
20 the director of the department to manage the locally operated and funded center within the national
21 network of the 9-8-8 Suicide & Crisis Lifeline within Rhode Island.

22 (6) "Rhode Island (RI) 9-8-8 Suicide & Crisis Lifeline Center" or "lifeline center" means a
23 department-approved or department-operated center that participates in the National Suicide
24 Prevention Lifeline Network and responds to statewide or regional 9-8-8 contacts that is operated
25 by or under contract with the department.

26 **40.1-8.6-2. 9-8-8 Suicide and Crisis Lifeline.**

27 (a) The director is hereby authorized to establish, operate, promulgate regulations with
28 regard to, and/or designate a RI 9-8-8 Suicide & Crisis Lifeline center or centers to provide
29 telephone, text and chat crisis intervention services and crisis care coordination to individuals
30 accessing the RI 9-8-8 Suicide & Crisis Lifeline twenty-four (24) hours a day, seven (7) days a
31 week.

32 (b) The director shall have the authority to provide general oversight of the RI 9-8-8 Suicide
33 & Crisis Lifeline Center(s) established by this chapter.

34 (c) The RI 9-8-8 Suicide & Crisis Lifeline center(s) shall have an active agreement with

1 the administrator of the National Suicide Prevention Lifeline ("NSPL") maintained by SAMHSA,
2 or any successor entity, for participation within the network.

3 (d) The designated RI 9-8-8 Suicide & Crisis Lifeline center(s) shall meet SAMHSA and
4 NSPL or any successor entity's requirements and best practices guidelines for operational and
5 clinical standards for adults and children.

6 (e) The designated RI 9-8-8 Suicide & Crisis Lifeline center(s) shall provide and report
7 data and participate in evaluations and related quality improvement activities as required by the 9-
8 8-8 state administrator. The department shall provide the department of children, youth, and
9 families with data regarding utilization of RI 9-8-8 services by children, youth and their families,
10 consistent with NSPL requirements and state and federal confidentiality and privacy laws and
11 regulations.

12 (f) The designated RI 9-8-8 Suicide & Crisis Lifeline center(s) shall make referrals,
13 consistent with guidance and policies established by the NSPL or any successor entity, to follow-
14 up services for individuals who access the RI 9-8-8 Suicide & Crisis Lifeline.

15 (g) The director shall consult with the director of the department of children, youth, and
16 families prior to promulgating rules and regulations specific to RI 9-8-8 services for children,
17 youth, and their families and may require appropriate training regarding children services into a
18 contract with the 9-8-8 service center provider.

19 (h) Nothing in §§ 40.1-8.6-2, 40.1-8.6-3, or 40.1-8.6-4 shall be construed to restrict the
20 authority of the department of children, youth and family (DCYF) pursuant to chapters 72 and 72.1
21 of title 42.

22 **40.1-8.6-3. Funding of the 988 Suicide & Crisis Lifeline.**

23 (a) The director shall have the authority to expend any and all funds allocated to support
24 the operations of the RI 9-8-8 Suicide & Crisis Lifeline.

25 **40.1-8.6-4. Implementation.**

26 (a) The director shall designate the RI 9-8-8 state administrator. The RI 9-8-8 state
27 administrator shall be an employee of the department and shall serve at the pleasure of the director,
28 or shall be a contractor who has a contract with the department and shall serve for the period
29 designated in the contract and in accordance with the terms of such contract.

30 (b) All state agencies and/or departments shall provide to the department any and all data
31 and other information necessary for the department to comply with federal and/or state reporting
32 requirements with respect to the establishment and/or operation of the RI 9-8-8 Suicide & Crisis
33 Lifeline.

34 SECTION 10. Chapter 42-72 of the General Laws entitled "Department of Children, Youth

1 and Families" is hereby amended by adding thereto the following section:

2 **42-72-37. Application for social security benefits, supplemental security income, and**
3 **veterans benefits.**

4 (a) Definitions. For the purposes of this section:

5 (1) "Benefits" means social security benefits, supplemental security income, veterans
6 benefits, and railroad retirement benefits; and

7 (2) "Youth's attorney" and "guardian ad litem" means the person appointed as the youth's
8 attorney or guardian ad litem in the proceeding in which the department is appointed as the youth's
9 guardian or custodian.

