



**Testimony Re:** H-7127, RI Executive Office of Health & Human Services FY27 Budget – Medicaid Rate Increases for Early Intervention and Family Home Visiting  
**House Finance Committee**  
**March 25, 2026**  
**Leanne Barrett, Director of Early Childhood Policy & Strategy**



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 help babies and young children get off to the right start.

Both Rhode Island KIDS COUNT and the Right from the Start Campaign **strongly support the Medicaid rate increases for Early Intervention and Family Home Visiting programs at 50% of the OHIC recommendations** proposed in the RI Executive Office of Health and Human Services FY27 budget proposal. **We encourage the General Assembly to fund 100% of the OHIC recommendation.**

Since 2021, **due to staffing and financing challenges**, the number of Rhode Island families participating in the First Connections rapid-response home visiting program has **dropped by 51%** and the number of families participating in the evidence-based programs (Healthy Families and Parents as Teachers) which improve long-term outcomes for both mothers and babies **dropped by 32%**. In 2024-2025, the staff turnover rate for home visiting programs in Rhode Island was 28%, significantly higher than the national rate of 10%.

Thank you for this opportunity to testify. We urge the General Assembly to allocate sufficient funds in the FY27 budget and beyond to fund Early Intervention and Family Home Visiting programs so they can attract and retain a qualified and consistent workforce. We need to make investments to sustain strong EI and family home visiting systems with an urgent need to stabilize and restore access to family home visiting.

**Fund Early Intervention 2026**  
**H-7127 FY27 EOHHS Budget**  
**H-7586 (Cotter) & S-2785 (Valverde)**



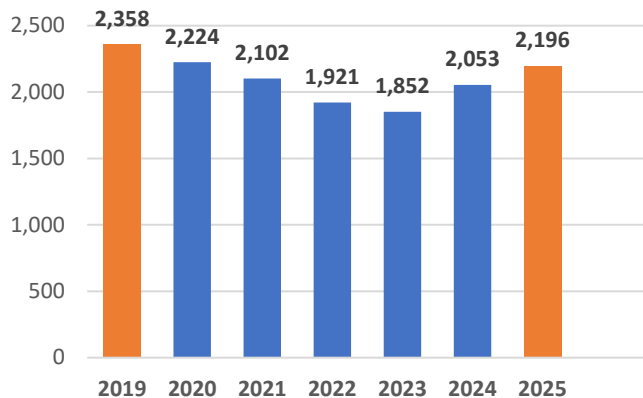
**Right from the Start**

Rhode Island’s Early Intervention program provides special education services to infants and toddlers who have **developmental delays or disabilities**. Early Intervention is required under the federal *Individuals with Disabilities Education Act (IDEA)*.

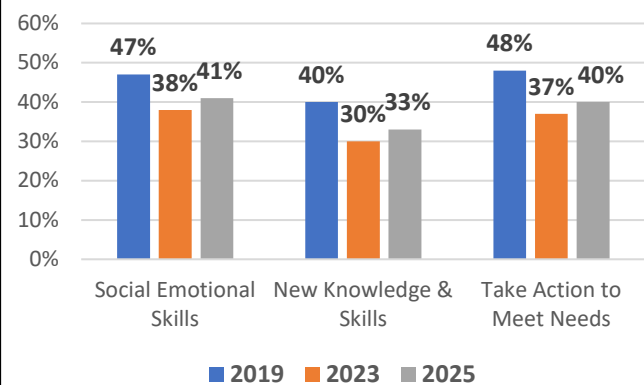
Researchers have found that **about one-third of infants and toddlers who received high-quality Early Intervention services no longer had a developmental delay, disability, or special education need** in kindergarten.

