

Monday's meeting

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Good afternoon

In preparation for Monday meeting.

H5527 – Children's Mobile Response and Stabilization Services Act

Establishes a 24/7 statewide crisis response system tailored for children and families.

Why It Matters:

- **Cost-Efficient Care:** MRSS costs just \$135/day with an average 35-day stay (~\$4,725), compared to \$1,300/day for residential care or \$2,500+ for psychiatric hospitalization.
- **Proven Results:** The Tides-FSRI MRSS model diverted over 90% of children from hospitalization and saved \$2.2 million in ER costs between 2022 and 2025.
- **Federal Law:** Medicaid's EPSDT benefit requires states to provide medically necessary services like MRSS for youth. Rhode Island must comply or risk federal funding. This service is part of the consent decree. A patchwork system under CCBHCs places the state at legal and financial risk for noncompliance due to uneven access and unclear accountability.
- **Streamlines Access:** As MRSS is presently embedded in CCBHC, individuals must be served within their catchment area and there is little to no flexibility on which MRSS agency their family may work with. The proposed statewide system will allow families freedom of choice and flexibility between agencies providing MRSS to serve those in crisis.

Funding Note: States that lead in MRSS have carved out dedicated infrastructure and braided funding—typically involving Medicaid waivers, general funds, and insurance. Rhode Island needs a sustainable fiscal model with a dedicated funding stream and clear oversight—not one that assumes existing CCBHC capacity is sufficient. No states have been successful in funding MRSS through CCBHC and/or third-party reimbursement alone.

H5718 – Preserve DCYF Authority Over Children's Behavioral Health

Strengthens DCYF's leadership role to ensure child-centered, coordinated care.