



March 25, 2026

The Honorable Teresa Tanzi
Chair, House Finance Subcommittee on Human Services
State of Rhode Island General Assembly
82 Smith Street
Providence, RI 02903

Re: Support of FY27 EOHHS Budget, and Comments Regarding Medicaid Transformation for DCYF Services

Dear Chair Tanzi and the members of the House Finance Subcommittee on Human Services,

Thank you for the opportunity to submit testimony in support of the Rhode Island Executive Office of Health and Human Services (EOHHS) budget, which addresses and supports the complex health and human service environment in Rhode Island. I am writing to express overall support, and to provide insight into the Medicaid Transformation project underway with the Rhode Island Department of Children, Youth, and Families (DCYF) and the EOHHS Medicaid Office.

My name is Benjamin Weiner, and I am the Chief Operating Officer/Acting Chief Financial Officer at Family Service of Rhode Island (FSRI), and in that capacity, I also serve as the Chair of the Rhode Island Coalition for Children and Families (RICCF) Medicaid Transformation committee. FSRI is a leading Rhode Island nonprofit provider of behavioral health, educational, and social services. Additionally, we are a Certified Community Behavioral Health Clinic (CCBHC), and a significant provider of child welfare-related services for DCYF such as behavioral health, parent education and training, visitation, foster care, and residential services.

As a provider of essential services to children and families associated with DCYF, we recognize the need for fair and consistent payment practices for all services, as well as for the need for Rhode Island to maximize federal reimbursement for these essential services. We fully support Rhode Island Medicaid and DCYF in their Medicaid Transformation process and stand ready to assist with implementation.

While supporting this process, we are writing to provide critical insight and recommendations regarding Rhode Island's overall preparedness for this transition. Specifically, we are concerned that a significant number of Rhode Island providers are unprepared for this transition, and that we as a state collectively lack critical infrastructure to ensure success and continuity of services. For example, several Rhode Island providers



are not yet enrolled Medicaid providers, nor do they all have the critical software needed to successfully bill. These providers perform critical and essential state functions: namely, caring for the children in the care and custody of DCYF. Our state cannot afford to lose these critical services, and it is important that we support all current providers in the transition process.

Critical issues regarding the payment method, structure, and the division of financial responsibility between Medicaid and general revenue remain unresolved. Additionally, this transformation will have a significant impact on the overall service system. Payment for services will now be tied to insurance status, which may cause significant cash flow and system-related changes. These changes are not all bad, but they take extensive planning and implementation. With this in mind, we respectfully suggest delaying implementation until 7/1/2027. Further, we respectfully request that EOHHS adds sufficient funds to its budget to fund a minimum of \$50,000 (fifty-thousand dollars) per provider to support successful and effective implementation of Medicaid Transformation. While not all providers will need the full amount, and perhaps some will need more, this amount would be a reasonable set aside to ensure that billing, financial, and administrative systems at each provider are sufficient to be successful through this transition.

Finally, we recommend that the EOHHS budget includes sufficient funding for the Rhode Island Medicaid Office to provide direct and active technical support to providers. Whether this is through hiring a consultant or another approach, ensuring that EOHHS has technical, training, and implementation support is essential. Overall, between funding for provider readiness, and for the RI Medicaid Office, we recommend a minimum of \$3,000,000 (three million dollars) be added to the EOHHS budget.

For reference and in comparison, we urge Rhode Island to consider the amount of funding that was provided to CCBHC during readiness and implementation. While this project is different in scope, it is equally essential and for some providers, there is equally far to go to ensure preparedness and sustainability.

We appreciate the opportunity to provide this testimony regarding the EOHHS budget, and we stand ready to assist in ensuring a successful Medicaid Transformation process.

Sincerely,

Benjamin Weiner
Chief Operating Officer/ Acting Chief Financial Officer
Family Service of Rhode Island