

**RHODE
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Senate Committee on Finance

March 27, 2025

Article 10, Sections 1 and 2

Agenda

1. Nursing Facilities Minimum Staffing
2. Certificate of Need

Nursing Facilities Minimum Staffing

The budget proposes changes to the nursing home minimum staffing law to include more categories of professional staff in the staffing ratios, waive past fines that might be levied, and offer greater flexibility in cases of labor shortfalls or other external factors.

- Expands healthcare professional types to the existing definition of “direct caregiver” to be counted in the minimums.
- Lowers minimum hours of CNAs and removes the requirement that non-direct caregiving task hours be excluded from minimum staffing hour compliance totals.
- Removes legal penalties for first offenses and offenses in three consecutive quarters, and it replaces conditions for penalty waivers with an authorization for RIDOH to reduce penalties in the event of mitigating circumstances, such as natural disaster or acute labor shortage.
- Allows RIDOH to grant waivers of minimum staffing requirements of up to one year, with a renewal option.
- Waives and forgives any fines for periods prior to the third quarter of 2025.

Certificate of Need

The proposed budget streamlines the Certificate of Need (CON) process to align Rhode Island’s policies with other states, encourage new entrants into the healthcare market, reduce regulatory burdens for cost-effective care alternatives, and expand access to underserved communities.

- CON is the regulatory framework that requires healthcare providers to obtain state approval before initiating certain healthcare services or facilities to ensure they meet state requirements on community needs and prevent unnecessary duplication. The Governor’s proposed amendments include:
 - Removing certain services and facilities — such as home health, hospice, outpatient rehabilitation, substance use disorder treatment facilities, outpatient surgical centers, and independent surgical practices — from review;
 - Raising the capital expenditure threshold for review from \$5–\$7 million to \$50 million;
 - Eliminating reapproval for minor cost increases for capital projects and adds additional CON exemptions for state capital projects; and
 - Restricting procedural delays by potential competitors/other market participants after the RIDOH’s approval.

Rhode Island Department of Health FY 2026 Budget Overview

Senate Committee on Finance

March 27, 2025



Rhode Island Department of Health

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Overview

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Agenda

RIDOH Overview

- Mission and Leading Priorities
- Essential Public Health Functions
- Supporting Rhode Island 2030 Goals

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- FY26 Budget Measures

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- RICAP Expenditures

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- FTE Recruitment and Cap Process
- Turnover and Hiring Timelines

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Mission and Leading Priorities

RIDOH's **mission** is to prevent disease and protect and promote the health and safety of the people of Rhode Island.

Three Leading Priorities Guide Our Work

- Address the socioeconomic and environmental determinants of health in Rhode Island.
- Participate in the work of the State's Health Care System Planning Cabinet.
- Support the Governor's initiative in making 2025 the year of health and align with the Governor's 2030 plan by creating a healthier Rhode Island.

The Breadth of RIDOH's Work

As one of the only states without local public health departments, RIDOH's scope is extremely broad, and our work entails direct partnership with the community. Some examples of our critical public health programs include:



We promote healthy lifestyle changes and offer programs to manage or prevent chronic conditions.



We regulate hundreds of healthcare facilities and tens of thousands of healthcare professionals.



We work to support babies, mothers, and families during the crucial first months and years of life.



We serve as a hub for critical public health data.



We ensure that the food and water you consume is healthy and safe.



We operate premier State Health Laboratories, and we run the State's only medical examiners' office.



