

May 22, 2025

Rhode Island State House
House Committee on Finance

Re: H-6190, RIPIN Dual Ombudsman Program

Dear Chair Abney and Members of the House Committee on Finance:

RIPIN writes in support of H-6190, a resolution that would make an appropriation to sustain the work of the RIPIN Dual Ombudsman program. **The Governor's proposed FY2026 Medicaid budget eliminates a RIPIN program that provides assistance to Medicare-Medicaid "duals" as of December 31, 2025.** This program, the RIPIN Duals Ombudsman, helps about 400 duals every year navigate complex coverage challenges, and has **saved Rhode Islanders more than \$2 million in health care costs since its inception in 2016** (and \$343,189 during FY24), and enjoys a 92% satisfaction rating from clients.

The program operates on a total annual budget of \$236,844, which over the past couple years has been funded 50% with general revenue and 50% with Medicaid administrative matching funds. There is a federal requirement in place that requires the State to fund the program through December 31, 2025, and the Governor's budget includes a half fiscal year of funding (\$118,422 all-funds) to comply with that requirement. In order to preserve the program at current capacity through the end of FY2026, **H-6190 authorizes an additional allocation of \$59,211 in general revenue** over and above the Governor's proposed funding level (\$118,422 all-funds). This would allow the RIPIN Dual Ombudsman program to continue operating past the end of the calendar year.

Medicare-Medicaid duals are an **extremely high needs population with complex medical needs and complex coverage options** to navigate. In order to have Medicare, they must be older than 65 or disabled. In order to have Medicaid as well, they must also be very low income and have very low resources. This population – **both poor and elderly or disabled** – is among the highest cost and highest medical needs population nationally, has disproportionately higher need for language support, and frequently has limited (if any) access to technology; altogether, this means this population is particularly dependent on independent support to be able to access needed care.

Duals' coverage options, at the intersection of Medicare and Medicaid, are also complex and often poorly coordinated. Rhode Island is home to about 40,000 duals, of which about 11,500 are enrolled in NHPRI's fully-integrated Integrity product. This program has been very successful, but its federal authorization expires December 31, 2025. Another roughly 13,000 duals are enrolled in Medicare duals special needs plans ("D-SNPs"), approximately 350 are enrolled in "PACE," the Program for All-Inclusive Care for the Elderly, and the remaining 16,000 have original Medicare or a traditional Medicare Advantage plan. The 29,000 duals who are not in Integrity or PACE all have Medicaid fee-for-service coverage secondary to their Medicare.

This already-confusing situation is also expected to change in 2026, making this an especially inopportune time to eliminate an effective assistance program in the community. December 2025 marks the end of the NHPRI Integrity program. Under the State's Medicaid MCO procurement plans, this was also supposed to mark the end of D-SNP plans in Rhode





Island as they currently exist. With that procurement cancelled, it is unclear what options duals will have in 2026, and also unclear when (and if) the State will transition to the coverage system for duals envisioned in the procurement. With so much potentially changing for this medically-complex population with complicated coverage options, this should be a time to ensure that effective assistance remains available to Rhode Islanders.

Thank you very much for your considering of this testimony. We have also enclosed a one-page fact sheet on the program and its budget situation. Please feel to reach out anytime if we can be of further assistance.

Sincerely,

/s/

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