

April 1, 2026

The Honorable Victoria Gu, Chair
Senate Artificial Intelligence and Emerging Technologies Committee
Rhode Island General Assembly

Re: SB 2197 – Oversight of Artificial Intelligence Technology in Mental Health Care

Dear Chair Gu and members of the Committee:

TechNet is the national, bipartisan network of technology companies that promotes the growth of the innovation economy by advocating a targeted policy agenda at the federal and 50-state level. TechNet’s diverse membership includes 100 dynamic American businesses ranging from startups to the most iconic companies on the planet and represents five million employees and countless customers in the fields of information technology, artificial intelligence, e-commerce, the sharing and gig economies, advanced energy, transportation, cybersecurity, venture capital, and finance.

TechNet respectfully requests an amendment to S 2197, which would regulate the use of artificial intelligence in mental health care in Rhode Island, limiting its use to administrative and supplementary support by licensed professionals with informed patient consent, and prohibiting AI from making therapeutic decisions or directly interacting with clients.

TechNet supports the appropriate and responsible use of new technology—including artificial intelligence—and supports the goals of this legislation. At the same time, we are concerned that the bill’s current definitions are drafted more broadly than the legislation’s stated intent, potentially expanding the scope beyond the targeted activities the proposal aims to address. We encourage refinements to ensure the definitions are clear and tailored, so the framework protects the public while preserving space for innovation and lawful, professional practice.

To address this, we request the addition of the the term “by a licensed professional” to the definition of “therapy or psychotherapy services” to clarify that the intended focus is on AI systems designed to impersonate licensed professionals and that the bill does not implicate general purpose AI systems that may happen to touch on topics related to mental or behavioral health (e.g., setting a routine bed time) in normal conversation with users.

We request to narrow the scope of the prohibition on using AI for detecting emotions or mental states to the context of diagnosis or treatment. This is consistent with the intent of the bill and will permit broader use of AI assistants in low risk contexts such as scheduling appointment dates.

The definition of “administrative support” should be amended to state that they are “services that do not involve therapeutic communication.” Without the qualifier of “therapeutic,” the definition would restrict AI from communicating with a patient about anything – including simple administrative tasks such as scheduling.

The definition of “therapeutic communication” is very broad and may inadvertently bar useful systems such as those designed to allow patients to reflect on their therapy sessions in between meetings with therapists. There are also other clinically effective use cases for artificial intelligence to play a role in the therapists’ practices. We should rely on the education, experience, and expertise of providers to determine when utilizing AI tools is appropriate or not. Please see our redlines for specific changes that we believe will maintain the intent of the bill without unnecessarily restricting providers.

The definition of “therapy or psychotherapy services” may be too broad when stating that it includes anything that may “improve an individual’s mental health.” There are many things that may “improve” a person’s mental health that are not clinically delivered therapy services.

Amendments:

40.1-5.5-2.

(1) "Administrative support" means tasks performed to assist a licensed professional in the delivery of therapy or psychotherapy services that do not involve therapeutic communication.

(10) "Therapeutic communication" means any verbal, nonverbal, or written interaction conducted in a clinical or professional setting that is intended to diagnose or treat, ~~or~~ address an individual's mental, emotional, or behavioral health concerns. "Therapeutic communication" includes but is not limited to

(i) direct clinical interactions with clients that constitutes the delivery of therapy or psychotherapy services for the purpose of understanding or reflecting on their thoughts, emotions, or experiences;

(ii) providing independent clinical guidance, strategies, or interventions designed to achieve mental health outcomes;

(iii) offering emotional support, reassurance, or empathy in response to suicidal or violent ideations ~~psychological or emotional distress~~;

(iv) collaborating with clients to develop or modify therapeutic goals or treatment plans; and

(v) offering behavioral feedback ~~that constitutes the delivery of therapy or psychotherapy services intended to promote psychological growth or address mental health conditions.~~

(11) "Therapy or psychotherapy services" means services provided **by a licensed professional** to diagnose or treat, ~~or improve~~ an individual's mental health or behavioral health. "Therapy or psychotherapy services" does not include religious counseling or peer support.

40.1-5.5-3.

(c)(4) Detect emotions or mental states **for the purpose of diagnosis or treatment.**

Thank you for your attention to this important piece of legislation and we look further to working with you and the committee on the shared goals of this legislation.

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Thank you for your attention to this important piece of legislation and we look further to working with you and the committee on the shared goals of this legislation.

Sincerely,



Christopher Gilrein
Executive Director, Northeast
TechNet
cgilrein@technet.org