



Testimony Re: S-2562 Re: the Healthcare Services
Funding Act
Senate Health and Human Services Committee
April 2, 2026
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Madam Chair and members of the Committee, thank you for the opportunity to provide testimony today.

Rhode Island KIDS COUNT coordinates the Right from the Start Campaign, a state policy coalition led by eight organizations to advance state policies and budget priorities that help babies and young children get off to the right start.

Rhode Island KIDS COUNT and the Right from the Start Campaign would like to voice their strong support for Senate Bill 2562. **This bill would ensure sustained funding for the psychiatry resource networks RI MomsPRN and PediPRN and prevent the closure of PediPRN in 2026.** Having sustained funding for these important programs will help ensure access to psychiatric care for Rhode Island children and families.

Rhode Island is one of at least [28 states](#) with a mental and behavioral health resource network for perinatal providers and [one of 49 states](#) with at least one pediatric mental/behavioral health resource network. Rhode Island's perinatal psychiatric resource network (PRN) is called MomsPRN, and the pediatric program is called PediPRN. RI MomsPRN was launched in September 2019, and RI Pedi PRN was launched in December 2016. **These teleconsultation programs allow providers, like obstetricians and pediatricians, to provide comprehensive and timely care for their patients.** [They offer](#) same-day, specialized clinical consultations and resource/referral services for mental and behavioral health needs. As of September 2025, these programs have helped 1,386 health care professionals in 486 practices meet the needs of 5,858 perinatal and pediatric patients.

RI MomsPRN is a teleconsultation program serving health professionals who care for pregnant and postpartum patients. Mental health and substance use conditions in pregnant and postpartum patients are frequently underdiagnosed and undertreated. Patients may discontinue psychiatric medications that have been effectively managing their mental and behavioral health conditions due to concerns about medication safety during pregnancy and while breastfeeding. Obstetricians and other providers who manage pregnant and postpartum patients can use the RI MomsPRN program to consult with

specialists about medication and resource referrals, including traditional talk therapy to support treatment for their patients. They can receive information about medications that are safe to use during pregnancy or while breastfeeding and use that knowledge to support not only the patient in front of them but future patients with similar symptoms. Here are a few important statistics related to the needs of pregnant and postpartum patients:

- **Untreated perinatal mood and anxiety disorders are estimated to [cost Rhode Island](#) approximately \$9.7 million each year.**
- Among Rhode Island mothers experiencing depression during pregnancy, 45% did not receive any counseling, and 60.4% did not take medication.
- **In Rhode Island, more than one in four women (27.1%) report experiencing depression immediately before, during, or after their pregnancy.**
- **Nearly one in four women in Rhode Island (24.6%) report substance use immediately before, during, or after their pregnancy.**

PediPRN helps connect children and families to timely diagnosis and care from their pediatrician or primary care provider rather than requiring them to start the process of navigating a complex and overtaxed mental health system when it is not necessary. It can be challenging to find support for pediatric mental health concerns. Parents and children must first identify that there is a need, find a provider, explain the problem, and then find appropriate treatment. Here are a few important statistics related to the needs of pediatric patients:

- **More than one in four [Rhode Island children](#) between the ages of 3 and 17 has a diagnosable mental health problem, and nearly 1 in 10 children (9.8%) ages 6 to 17 have a significant functional impairment.**
- Children with undiagnosed or untreated mental illnesses are more likely to leave their education without a diploma, use drugs, or become incarcerated. It is estimated that [more than half](#) of justice-involved youth have a diagnosable mental health disorder.
- In Rhode Island in 2022-2023, more than half (52%) of children aged 3 to 17 who needed mental health treatment or counseling had a problem obtaining needed care.

PediPRN and MomsPRN are free to all primary care providers in Rhode Island. These services support clinicians and allow them to refer their patients to outpatient treatment, medical teleconsultation, specialist evaluations, care coordination, and intensive treatment. The teleconsultation lines have reduced

the burden on Rhode Island's psychiatric hospitals by managing mental health conditions through primary care and pregnancy care offices, rather than waiting until patients are in crisis. This program is vital to support Rhode Island children and perinatal patients' mental health.

Thank you for the leadership that the General Assembly has shown in the past in extending the funding for the PRN programs. **Rhode Island KIDS COUNT and the Right from the Start Campaign strongly urge you to pass Senate Bill 2562 and create sustained funding for a program that works, helps improve mental health care for Rhode Islanders, saves health care costs, and reduces the burden on our mental health care system.** Thank you for the opportunity to testify today.



Right from the Start

Sustain RI's Psychiatry Resource Network (PRN) for Moms, Babies, and Children H-8268 (Shallcross Smith) & S-2562 (DiMario)



"It's the most reliable program that I have worked with in my twenty years of working in primary care." – Rhode Island Primary Care Provider

The need for pregnancy, postpartum, and pediatric access to mental health support is urgent and growing, with both a maternal and children's mental health crisis occurring. In Rhode Island, there is a shortage of specialized mental health providers. As such, much of the burden for initial mental health care falls on frontline primary health care providers, who do not have extensive training and must navigate a complex and overtaxed system to connect patients to care.

Rhode Island's MomsPRN and PediPRN programs help address this gap by empowering health care professionals, building competency, and increasing patient access to mental health care by offering frontline health care providers same-day, specialized clinical teleconsultations that include resource/referral support and ongoing professional education. **At least 28 states have a perinatal psychiatry access program. All but 1 state has a child psychiatry access program.**

Supports Health Care Professionals

As of September 2025, the PRN programs have helped 5,858 perinatal and pediatric patients by supporting 1,386 health care professionals at 486 practices across Rhode Island. The PRN programs offer same-day specialized clinical consultations and resource/referral services for mental health services. The program helps support primary health care providers to meet their patients' mental health care needs so they can avoid lengthy wait times for specialized care.

Supports Moms and Babies

RI MomsPRN has directly helped 2,857 perinatal patients in Rhode Island. Even more are benefiting from the program because with each call a provider makes, they gain knowledge to support other patients. More than one in four (27.5%) women in RI experience depression before, during, or after their pregnancy.

Supports Children

PediPRN has directly helped 3,001 pediatric patients in Rhode Island. Even more benefit from the program as pediatric health care providers gain knowledge to support other patients. In RI, nearly one in three children (30%) ages three to seventeen has a diagnosable mental health challenge.

The PRN 2026 bill will:

Permanently fund and sustain RI MomsPRN and PediPRN. The Governor's proposed budget has funding allocated for RI MomsPRN, but not PediPRN. Federal grant funding for PediPRN is scheduled to end in September 2026. If no funding is allocated, the PediPRN program will close.