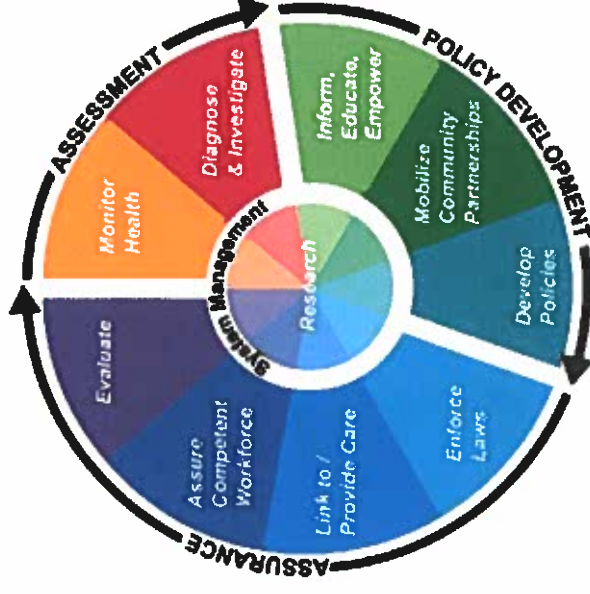
We address infectious diseases and emergency preparedness.



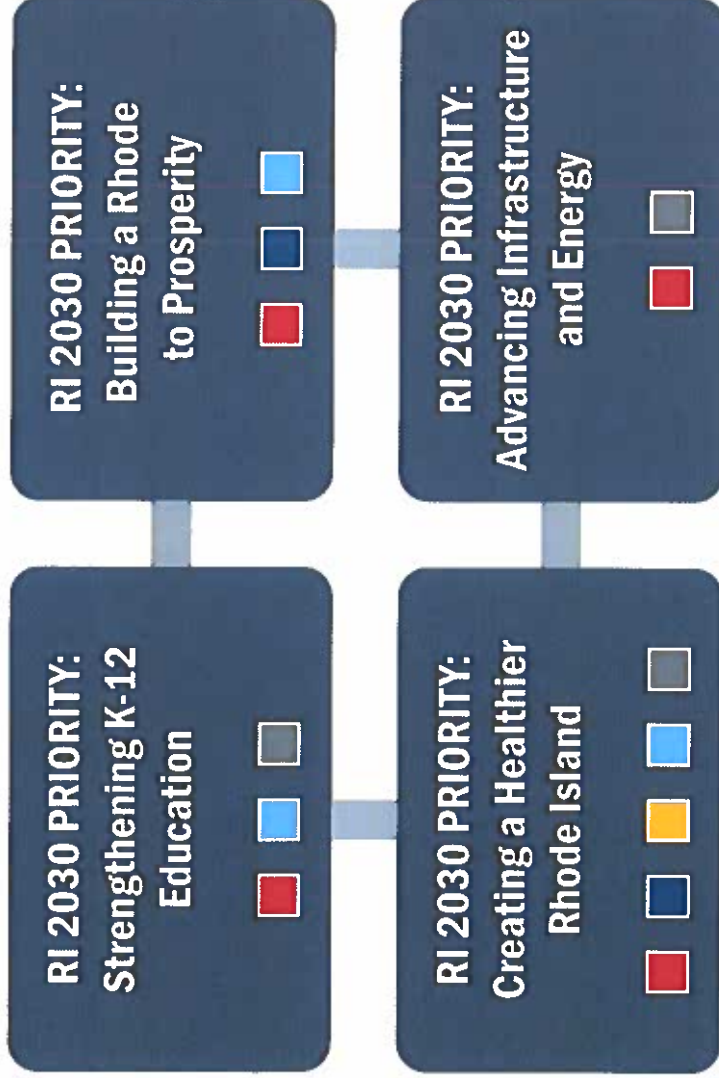
We address childhood lead poisoning to keep children safe and healthy.

Essential Public Health Functions

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of healthcare when otherwise unavailable.
8. Assure a competent public health and personal healthcare workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.



Supporting Rhode Island 2030 Priorities



HHS PRIORITY 1:
Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential.

HHS PRIORITY 2:
Promote continuums of care that deliver efficient, effective, and equitable services across the life course.

HHS PRIORITY 3:
Address addiction; improve the behavioral health system; and combat stigma, bias, and discrimination.

HHS PRIORITY 4:
Develop and support a robust and diverse health and human services workforce to meet the needs of every Rhode Islander.