10 (b) Application for benefits.

11 (1) Upon receiving temporary custody or guardianship of a youth in care, the department
12 shall assess the youth to determine whether the youth may be eligible for benefits. If, after the
13 assessment, the department determines that the youth may be eligible for benefits, the department
14 shall ensure that an application is filed on behalf of the youth. If the department determines the
15 youth is eligible for an ABLE account as authorized by Section 529A of the Internal Revenue Code
16 of 1986, the department shall conserve the youth's benefits including SSDI, inheritance, pensions,
17 life insurance, or other benefits in that account in a manner that appropriately avoids any federal
18 asset or resource limits, absent a compelling reason to conserve benefits in another manner. The
19 department shall prescribe by rules and regulations how it will review cases of youth in care at
20 regular intervals to determine whether the youth may have become eligible for benefits after the
21 initial assessment. The department shall make reasonable efforts to encourage youth in care over
22 the age of eighteen (18) who are likely eligible for benefits to cooperate with the application process
23 and to assist youth with the application process.

24 (2) When applying for benefits under this section for a youth in care the department shall
25 identify a representative payee in accordance with the requirements of 20 CFR 404.2021 and
26 416.621. If the department is seeking to be appointed as the youth's representative payee, the
27 department shall consider input, if provided, from the youth's attorney and guardian ad litem
28 regarding whether another representative payee, consistent with the requirements of 20 CFR
29 404.2021 and 416.621, is available. If the department serves as the representative payee for a youth
30 over the age of eighteen (18), the department shall request a court order.

31 (c) Notifications. The department shall immediately notify a youth over the age of sixteen
32 (16), the youth's attorney and guardian ad litem, and the youth's parent or legal guardian or another
33 responsible adult of:

34 (1) Any application for or any application to become representative payee for benefits on

1 behalf of a youth in care;

2 (2) Any communications from the Social Security Administration, the U.S. Department of
3 Veterans Affairs, or the Railroad Retirement Board pertaining to the acceptance or denial of
4 benefits or the selection of a representative payee; and

5 (3) Any appeal or other action requested by the department regarding an application for
6 benefits.

7 (d) Use of benefits. Consistent with federal law, when the department serves as the
8 representative payee for a youth receiving benefits and receives benefits on the youth's behalf, the
9 department shall:

10 (1) Beginning January 1, 2027, except as provided in a request for the disbursement of
11 funds, ensure that youth of any age in the care and custody of the department and until the
12 department no longer serves as the representative payee, the entirety of the youth's supplemental
13 security income benefits are conserved.

14 (2) Exercise discretion and seek advisement from the Office of the General Treasurer in
15 accordance with federal law and in the best interests of the youth when making decisions to use or
16 conserve the youth's benefits that are less than or not subject to asset or resource limits under federal
17 law, including using the benefits to address the youth's special needs and conserving the benefits
18 for the youth's reasonably foreseeable future needs.

19 (3) Appropriately monitor any federal asset or resource limits for the benefits and ensure
20 that the youth's best interest is served by using or conserving the benefits, including SSDI,
21 inheritance, pensions, life insurance, or other benefits in a way that avoids violating any federal
22 asset or resource limits that would affect the youth's eligibility to receive the benefits.

23 (e)(1) Annual accounting. The department shall provide an annual accounting to the youth's
24 attorney and guardian ad litem of how the youth's benefits have been used and conserved. In
25 addition, within ten (10) business days of a request from a youth or the youth's attorney and
26 guardian ad litem, the department shall provide an accounting to the youth of how the youth's
27 benefits have been used and conserved.

28 (2) Final accounting. When the department's guardianship of the youth is being terminated,
29 the department shall provide:

30 (i) A final accounting to the Social Security Administration, to the youth's attorney and
31 guardian ad litem, and to either the person or persons who will assume guardianship of the youth
32 or who is in the process of adopting the youth, if the youth is under eighteen (18), or to the youth,
33 if the youth is over eighteen (18); and

34 (ii) Information to the parent, guardian, or youth regarding how to apply to become the

1 representative payee. The department shall adopt rules and regulations to ensure that the
2 representative payee transitions occur in a timely and appropriate manner.

