



May 5, 2026

The Honorable Louis P. DiPalma, Chair
Senate Finance Committee
Rhode Island Statehouse
Providence, RI 02903

RE: TESTIMONY IN SUPPORT OF Senate BILL 2542 — ACCESS TO PEDIATRIC HEALTH CARE

Chair DiPalma and Members of the Senate Finance Committee:

On behalf of United Way of Rhode Island, we express our strong support for Senate Bill 2542, which would require the Executive Office of Health and Human Services to pursue a Medicaid state plan amendment and allocate sufficient state general revenue to increase Medicaid payment rates to 130% of Medicare rates for outpatient clinical services provided to patients under nineteen years of age. This is a practical and necessary step to improve access to pediatric health care and strengthen Rhode Island's pediatric healthcare workforce.

United Way's policy and advocacy work is guided by our strategic framework: **Strong Families, Strong Nonprofits, Strong United Way**. We prioritize policies that strengthen household stability, expand access to opportunity, and ensure that public systems deliver measurable value. This includes centering ALICE households — Asset Limited, Income Constrained, Employed — ALICE households (those where members of the household are working, yet find themselves priced out of stability by the high cost of living). ALICE defines basic needs as housing, childcare, food, transportation, healthcare, and technology. In Rhode Island, 39% of households are below the ALICE Threshold, underscoring how many families have limited financial margin and how essential timely, affordable healthcare access is to family stability.

SENATE BILL 2542 addresses a significant access issue for children and families. The bill's findings note that Rhode Island pediatricians are facing a major workforce crisis, fewer than half of pediatric primary care offices surveyed in 2024 were accepting new or transfer patients, other than newborns or siblings of current patients, and the state faces a projected net loss of 40 to 45 pediatric providers by 2030. The bill also notes that Rhode Island Medicaid payment rates are approximately 25% lower than those in Massachusetts and Connecticut, creating challenges in recruiting and retaining pediatric providers.

For United Way, this is both a healthcare access issue and a family stability issue. When children cannot access timely pediatric care, families face delays in preventive care, behavioral health support, specialty care, and treatment for emerging health concerns. These delays place added pressure on parents, schools, emergency systems, and community-based providers. For ALICE families already balancing rising costs and limited resources, the inability to access pediatric care can deepen instability and create avoidable barriers to child well-being.

United Way of Rhode Island respectfully urges your support for Senate Bill 2542. Strengthening Medicaid reimbursement for pediatric care is a practical investment in Rhode Island's children,



families, and healthcare workforce. By improving access to pediatric providers, Rhode Island can better support child health, family stability, and long-term opportunity.

Sincerely,

Elijah McLean
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United Way of Rhode Island