HHS PRIORITY 5:
Modernize, integrate, and transform health information technology and data systems to support operations and value-based systems of care.

RIDOH Structure

| Public Health Programmatic Work | | | | | |
|---|---|---|---|---|---|
| Community Health and Equity <ul style="list-style-type: none"> Chronic Disease Care and Management Health Promotion Perinatal and Early Childhood Health Preventive Services Maternal and Child Health Health Equity Institute Health Equity Zones (HEZs) | Environmental Health <ul style="list-style-type: none"> Healthy Homes and Environment Food Protection Drinking Water Quality and Engineering Environmental Health Risk Assessment and Toxicology | Health Laboratories <ul style="list-style-type: none"> Environmental Sciences Forensic Sciences Biological Sciences Clinical Toxicology and Laboratory Support | Medical Examiners <ul style="list-style-type: none"> Medical Examiner | Emergency Preparedness and Infectious Disease <ul style="list-style-type: none"> Acute Infectious Disease Epidemiology Emergency Preparedness and Response HIV, Hepatitis, Sexually Transmitted Diseases, and Tuberculosis Epidemiology | Health Care Quality and Safety <ul style="list-style-type: none"> Emergency Medical Services Health Facilities Regulation Professional Boards and Licensing |
| Department Operations | | | | | |
| Central Management <ul style="list-style-type: none"> Finance and Operations Legal Services Information Technology Human Resources Public Health Communication | Data, Information, and Health Systems Planning <ul style="list-style-type: none"> Health Data and Analysis and Public Health Informatics Health Systems Policy and Planning Vital Records | Workforce Development and Engagement <ul style="list-style-type: none"> Office of Learning and Growth Office of Employee Relations, Wellness, and Recognition | Policy, Planning, and Strategy <ul style="list-style-type: none"> Health Regulation Public Affairs and Legislation Academic Affairs and Accreditation | | |

RIDOH Performance Management



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Performance Management: Summary of FY 26 Budget Measures

Aligns with Governor's 2030 Priority Creating Healthier Rhode Island

| Program | Measure Name | Aligned Strategic Priority | 2025 Status |
|-----------------------------|--|--|-------------|
| Central Management | Reduce the number of overdose fatalities. | HHS 3: Address addiction; improve the behavioral health system; and combat stigma, bias, and discrimination. | ON TRACK |
| Environmental Health | Blood lead screening at 18 months | HHS 1: Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential. | ON TRACK |
| Environmental Health | Proportion of population served by public water systems in full compliance | HHS 1: Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential. | ON TRACK |
| Environmental Health | Food establishment re-inspections conducted | HHS 1: Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential. | ON TRACK |
| COVID-19 | COVID-19 hospital admissions per 100,000 population | HHS 2: Promote continuums of care that deliver efficient, effective, and equitable services across the life course. | ON TRACK |

Performance Management: Summary of FY 26 Budget Measures

Aligns with Governor's 2030 Priority Creating Healthier Rhode Island

| Program | Measure Name | Aligned Strategic Priority | 2025 Status |
|--|---|--|-------------|
| Emergency Preparedness and Infectious Disease | Newly diagnosed HIV cases | HHS 2: Promote continuums of care that deliver efficient, effective, and equitable services across the life course. | ON TRACK |
| State Office of the Medical Examiners | Postmortem turnaround time | HHS 2: Promote continuums of care that deliver efficient, effective, and equitable services across the life course. | ON TRACK |
| Community Health and Equity | Naloxone kits distributed in high-burden communities | HHS 3: Address addiction; improve the behavioral health system; and combat stigma, bias, and discrimination. | ON TRACK |
| Community Health and Equity | Percent of survey respondents that have made, or intend to make, changes within the next 60 days to policies or practices to support compliance with CLAS standards | HHS 1: Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential. | ON TRACK |
| Vital Records | Vital Records: average customer wait time | HHS 2: Promote continuums of care that deliver efficient, effective, and equitable services across the life course. | ON TRACK |
| Health Laboratories | Non-Fatal overdose reporting timeliness | HHS 3: Address addiction; improve the behavioral health system; and combat stigma, bias, and discrimination. | ON TRACK |

