



March 11, 2026

The Honorable Susan R. Donovan, Chair
House Health and Human Services Committee
Rhode Island State House
Providence, RI 02903

RE: Testimony in Support of House Bill 8134 — RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Chair Donovan and Members of the House Committee on Health & Human Services:

On behalf of United Way of Rhode Island, we strongly support **H 8134**, which would allow licensed mental health and substance use disorder providers to accompany emergency medical services (EMS) and deliver community-based evaluation and treatment when clinically appropriate. This bill strengthens Rhode Island's crisis continuum by ensuring behavioral health emergencies are met with the right level of clinical care—on scene—while preserving EMS and emergency department capacity for true medical emergencies.

United Way's policy and advocacy work is guided by our strategic framework: **Strong Families, Strong Nonprofits, Strong United Way**. Under our **Strong Families** pillar, we advance policies that strengthen household stability and reduce barriers to opportunity. When behavioral health crises are met with timely, clinically appropriate intervention, families are better positioned to remain safe, stay connected to services, and avoid destabilizing disruptions to housing, employment, and overall well-being.

The need for a health-centered crisis response is clear. Nationally, a significant share of emergency calls involves behavioral health needs, placing sustained demand on first responders and underscoring the importance of diverting non-criminal, clinical crises toward licensed providers rather than defaulting to law enforcement response or emergency department transport (National Police Foundation, 2021). Public health research likewise recognizes that EMS is well positioned to support a shift toward clinically grounded, community-based crisis response models that improve linkage to appropriate care (Ding et. Al, 2023).

Rhode Island's own early results reinforce the value of rapid, community-based intervention. In the first year of Rhode Island's Certified Community Behavioral Health Clinic (CCBHC) demonstration (**Oct 2024–Sept 2025**), providers reported **3,062 crisis calls**, and **91%** of calls coded as "urgent" received an in-person response in **under one hour**. Importantly, **more than two-thirds** of crisis calls were resolved without requiring transport to a hospital or emergency department, and **79%** resulted in successful diversion from arrest when law enforcement involvement was a realistic possibility. H 8134 builds on this evidence by enabling licensed behavioral health clinicians to work alongside EMS and deliver on-scene care when appropriate—supporting better outcomes for individuals in



crisis, reducing avoidable emergency department utilization, and helping keep emergency responders available for time-sensitive medical emergencies.

United Way of Rhode Island respectfully urges the Committee to support **H 8134**. This bill is a practical, evidence-aligned step to strengthen Rhode Island's behavioral health crisis response infrastructure and improve outcomes for individuals, families, and communities.

Sincerely,

Elijah McLean
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United Way of Rhode Island