



The Honorable Marvin Abney, Chairman

House Finance Committee
Room 35, Rhode Island State House
Providence, RI 02903

Chairman Abney and Members of the House Finance Committee:

I am writing to express strong support for H8404, which would create a Medicaid Infrastructure Fund to assist the 25 impacted organizations in transitioning to dual DCYF and Medicaid billing.

My name is Christina M. Villatoro, MS, and I serve as the Youth Residential Area Director for Community Solutions, Inc., which operates Coventry House, a residential program serving youth involved with the Rhode Island Department of Children, Youth and Families (DCYF).

Our program provides trauma-informed residential care and stabilization services to youth with complex behavioral and mental health needs. Programs like Coventry House are a critical part of Rhode Island's continuum of care, offering structured, therapeutic environments for youth whose needs cannot be met in less intensive settings.

Over the past two years, providers like ours have worked closely with the state to identify the needs and barriers associated with transitioning to a dual Medicaid/DCYF billing structure. Despite this collaboration, our organization has not been provided financial support to undertake what is a significant and complex transformation.

Our organization has some experience with billing; however, this transition introduces a level of complexity, compliance risk, and administrative burden that far exceeds our current infrastructure. Transitioning to Medicaid billing is not a simple administrative shift—it requires substantial investment in compliance systems, staff training, billing infrastructure, technology upgrades, and in some cases, changes to service delivery models.

Like many human service providers, we are already navigating rising operational costs, workforce shortages, and increasing regulatory requirements. Recruitment and retention of qualified staff remains one of our most significant challenges, particularly in residential settings where the work is intensive and requires specialized training and consistency of care.

At the same time, we must maintain robust electronic health record systems, documentation practices, and regulatory compliance structures—systems that are essential for high-quality care but come with significant and ongoing costs.

As a midsized provider operating on thin margins, the upfront costs associated with Medicaid transformation are prohibitive. These include investments that can easily exceed \$150,000 in infrastructure alone, with additional ongoing operational costs. Cash flow concerns in a dual billing environment further compound this challenge, as delays in reimbursement could significantly impact our ability to sustain operations.

Without targeted financial support, providers like ours may be forced to scale back or eliminate programs. This would result in the loss of critical, community-based services at a time when Rhode Island is working under a federal Consent Decree to strengthen its system of care for children and families.

It is also important to note that other system transformations, such as the Certified Community Behavioral Health Clinic (CCBHC) model, were supported with significant upfront investments. Smaller community-based organizations have not been afforded similar support, despite facing equally complex system changes.

A Medicaid Infrastructure Fund would provide critical, time-limited resources to help organizations like ours build the capacity necessary to successfully implement dual billing. This is not only an investment in individual providers—it is an investment in the strength, diversity, and accessibility of Rhode Island’s entire behavioral health and child welfare system.

The services we provide cannot be easily replicated. Coventry House serves high-risk youth with complex needs, and our program model, expertise, and community-based approach are essential components of the state’s service continuum. Losing programs like ours would create gaps that larger, less flexible systems may not be able to fill.

I respectfully urge the Committee to support the creation and full funding of a Medicaid Infrastructure Fund through H8404.

Thank you for your consideration and for your continued commitment to Rhode Island’s children, families, and communities.

Respectfully submitted,

Christina M. Villatoro, MS
Youth Residential Area Director
Community Solutions, Inc. – Coventry House