Performance Management: Summary of FY 26 Budget Measures

Aligns with Governor's 2030 Priority Creating Healthier Rhode Island

| Program | Measure Name | Aligned Strategic Priority | 2025 Status |
|--------------------------------------|---|--|-------------|
| Health Laboratories | Non-Fatal overdose toxicology submissions | HHS 3: Address addiction; improve the behavioral health system; and combat stigma, bias, and discrimination. | ON TRACK |
| Healthcare Quality and Safety | Social Work license issuance | HHS 4: Develop and support a robust and diverse health and human services workforce to meet the needs of every Rhode Islander. | ON TRACK |

RIDOH Agency Updates



Federal Funding Update



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Federal Funding Impact Monitoring and 3/25 Update

- RIDOH and EOHHS have established Internal Task Forces to coordinate information, assess risks, and prepare for possible federal funding cuts.
- **3/25/25 Grant Termination Notification from CDC (Amounts remaining as of February 28)**
 - Notice 1 - Epidemiology and Laboratory Capacity (ELC) COVID-related grants - \$15.6 million (7/26 anticipated end date)
 - Notice 2 – COVID Community Health Workers grant- \$1 Million (8/25 end date)
 - Notice 3 – COVID Health Disparities grant - \$1.6 Million (5/25 end date)
 - Notice 4 - COVID Immunization Vaccine supplements 3 and 4 - \$13 million (6/25 end date)
- Total funding impact 31.2 Million. Impacts funding for 43 FTEs (57 individuals)
- Working closely with the Governor’s Office and the Rhode Island Attorney General to explore all options to safeguard the funding.

3/25 Update – Impact Assessment

- The public health infrastructure that surrounds vaccination in Rhode Island including communications campaigns to promote vaccination, partnerships with community organizations to promote vaccination, and RIDO staff who take on tasks like ensuring proper vaccine storage.
- This work helps Rhode Island maintain some of the highest vaccination rates in the country across all vaccine preventable diseases (e.g. measles, and other childhood vaccines, and seasonal vaccinations).
- Surveillance, outbreak response, engagement in care, and other infectious disease prevention and control activities.
- This decreases rates of infectious diseases in Rhode Island, including respiratory pathogens, foodborne illnesses, HIV, hepatitis C, congenital syphilis, syphilis, gonorrhea, chlamydia, and tuberculosis. It also helps prevent disease clusters and outbreaks.
- Occupational health, biosafety risk activities, biosafety training, and other functions.
- This funding also supports some core laboratory function and administration as well as the replacement of obsolete laboratory equipment and systems (for example, a modernized Laboratory Information Management System).

RIDOH Key Efforts



Healthcare System Planning: Primary Care Priorities

- **Payment and Investment:** Ensure insurers are paying for primary care services at a level and in a manner that supports the practice of high-quality primary care and attracts and retains primary care clinicians in Rhode Island.
- **Support and Workforce Retention:** Increase retention of Rhode Island's existing primary care providers and stem workforce losses by improving their current work experience.
- **Workforce Recruitment:** Increase the number of people choosing to work in primary care in Rhode Island.
- **Integration:** Advance high-fidelity, integrated, team-based primary care.
- **Monitoring and Accountability:** Improve data collection, analysis, and reporting to support monitoring of primary care in Rhode Island and evaluation of primary care intervention impact.

Strengthening Rhode Island's Healthcare Workforce

- **Conrad 30 J-1 Visa Waiver** is a critical recruitment tool for physicians. The program ensures a diverse, representative primary care workforce.
 - Facilitated recruitment of 39 physicians in 2024
- **Enrolled 5 health centers in the 3RNET Recruiting for Retention Academy** in 2024.
- **Supported 95 job postings**—481% increase in 3RNET utilization since 2022
- **Partnered with the New England Rural Health Association** to deliver workforce training for HR professionals, focusing on best practices in recruitment and retention.