3 (f) Financial literacy. The department shall provide the youth with financial literacy
4 training and support, including specific information regarding the existence, availability, and use
5 of funds conserved for the youth in accordance with this subsection, beginning by age fourteen
6 (14). The literacy program and support services shall be developed in consultation with input from
7 the department's statewide speak advisory board and the office of the general treasurer.

8 (g) Adoption of rules and regulations. The department shall adopt rules and regulations to
9 implement the provisions of this section by October 1, 2026.

10 (h) Reporting. No later than January 1, 2029, the department shall file a report with the
11 general assembly providing the following information for state fiscal years 2027 and 2028 and
12 annually beginning January 1, 2030, for the preceding fiscal year:

13 (1) The number of youth entering care.

14 (2) The number of youth entering care receiving each of the following types of benefits:
15 social security benefits, supplemental security income, veterans benefits, and/or railroad retirement
16 benefits.

17 (3) The number of youth entering care for whom the department filed an application for
18 each of the following types of benefits: social security benefits, supplemental security income,
19 veterans benefits, and/or railroad retirement benefits.

20 (4) The number of youth entering care who were awarded each of the following types of
21 benefits based on an application filed by the department: social security benefits, supplemental
22 security income, veterans benefits, and/or railroad retirement benefits.

23 (i) Annually beginning January 1, 2029, the department shall file a report with the general
24 assembly with the following information regarding the preceding fiscal year:

25 (1) The number of conserved accounts established and maintained for youth in care;

26 (2) The average amount conserved by age group; and

27 (3) The total amount conserved by age group.

28 SECTION 11. Sections 42-160-3 and 42-160-5 of the General Laws in Chapter 42-160
29 entitled "Rhode Island Pay for Success Act" are hereby amended to read as follows:

30 **42-160-3. Annual reporting.**

31 The executive office, in collaboration with the Rhode Island Coalition to End
32 Homelessness or other qualified organization as determined by the executive office, shall provide
33 yearly progress reports to the general assembly beginning no later than January 30, 2022, and
34 annually thereafter until January 30, ~~2027~~ 2028. These reports will include recommendations on a

1 proposed structure for entering into pay for success contracts, for administering the program, and
2 for any and all matters related thereto that the executive office deems necessary to administer future
3 pay for success projects at the conclusion of the pilot program in ~~2026~~ 2027. As a condition of this
4 project, HUD requires that a third party conduct a transparent and rigorous evaluation of the
5 intervention to determine whether the outcomes have indeed achieved success. The evaluation
6 results will be reported yearly to the governor and general assembly.

7 **42-160-5. Pilot program established.**

8 There is established a ~~five-year (5)~~ six-year (6) pay-for-success pilot program to be
9 administered by the Rhode Island executive office of health and human services. The pilot will
10 follow the proposal outlined in the 2016 pay-for-success grant proposal to HUD and 2017
11 feasibility study. The pay-for-success project will provide a person-centered housing and
12 supportive services intervention (PSH) for one hundred twenty-five (125) persons in Rhode Island
13 experiencing homelessness who are high utilizers of the healthcare and justice systems. The pilot
14 program will leverage eight hundred seventy-five thousand dollars (\$875,000) of HUD/DOJ grant
15 funds. Contract agreements with the executive office of health and human services pursuant to this
16 chapter shall not exceed one million five hundred thousand dollars (\$1,500,000) per fiscal year or
17 six million dollars (\$6,000,000) in the aggregate over the ~~five (5)~~ six (6) years of the pilot program,
18 as determined by the department; provided, no agreements shall be entered by the department after
19 July 1, ~~2026~~ 2027, without further authorization by the general assembly.

20 SECTION 12. Section 6 of this article shall take effect January 1, 2027, except for the
21 provisions of §§ 42-5.2-20(c) and 45-5.2-20(I) which shall take effect July 1, 2026. The remainder
22 of this article shall take effect July 1, 2026.