

April 7, 2026

The Honorable Melissa A. Murray
Chair, Senate Health & Human Services Committee
Rhode Island State House
Providence, RI 02903

RE: Comments and Recommendations for S3091 – Relating to Health Insurance Oversight and Uncompensated Care Adjustments

Dear Chairperson Murray and Members of the Senate Health & Human Services Committee,

On behalf of the Rhode Island Coalition for Children and Families (RICCF), we write to offer our comments and recommendations regarding S3091, which proposes a formula-driven approach to account for hospital uncompensated care within rate setting by the Office of the Health Insurance Commissioner (OHIC).

We respectfully urge the General Assembly to extend this framework to the broader social and human services system.

RICCF represents a statewide network of 44 providers and advocates for children, youth, and families across Rhode Island's health and human services system. Every day, our members see the impact of gaps in coverage and access, and we recognize that uncompensated care is a real and growing pressure on providers, not only hospitals.

Community-based providers, including those delivering behavioral health, child welfare, family support, and prevention services, also shoulder significant uncompensated care burdens. These costs arise when families are uninsured, underinsured, or unable to access timely coverage for needed services. Unlike hospitals, however, these providers often operate with far thinner margins and less flexibility to absorb these losses.

Applying an uncompensated care adjustment only to hospitals risks unintentionally shifting demand toward the most expensive and restrictive settings in the system. When community-based providers are not adequately supported, families are more likely to experience delays in care, leading to higher-acuity needs that ultimately result in emergency department visits, inpatient admissions, or out-of-home placements.

This outcome runs counter to the state's long-standing policy direction. Rhode Island has made clear commitments through the Olmstead framework, the Children's Behavioral Health Consent Decree, and other initiatives to prioritize prevention, early intervention, and care in community settings. Ensuring that community-based providers are financially stable is essential to achieving these goals.


For these reasons, RICCF recommends that similar statutory language be incorporated into the social and human services rate review process conducted by OHIC. Specifically, we urge the General Assembly to:

- Establish a methodology to define and calculate uncompensated care within the social and human services sector;
- Apply a uniform percentage adjustment to provider rates to account for these costs during each biennial rate review; and
- Ensure that this adjustment is transparent, data-driven, and updated regularly, consistent with the approach proposed for hospitals.

A balanced approach that recognizes uncompensated care across the full continuum of care will strengthen system stability, support prevention-focused services, and reduce long-term costs to the state.

We appreciate your consideration and urge thoughtful refinement of this legislation to ensure it supports the entire system of care for Rhode Island's children and families.

Respectfully,

A handwritten signature in cursive script, appearing to read "Tanja Kubas-Meyer".

Tanja Kubas-Meyer

Executive Director