Public Health Infrastructure Grant (PHIG) Initiatives

- **Strategy 1: Workforce Development**
 - Established Workforce Development and Employee Engagement Team
 - Funded staff to support internal communications (*Inside RIDOH*)
- **Strategy 2: Foundational Capabilities**
 - Creation of Standard Operation Procedures (SOPs) across multiple operational areas
 - Funded bilingual Consultant Medical Director to support outreach to Spanish-speaking communities
- **Strategy 3: Data Modernization**
 - Preparation for RIDOH strategic planning process
 - Funded Public Health Accreditation Board
- **Strategy 4: Health System Modernization**
 - Focus on Health System Inventory and Assessment Database of 160 applications at RIDOH
 - Completed a Data Modernization Roadmap for the next 5 years, with 5 initial priorities

H5N1, Measles, and Respiratory Virus Response

- **H5N1 response:** surveillance at 12 wastewater sites; testing respiratory samples from hospitalized patients and PCHC outpatients; responding to human exposures to infected animals (vets/wildlife rehabbers); working closely with DEM on public education, testing raw milk for H5N1, and communications to healthcare professionals. No human or cattle cases in New England. Nationally, there have been 70 human cases since 2022, but there is no human-to-human spread.
- **January travel-related measles case:** RIDOH responded with appropriate contact tracing, symptom monitoring, collaboration with clinical partners, and messaging to public and healthcare professionals. No further measles cases were reported in Rhode Island. This response validated RIDOH's preparedness and readiness efforts after a decade of no cases.
- **Respiratory Virus Surveillance:** Showed flu, COVID-19, and RSV activity has dropped below the active respiratory virus season threshold. Influenza is still circulating at moderate levels; COVID-19 and RSV are circulating at low levels. Influenza hospitalizations and deaths in the 2024/2025 influenza season are the highest since 2017.

Rhode Island Fatal Overdose Data Overview

- Preliminary data from 2024 indicated that Rhode Island saw an 11% decrease in drug overdose fatalities during the first half of 2024, compared to the first half of 2023. This continues the momentum Rhode Island saw in 2023, when the percentage of drug overdose deaths decreased by 7.3%.
- RIDOH has a range of community-focused interventions in place to prevent overdoses and save lives, many of them coordinated through Governor McKee's Overdose Prevention Task Force, including:
 - Distributing 43,116 doses of the life-saving drug naloxone in 2024;
 - Implementing an EMS-based naloxone leave-behind program to expand naloxone distribution into the State's rural areas;
 - Doing a targeted overdose prevention text message campaign for Rhode Islanders living in overdose hot spots; and
 - Expanding healthcare professional education on opioid prescribing and substance use disorder treatment.

Opioid Overdose Epidemic – RIDOH Response and Investments

- RIDOH will receive **\$6.9 million** in Opioid Stewardship and Settlement funds in FY 25 for the Drug Overdose Prevention Efforts.
- This funding will be used to **implement data-driven interventions** for preventing fatal overdoses and decreasing substance use-related harms. Investments are made in the communities most impacted and include:
 - Mobile outreach and brick and mortar drop-centers staffed by peers with lived experience to provide overdose prevention supplies/education, basic needs, and linkage to care for at-risk populations;
 - Centralized naloxone and harm reduction supply hub including free, mail-order naloxone to ensure all Rhode Islanders have access to naloxone; and
 - Targeted outreach to BIPOC communities disproportionately affected by overdose.

Health Equity Zone (HEZ) Initiative

- Rhode Island's HEZ initiative is a **health equity-centered** approach to prevention that leverages **place-based, community-led** solutions to address the **social determinants of health**.
- Rhode Island has invested in public health funding toward HEZs to develop sustainable infrastructure and support **community-identified needs** to positively impact the socioeconomic and environmental conditions driving disparities and improve health outcomes.
- Emerging evidence from a statewide evaluation demonstrates that the HEZ model is working to **decrease social vulnerability, lower public insurance costs, and build resilience in communities**. There are also promising trends indicating a **decrease in chronic disease rates in HEZ communities** and improvement in the overall health and economic well-being of Rhode Islanders.

