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**Testimony on Governor's FY 2027, FY 2026 Revised and Capital Budgets –
Department of Health
House Finance Committee – Subcommittee on Human Services
March 24, 2026**

Good afternoon, Chairwoman Tanzi and members of the House Finance Committee, Subcommittee on Human Services. My name is Elizabeth Burke Bryant, and I am a Professor of the Practice of Health Services, Policy and Practice at the Brown University School of Public Health where I am based at the Hassenfeld Child Health Innovation Institute. I am providing this testimony in my individual capacity.

I am writing to **strongly urge the Committee to address two critical funding gaps in the FY27 proposed budget for the Rhode Island Department of Health**. Without these revisions, Rhode Island's successful Pedi-PRN children's behavioral health program won't have the funds to continue, and Rhode Island will leave millions of federal matching funds for Family Home Visiting on the table.

Pedi-PRN: The proposed FY27 budget provides **zero funding** for the continuation of the state's **Pediatric Psychiatry Resource Network (Pedi-PRN) program, that has a track record of success in providing same-day child psych telehealth consultations to pediatric practices so that children and youth presenting with mental and behavioral health conditions and their families can get immediate help with referrals to needed mental health services**.

It was good to see that the RIDOH budget for FY 27 included funding for the companion Psychiatric Resource Network Program – MOMS PRN that provides behavioral health teleconsultations for OBGYN practices, **but it left out Pedi-PRN despite its track record of success and the major need for child psych support for pediatric practices – especially during the children and youth behavioral health crisis that our state and nation are facing**.

I respectfully urge this Sub-Committee and the Finance Committee to include \$630,000 for FY 27 to keep the Pedi-PRN program operating. It is cost effective because it helps primary care pediatricians who are already overburdened to help to prevent escalations of mental health conditions that without help could escalate to major crises requiring costly interventions, including in-patient hospitalization.

PediPRN (Pediatric Psychiatry Resource Network), operated by Bradley Hospital, offers pediatric primary care providers same-day mental health phone consultations with specialists who provide patient-centered information, referrals and support for children's behavioral health needs. **As of March 2026, Pedi-PRN has been used by 465 pediatric primary care practices across the state to serve 3,001 pediatric patients and their**

families with timely behavioral health care consultation. This program works, is cost effective, and it should continue.

Family Home Visiting: The proposed FY27 proposed budget fails to include a minimum of \$535,000 in state general funds for home visiting. This state investment is required to draw down \$1.6 million in new federal funding for the Maternal, Infant and Early Childhood Home Visiting (MIECVH) program. Failing to allocate these funds means Rhode Island is leaving \$1.6 million in federal funds on the table that are essential resources to provide young children and their parents with services to help ensure healthy development and positive outcomes.

Rhode Island is one of only a handful of states in the nation that has not made a state match for the Maternal, Infant and Early Childhood Home Visiting Program and has forfeited significant federal funds. As a result, non-profit agencies that implement these vital programs struggle to pay staff sufficient wages – decreasing enrollment options for families with babies and young children.

Conclusion:

I respectfully urge this Sub-Committee to provide \$630,000 in state funds for Pedi-PRN for FY27.

And I urge this Sub-Committee to provide \$535,000 in state funds to draw down \$1.6 million in federal funds for the Maternal, Infant and Early Childhood Home Visiting Program.

Thank you for your leadership on behalf of children and families.