

RHODE ISLAND KIDS COUNT

ONE UNION STATION PROVIDENCE, RHODE ISLAND 02903 401/351-9400 • 401/351-1758 (FAX) Testimony Re: House Bill 5205: Continuous Medicaid Eligibility for Children Under Age Three House Finance Committee April 24, 2025 Michaela Carroll, Policy Associate



Mr. Chairman and members of the Committee, thank you for the opportunity to provide testimony today. Rhode Island KIDS COUNT would like to voice its strong support for House Bill 5205. This bill would establish continuous Medicaid eligibility for children up to age three, preventing gaps in care and improving access to stable, high-quality and timely preventative and acute care for infants and toddlers in this critical period.

Rhode Island KIDS COUNT coordinates the RIght from the Start Campaign, a state policy coalition led by eight organizations to advance state policies and budget priorities that will help families with young children and this bill is one of the campaign's legislative priorities. Rhode Island KIDS COUNT would like to thank Representative Slater for sponsoring this bill and would like to thank the cosponsors, Representatives Diaz, Kislak, Potter, Cruz, and Cotter.

Stable health insurance coverage for babies and toddlers helps children receive high-quality and timely preventive health care, including vaccinations, physical and developmental screenings, routine care for illnesses, specialized health care when needed, and emergency health care services. Continuous coverage for Medicaid/RIte Care during infancy and the early childhood years will help prevent gaps in coverage and improve access to health care.

The American Association of Pediatrics recommends at least 11 well-child preventive pediatric health care visits from birth up to age three. These visits include routine health and developmental screenings to identify potential developmental delays and disabilities. They also screen for emerging vision, hearing, dental, and physical conditions as early as possible so that further evaluations, interventions, and treatments can be provided.

Babies and toddlers experience many short-term acute illnesses every year that may require a visit to their pediatrician for treatment, including respiratory viruses, ear infections, gastrointestinal illnesses, croup, conjunctivitis (pinkeye), fevers, and skin rashes. Their developing immune systems also mean that some illnesses are more dangerous for them than

they are for older children. Some children have chronic, long-term illnesses that require frequent health care visits for evaluations, diagnosis, treatment, and management, such as asthma.

More than half (52%) of Rhode Island children under the age of three were enrolled in RIte Care/ medical assistance at the end of 2024. Many of these children's families experience fluctuations in monthly income due to parents working seasonal or hourly jobs. While Rhode Island's current yearlong eligibility means they are less likely to lose coverage month-tomonth, yearly redetermination places administrative burdens on families, pediatricians, and the state, and can lead to children losing and regaining their coverage. Rhode Island ranked 2nd in the nation for children with health insurance in 2022 but dropped to 10th in the nation in 2023.

Continuous coverage prevents harmful short- and longer-term gaps in coverage when beneficiaries lose coverage and then re-enroll. This process – called administrative churn -- can occur for several reasons, including income or circumstance changes, and hinders access to timely and appropriate health care services. Continuous coverage also promotes health equity by ensuring consistent access to health care for low-income children, particularly Children of Color, who experience disproportionate rates of health disparities and administrative churn.

Ensuring that young children maintain their coverage improves health status and well-being in the short and longer-term and supports school readiness. Kids who don't get the right care at the right time are less likely to enter school ready to learn. Untreated vision, hearing, mental or behavioral health issues can stand in the way of thriving in the classroom. It also protects children and their families from large medical bills and medical debt and reduces additional burdens, including the cost of emergency room care, which is sometimes the only option to access routine health care for children who do not have health insurance coverage.

Continuous coverage also drives more efficient health care spending, by reducing administrative costs associated with recertification and unnecessary disensollments and reensollments.

There is a national movement towards multi-year continuous coverage for young children. Oregon became the first state to receive federal approval to provide continuous Medicaid coverage for young children from birth up to age 6 in Sept 2022. As of January 2025, eight states (including Oregon, Washington, New Mexico, Hawaii, Minnesota, New York, North Carolina, and Pennsylvania) and the District of Columbia provide continuous Medicaid coverage for young children up to age six. Colorado provides continuous

Medicaid coverage up to age three. Three other states (California, Ohio, and Illinois) have taken legislative or administrative action to provide young children with multi-year continuous Medicaid coverage.

Rhode Island has been a leader in health insurance coverage for children and we thank you for the leadership that the General Assembly has shown by prioritizing the health of kids, especially their access to care. Thank you for the opportunity to testify today.

Continuous Medicaid Coverage for Infants and Toddlers

H-5205 (Slater) & S-0254 (Lauria)

Stable health insurance coverage for infants and toddlers helps ensure access to high-quality and timely preventive health care, including vaccinations and screenings, routine care for illnesses, specialized health care when needed, and emergency health care services. Continuous eligibility for Medicaid/RIte Care during the first three years of life will help prevent gaps in coverage and improve access to health care.



Importance of Medicaid/RIte Care Health Coverage for Young Children in Rhode Island

- In Rhode Island, 52% of children under the age of three were enrolled in Rite Care/Medical Assistance at the end of 2024.
- Routine health and developmental screenings occur over 11 well-child preventive pediatric health care visits from birth up to age 3 to identify emerging health conditions and potential developmental delays and disabilities as early as possible so that further appropriate evaluations, interventions, and treatments can be provided.
- There are over 25 recommended disease-preventing vaccinations for children under age 3. Children need to be fully vaccinated to prevent serious illness and to register for kindergarten.
- Infants and toddlers do not have fully developed immune systems and often experience many short-term illnesses per year that can require a health care visit and treatment, including ear infections, pink eye, gastrointestinal illnesses, respiratory illnesses, and hand-foot-and-mouth-disease.
- Some young children have chronic, long-term illnesses that require frequent health care visits for evaluations, diagnosis, treatment, and management of these chronic conditions.

Benefits of Continuous Coverage for Young Children

- Reduces administrative burdens for parents, pediatricians, and for the state as many children lose and then regain Medicaid coverage due to paperwork problems.
- Prevents harmful short- and longer-term gaps in coverage for infants and toddlers.
- **Promotes health equity** by ensuring consistent access to health care for infants and toddlers in low-income families who experience disproportionate rates of health disparities, particularly Children of Color.

National Movement towards Multi-year Continuous Coverage for Young Children

All states must provide at least 12 months of continuous Medicaid coverage for children 0-18 once they are determined eligible. As of 2025, there are 8 states (Oregon, Washington, New Mexico, Hawaii, Minnesota, New York, North Carolina, and Pennsylvania) and the District of Columbia that provide continuous Medicaid coverage for young children up to age 6. Colorado provides continuous Medicaid coverage up to age 3. In addition, 3 other states (California, Ohio, and Illinois) have taken legislative or administrative action to provide young children with multi-year continuous Medicaid coverage.