Hospital Conversion Act

- In 2024, RIDOH issued approvals, with conditions, for the sale of Roger Williams Medical Center and Our Lady of Fatima Hospital to the Centurion Foundation. Both hospitals provide vital services to the community, including emergency medicine, behavioral health, cancer care, bariatric care, and elder care.
- Roger Williams Medical Center is an academic medical center affiliated with Boston University School of Medicine and has more than 60 post-graduate residents and fellows.
- The decisions contain several stringent conditions intended to ensure the financial viability of the hospitals, stable operational structures at the facilities, and a continued commitment to health equity and the needs of all patients in the hospitals' communities.
- The acquiror of the healthcare facility is responsible for costs associated with monitoring compliance with conditions of the sale.

Expanding Primary Care Clinical Training Opportunities

- **\$2.7 million allocation by the Rhode Island General Assembly (2024)** in recognition of the critical need for expanding primary care clinical training capacity
- **Support for Preceptors and Trainees:** The initiative aims to provide vital support to preceptors and enhance the clinical training experience for medical students, residents, nurse practitioners, and physician assistants.
- **Focus on Patient-Centered Medical Homes (PCMH):** The program will prioritize PCMH practices, which focus on comprehensive, patient-centered care. Practices will integrate behavioral health services, allowing trainees to experience and contribute to the delivery of holistic care with integrated behavioral health services.
- **Launch of the Program:** slated for the 2025-2026 academic year

Rhode Island Rental Registry

- The rental registry law passed in June 2023 and was funded in July 2024. It requires all landlords to submit current and active contact information, information about property managers, and information needed to identify individual units to the Rhode Island Rental Registry. Landlords who rent a residential property that was built before 1978 must provide a valid Certificate of Lead Conformance or other lead certificate.
- This law was passed to help protect children and families from the lifelong effects of lead exposure. The Rhode Island Rental Registry will serve as a vital source of information about rental properties and was developed to meet the requirements of the *Residential Landlord and Tenant Act* (R.I. Gen. Laws § 34-18-58). About \$1.2 million in general revenue was included in FY25 to implement the rental registry program.
- Roughly 39% increase in Lead Certificates as of February 14th
 - 8/31/2024 - 18,809 lead certificates on file
 - 2/14/2025 - 25,693 lead certificates on file

New Facility for Office of State Medical Examiners

- After operating in Providence for more than four decades, RIDOH's Office of State Medical Examiners moved to a new, state-of-the-art facility in Cumberland.
- The enhancements and improved infrastructure at this new site will increase capacity, allowing RIDOH to better support the death investigation process, provide critical information to law enforcement partners, screen deaths for public health significance, and support the families of decedents.
- The Office of State Medical Examiners hired a new Chief Medical Examiner, Dr. Marius Tarau.

New Facility for RIDOH State Health Laboratories

- Overview
 - RIDOH received **\$81.7 million** of federal funds on the Epidemiology and Laboratory Capacity (ELC) grant for a new health laboratory through July 2026. Additional funding includes \$11.6 million from RICAP and \$4.4 million from the Department's indirect.
 - The project is coordinated by RIDOH, DCAMM, Commerce, and I-195 Redevelopment District.
 - There is an expected 15% increase in the overall 80,000 square foot lab square from current lab at Orms Street.
- New Facility Benefits
 - Dedicated sequencing facilities to **enable the next generation of pathogen surveillance** beyond COVID-19
 - State-of-the-art facilities for workflow efficiency, biosafety, and staff collaboration
 - Updated systems for biosecurity, staff safety, and flexibility for surge testing capacity in emergency responses
- Key Data Points
 - Building location: Innovation and Design District (I-195 Redevelopment District) – 150 Richmond St.
 - Total facility square footage: 212,000; RISHL square footage (2.5 floors): 80,000
 - Substantial completion/ready for RIDOH lab occupancy: Summer 2025. Total project completion: Q3 2025

