



April 14, 2026

The Honorable Senator Louis P. DiPalma, Chair
Senate Finance Committee
Rhode Island State Senate
82 Smith Street
Providence, RI 02903

RE: Governor's Budget Amendment #6: Rural Health Transformation Program

Chair DiPalma and Honorable Committee Members,

On behalf of the Rhode Island League of Cities and Towns, we respectfully submit testimony in support of Governor's Budget Amendment #6, which implements Rhode Island's participation in the federal Rural Health Transformation Program (RHTP), a multi-year federal initiative designed to strengthen health care access, workforce capacity, and delivery systems, particularly in communities with rural health challenges.

The amendment adjusts appropriations across several state agencies to reflect Rhode Island's receipt of federal RHTP funding over federal fiscal years 2026 through 2030. The funding is structured as a five-year federal award, with allowable administrative costs and requirements governing the timing and use of funds through 2032.

In addition to the fiscal adjustments, the amendment includes several significant policy changes required to secure and maintain full federal funding eligibility and to position Rhode Island to access additional federal resources. These reforms focus on expanding health care workforce capacity and improving access to care, including provisions that allow certain health professionals to practice at the top of their license, support participation in interstate licensure compacts for physicians, physician assistants, and nurses, and update Certificate of Need requirements to improve system flexibility. The amendment also supports the expansion of innovative care delivery models, including the Hospital-at-Home program.

From a municipal perspective, these investments are designed to strengthen the overall health care system on which cities and towns rely for resident well-being, emergency response coordination, and public health stability. Expanded access to care and a stronger health care workforce can help reduce pressure on local emergency services and improve outcomes for residents across the state. While implementation is primarily state-led, municipalities have an interest in ensuring equitable geographic distribution of services and continued coordination with local providers and community-based systems of care.

As a proposed partner in the Rural Health Transformation Program, the League is prepared to collaborate with the Executive Office of Health and Human Services and the State of Rhode Island on community-based initiatives, including the development of Community Learning Center (CLC) models in rural communities. These efforts would support the creation of accessible spaces within public buildings to provide programming that enhances residents' physical and mental health. Potential uses include telehealth access, space for primary care and behavioral health services, community paramedicine programs, and chronic disease management support. These types of community-based approaches represent an important opportunity to extend health care access beyond traditional settings and further integrate services into the communities where residents live.

Overall, the amendment represents a significant health system modernization effort supported by substantial federal investment, with a focus on workforce expansion, regulatory modernization, and alternative care delivery models.

We look forward to working with the General Assembly and the Administration to ensure these resources are implemented effectively and equitably across all communities.

Thank you for your consideration and for your continued partnership with Rhode Island's municipalities.

Sincerely,

A handwritten signature in cursive script, appearing to read "R.R.R.", written in dark ink.

Randy R. Rossi
Executive Director

Cc: Honorable Members of Senate Finance Committee