

May 5, 2026

The Honorable Marvin Abney
Chair, House Committee on Finance
82 Smith Street
Providence, RI 02903

TESTIMONY IN STRONG SUPPORT OF H8183

Dear Chairman Abney and Members of the House Finance Committee,

My name is Grace Duffy, and I serve as the Policy and Outreach Manager for the Community Provider Network of Rhode Island (CPNRI). I write today in strong support of H 8183, which would require the FY 2027 state budget to include the additional \$117.6 million (\$46.4 million from general revenues) needed to fully fund the rate increase recommended by the Office of the Health Insurance Commissioner (OHIC) as part of its September 2025 Social and Human Services Rate Review.

This bill is about people. It is about the tens of thousands of Rhode Islanders who rely on community-based services every single day. It is about the parents who go to bed at night trusting that a Direct Support Professional will be there tomorrow morning to help their adult son get out of bed, take his medications, and get to work. It is about a woman in her eighties whose daughter lives in a group home with staff who know her just as well as she does. It is about people belonging in their neighborhoods, at their jobs, and at their kitchen tables, rather than in institutions, hospitals, or emergency rooms.

CPNRI's member agencies collectively support more than 12,000 Rhode Islanders with intellectual and developmental disabilities and employ over 11,000 frontline workers across all 39 of our state's cities and towns. We see firsthand what adequate funding makes possible — and what underfunding takes away.

In 2022, the General Assembly took a historic step. After decades during which Medicaid rates for community-based human services went largely unchanged, in some cases for as long as twenty years, the legislature enacted the Social and Human Services Programs Rate Review and Rate Setting Process Act, directing OHIC to conduct biennial, evidence-based reviews of these rates. CPNRI was proud to support that legislation alongside our partners in the HHS Coalition.



OHIC has carried out that directive with rigor. Working with independent actuaries at Milliman, OHIC conducted a multi-year process involving cost data from providers, cross-state benchmarking, transparent methodology, and broad stakeholder engagement. **The resulting recommendations are not aspirational, they reflect the actual cost of delivering safe, high-quality, federally compliant services in Rhode Island today.**

Between December 2022 and December 2024, following full funding of the first rate review:

- Direct Support Professional vacancies fell from 631 to 394.
- The share of disability service organizations turning away referrals dropped from 63% to 30%.
- Average DSP wages rose from \$18.94 to \$21.48 per hour.
- DSP turnover declined from 20.7% to 15.1%.

Behind each of those numbers is a person whose life got better. Fewer waitlists. Fewer phone calls home telling a family that no staff is available today. Fewer middle-of-the-night transfers to emergency rooms. More time with the same trusted DSP, and for people with disabilities, consistency of staff is not a convenience; it is a clinical and emotional necessity.

But the most recent data, from June 2025, shows the trend reversing. Vacancies have climbed back to 475. The share of organizations turning people away has risen back to 37%. The costs of providing services (wages, healthcare, utilities, transportation, insurance) have continued to rise, while the second round of rate increases sits only half-funded in the Governor's proposed budget. **Without the investment H 8183 secures, the gains we have fought decades to achieve will erode in real time.**

When the General Assembly passed the rate review law in 2022, it made a promise: that Rhode Island would set rates based on what services actually cost, not on what was politically convenient in any given year. H 8183 honors that promise. Funding only half of an evidence-based, legislatively required rate recommendation establishes exactly the pattern this reform was designed to break: statutory rate methodologies that exist on paper but are never realized in practice. **If partial funding becomes the norm, we will have effectively repealed the rate review process.**



H 8183 is also sound fiscal policy. For every state dollar invested, Rhode Island's economy gains an estimated \$2.33 through the Federal Medicaid Assistance Percentage. This is not only a person-centered policy. This is workforce policy. This is economic development policy. And it remains the most cost-effective way to keep Rhode Islanders out of far more expensive institutional, hospital, and emergency settings.

Thank you for your time and continued partnership.

Grace Duffy

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