Customer Service Improvements

- Conversion of RIDOH website to eCMS platform (January 2025)
- In alignment with State website standard; ADA and 508 compliant
- Mobile device compatible
- Clean, modern look and feel
- Improved user experience
- Health Information Line (HIL) new and modernized telephony system (November 2024)
- HIL is single point of telephone entry for RIDOH; manages 7,500 calls per month
- Expanded prompt/greeting system to help customers self-serve
- Updated, scripted, plain-language responses based on internal feedback (all electronic)
- Integrated contact database
- Increased reporting, quality assurance capacity

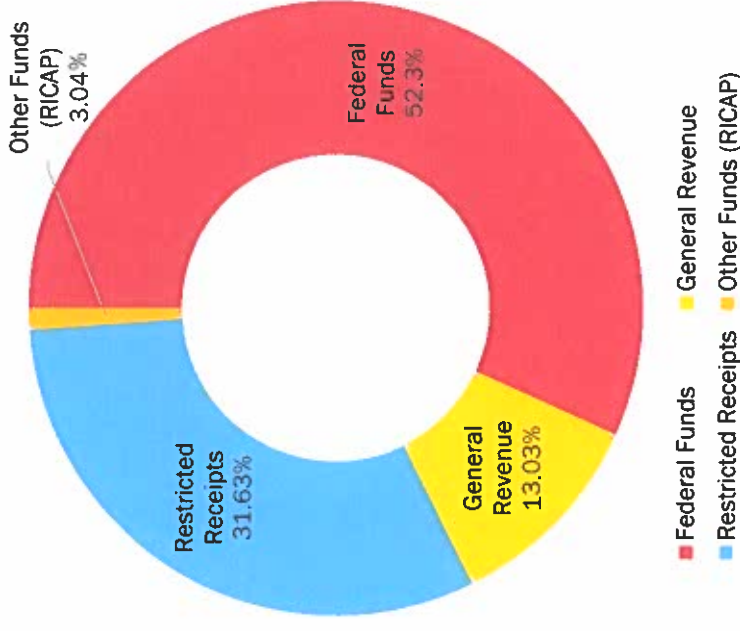
RIDOH Budget Summary

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RICAP and SFRF Funding

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FY 26 Governor's Recommended Budget, by Funding Source

- The Governor recommends **\$292,114,774**
- \$38,075,075 General Revenue
- \$152,861,675 Federal funding
- \$92,414,141 Restricted Receipts
- \$8,763,883 Other funds (RICAP)



RIDOH Budget Summary

Agency-Wide Budget

| RIDOH Budget - Source of Funds | FY 25 Enacted | FY 25 Revised Agency Request | FY 25 Gov Recommended w/ GBAs* | FY 26 Agency Request | FY 26 Gov Recommended |
|--------------------------------|----------------------|------------------------------|--------------------------------|----------------------|-----------------------|
| General Revenue | \$40,053,947 | \$40,533,357 | \$40,533,357 | \$37,074,811 | \$38,075,075 |
| Federal Funds | \$205,109,529 | \$240,157,433 | \$244,370,137 | \$149,196,540 | \$152,861,675 |
| Restricted Receipts | \$108,069,735 | \$94,518,981 | \$95,308,488 | \$90,664,580 | \$92,414,141 |
| Other Funds (RICAP) | \$3,021,762 | \$3,660,192 | \$3,660,205 | \$8,763,883 | \$8,763,883 |
| Total Funding | \$356,254,973 | \$378,390,553 | \$383,872,187 | \$285,699,814 | \$292,114,774 |
| FTE Authorization | 572.6 | 572.6 | 572.6 | 572.6 | 572.6 |