**Rhode Island’s Early Intervention program experienced major financial and staffing problems from 2020-2024 following 20 years of frozen Medicaid rates.** In 2021, the state established a waiting list, limiting access for infants and toddlers with developmental delays and disabilities. Since then, the General Assembly enacted two rate increases and allocated temporary *ARPA* funding to Early Intervention. As of 2025, the Rhode Island Early Intervention program **enrollment and child outcomes have rebounded but remain below 2019 levels**. The state’s Early Intervention program still has a federal designation of “needs assistance.” As of January 2026, there were 134 infants and toddlers who had been waiting more than 45 days for services. The average wait time was 102.3 days for this group of children.

**RI Early Intervention Enrollment, June 30th Census, 2019-2025**



**Child Outcomes, RI Early Intervention, 2019, 2023, 2025**



**Invest in Early Intervention 2026:**

- 1) Governor McKee’s FY27 budget proposal** includes a Medicaid rate increase for Early Intervention at 50% of the OHIC recommended rate increase.
- 2) Rep. Cotter’s and Sen. Valverde’s bill** proposes a Medicaid rate increase at 100% of the OHIC recommended rate increase, the first scheduled rate increase based on a new statutory rate review. The bill also requires the state to continue updating the [Early Intervention data dashboard](#) with information about the waiting list and staff vacancies and updates the Early Intervention statute with current information.

**Fund Family Home Visiting 2026**  
H-7127 FY27 DOH & EOHHS Budgets  
[H-7794](#) (Giraldo) & [S-2845](#) (Valverde)



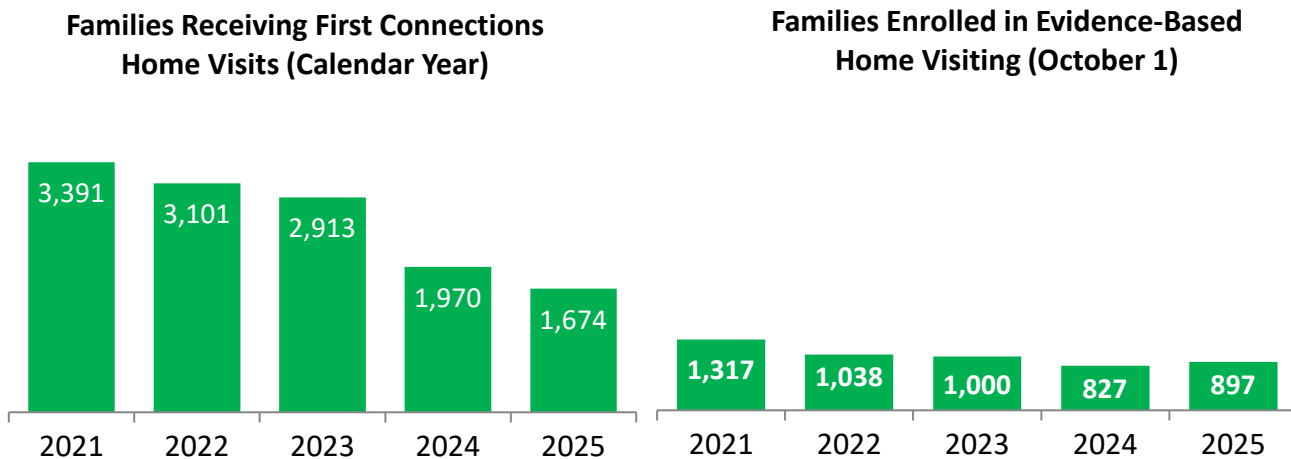
**Right from the Start**

**Rhode Island's Evidence-Based Family Home Visiting programs -- Healthy Families America and Parents as Teachers**

-- are multi-year, relationship-based interventions designed to help pregnant and parenting families with high needs navigate the challenges of raising babies and young children. These programs follow rigorous research models and produce improved outcomes for children and families including significant reductions in child maltreatment and language delays; and improvements in maternal mental health, parental education/employment, and school readiness.

**First Connections is Rhode Island's frontline, rapid-response home visiting service for families with newborns statewide.** It is designed to identify babies' and families' needs as early as possible and connect them with services, including maternal mental health services, WIC, Early Intervention, and comprehensive evidence-based family home visiting programs.

