



**Testimony in Support
Protect Our Healthcare Act
May 5, 2026**

Dear Chairman DiPalma and Members of the Senate Finance Committee,

The Latino Policy Institute (LPI) submits this testimony in strong support of S2811, the Rhode Island Protect Our Healthcare Act of 2026. This legislation comes at a critical moment for Rhode Island families, as more residents are expected to lose health insurance coverage while the state simultaneously experiences shifts in Medicaid spending that reflect reduced caseloads rather than reduced need. Together, these trends point to a growing gap between who needs care and what our current system is able to provide.

Across our policy research, coalition work, and engagement with communities throughout Rhode Island, we continue to hear the same reality: access to healthcare is increasingly unstable and unaffordable for many households. Even when individuals are technically eligible for coverage, barriers related to cost, eligibility transitions, and administrative complexity often result in delayed or forgone care. For uninsured Rhode Islanders, the options are even more limited, with many relying on emergency departments or postponing care until conditions become severe.

At the same time, Rhode Island's safety-net system community health centers, hospitals, and free clinics continues to carry a significant and growing share of uncompensated care. These providers are essential to the state's healthcare infrastructure, yet they are operating under increasing financial strain and limited capacity. Without additional investment and coordination, there is a real risk that these systems will be unable to absorb additional demand at a time when more residents are losing coverage.

S2811 responds directly to this challenge by establishing a coordinated statewide uninsured care program designed to expand access to essential healthcare services for individuals who cannot obtain affordable coverage. The bill builds on existing investments in care for low-income and uninsured Rhode Islanders and seeks to preserve and strengthen the providers already serving these populations, including community health centers, participating hospitals, free clinics such as the Rhode Island Free Clinic and Clínica Esperanza, and other safety-net providers.

LPI is particularly supportive of the bill's creation of the uninsured care board and advisory committee. This governance structure brings together state agencies, healthcare systems, and community-based providers, while also including a consumer voice. This is an important and necessary step toward ensuring that program design reflects both system-level expertise and lived experience. The inclusion of multiple stakeholders helps ensure that funding decisions and program implementation are responsive to real-world conditions and disparities in access.

We are also encouraged by the program's focus on creating a payer-of-last-resort model for uninsured care. This approach has the potential to reduce avoidable emergency room utilization, improve access to preventive and specialty care, and strengthen continuity of care for uninsured individuals. Importantly, it recognizes that uninsured residents are already receiving care across the system, but without a structured mechanism to ensure sustainability, coordination, or adequate reimbursement.

LPI also urges careful attention to implementation to ensure that this program achieves its intended impact. Access must be equitable across race, income, geography, and language, and administrative processes should not create additional barriers for providers or patients. We further recommend robust transparency and evaluation mechanisms to track who is being served, what services are being accessed, and where gaps remain. Finally, continued engagement with uninsured individuals and frontline providers will be essential to ensuring that the program evolves in response to community needs.

Healthcare is not only a service, it is a foundation for stability, dignity, and opportunity. When individuals are unable to access care, the consequences extend beyond health outcomes and into housing stability, workforce participation, and long-term economic well-being. S2811 represents a meaningful step toward addressing these interconnected challenges by investing in a more coordinated and sustainable system of care for uninsured Rhode Islanders.

For these reasons, the Latino Policy Institute strongly supports S2811 and respectfully urges its passage.

Sincerely,
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