**Financing & Staffing Problems Mean Fewer Rhode Island Babies & Families Get Help**



Since 2021, the number of families served by **First Connections** has dropped by 51% and the number of families enrolled in a multi-year, evidence-based program has dropped by 32% due to inadequate staffing and financing.

**In 2026, Rhode Island Policymakers Should Invest in Family Home Visiting:**

1. **Increase the Medicaid rates to OHIC recommendations** for First Connections, Healthy Families America, and Parents as Teachers family home visiting programs to ensure staffing and financing challenges do not get worse.
2. **Fund the minimum state home visiting match @\$535,000 to bring in \$1.6 million in new federal Maternal Infant and Early Childhood Home Visiting (MIECHV) funds** to improve access to family home visiting. Rhode Island is one of only a handful of states that has forfeited federal funds.
3. **Pass Rep. Giraldo's and Senator Valverde's bill** to establish First Connections in statute, implement Medicaid rate increases, meet the minimum state match, and update state reporting requirements.

<b>City/Town</b>	<b># Received First Connections Visit in 2025</b>	<b># Enrolled in Evidence-Based Home Visiting on October 1, 2025</b>
<b>Barrington</b>	<b>9</b>	<b>7</b>
<b>Bristol</b>	<b>15</b>	<b>3</b>
<b>Burrillville</b>	<b>6</b>	<b>0</b>
<b>Central Falls</b>	<b>88</b>	<b>83</b>
<b>Charlestown</b>	<b>4</b>	<b>7</b>
<b>Coventry</b>	<b>27</b>	<b>24</b>
<b>Cranston</b>	<b>110</b>	<b>81</b>
<b>Cumberland</b>	<b>24</b>	<b>6</b>
<b>East Greenwich</b>	<b>3</b>	<b>2</b>
<b>East Providence</b>	<b>38</b>	<b>12</b>
<b>Exeter</b>	<b>4</b>	<b>1</b>
<b>Foster</b>	<b>4</b>	<b>1</b>
<b>Glocester</b>	<b>6</b>	<b>1</b>
<b>Hopkinton</b>	<b>5</b>	<b>9</b>
<b>Jamestown</b>	<b>2</b>	<b>1</b>
<b>Johnston</b>	<b>32</b>	<b>11</b>
<b>Lincoln</b>	<b>17</b>	<b>2</b>
<b>Little Compton</b>	<b>1</b>	<b>1</b>
<b>Middletown</b>	<b>15</b>	<b>10</b>
<b>Narragansett</b>	<b>5</b>	<b>1</b>
<b>New Shoreham</b>	<b>2</b>	<b>1</b>
<b>Newport</b>	<b>39</b>	<b>8</b>
<b>North Kingstown</b>	<b>22</b>	<b>7</b>
<b>North Providence</b>	<b>41</b>	<b>15</b>
<b>North Smithfield</b>	<b>10</b>	<b>1</b>
<b>Pawtucket</b>	<b>171</b>	<b>94</b>
<b>Portsmouth</b>	<b>21</b>	<b>3</b>
<b>Providence</b>	<b>591</b>	<b>352</b>
<b>Richmond</b>	<b>12</b>	<b>3</b>
<b>Scituate</b>	<b>7</b>	<b>0</b>
<b>Smithfield</b>	<b>16</b>	<b>1</b>
<b>South Kingstown</b>	<b>18</b>	<b>12</b>
<b>Tiverton</b>	<b>15</b>	<b>8</b>
<b>Warren</b>	<b>16</b>	<b>3</b>
<b>Warwick</b>	<b>89</b>	<b>34</b>
<b>West Greenwich</b>	<b>3</b>	<b>1</b>
<b>West Warwick</b>	<b>62</b>	<b>27</b>
<b>Westerly</b>	<b>22</b>	<b>35</b>
<b>Woonsocket</b>	<b>89</b>	<b>25</b>
<b>Missing Residence</b>	<b>13</b>	<b>4</b>
<b>Rhode Island</b>	<b>1,674</b>	<b>897</b>