*GBA = Governor Budget Amendment

RIDOH Budget Summary – Continued

*GBA = Governor Budget Amendment

| RIDOH Budget – Source of Funds | FY 25 Enacted | FY 25 Revised Agency Request | FY 25 Gov Recommended w/ GBAs* | FY 26 Agency Request | FY 26 Gov Recommended |
|--|----------------------|------------------------------|--------------------------------|----------------------|-----------------------|
| Central Management | \$33,879,399 | \$32,553,339 | \$33,209,320 | \$27,784,457 | \$29,044,554 |
| Community Health and Equity | \$165,526,762 | \$156,584,364 | \$157,398,021 | \$156,202,859 | \$157,843,758 |
| Environmental Health | \$19,566,006 | \$22,292,963 | \$22,862,174 | \$21,462,363 | \$22,374,870 |
| Health Laboratories | \$14,607,420 | \$15,748,981 | \$15,904,984 | \$20,512,402 | \$20,945,066 |
| Healthcare Quality and Safety | \$22,955,588 | \$25,642,621 | \$25,932,906 | \$15,247,091 | \$15,814,446 |
| Data, Information, and Health Systems Planning | \$6,906,738 | \$6,630,050 | \$6,744,551 | \$8,903,904 | \$9,221,944 |
| Emergency Preparedness and Infectious Disease | \$19,672,901 | \$20,342,251 | \$20,773,989 | \$16,472,724 | \$17,104,380 |
| Medical Examiners | \$4,270,272 | \$4,282,272 | \$4,419,201 | \$4,296,299 | \$4,589,109 |
| COVID-19 | \$68,869,887 | \$94,313,712 | \$96,627,041 | \$14,817,715 | \$15,176,647 |
| Total Funding | \$356,254,973 | \$378,390,553 | \$383,872,187 | \$285,699,814 | \$292,114,774 |

Key Initiatives



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Health Professional Loan Repayment Program

- The Governor recommends **\$200,000** in general revenue for the Loan Repayment Program specifically targeted for primary care physicians and pediatricians. Investment in the State general revenue leveraging as a **1:1 match will maximize \$200,000** in federal funds.
- RIDOH's Health Professional Loan Repayment Program (RI HPLRP) is a key strategy to improve access to primary care, dental, and behavioral health services. Since 1994, **the program has awarded more than \$11.2 million to more than 270 healthcare professionals**, supporting recruitment and retention in Health Professional Shortage Areas. Eligible professionals receive up to \$50,000 in loan repayment for a two-year service commitment.
- The RI HPLRP is supported by federal funds from HRSA and private donations. In 2024, the program received 256 applications, funded 58 awardees with \$1.68 million with a waitlist of 44 applicants. **In the past 10 years 91% of recipients have remained in Rhode Island post service**, benefiting an estimated of 100,000 Rhode Islanders.

Gloria Gemma Breast Cancer Foundation

- The Governor recommends **\$50,000** in general revenue for the Gloria Gemma Breast Cancer Resource Foundation for the new survivorship and well-being center in Lincoln. This funding will give RIDOH an opportunity to collaborate with different organizations and businesses and bring more resources to more Rhode Islanders in need.
- The goal of RIDOH's Breast and Cervical Cancer Screening Program (BCCSP) is to reduce the burden of breast and cervical cancer among Rhode Islanders. Since its inception in the early 1990s, the BCCSP has worked with providers in the State to provide free breast and cervical cancer screening services to uninsured Rhode Islanders. With the support of federal and State funds, eligible participants enrolled in the program receive these free preventive screening services through more than 200 participating providers in Rhode Island. The program and its partners believe that all at-risk Rhode Islanders should be able to get screened, regardless of income or insurance status.

SFRF and Rhode Island Capital Plan (RICAP)

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RIDOH SFRF – RI Free Clinic, Open Door Health

RIDOH manages SFRF for two pass-through projects: the Rhode Island Free Clinic (RIFC) and the Open Door Health (ODH) Clinic.

| Project | Allocation | Expenditures as of 2/28/25 | Obligations to US Treasury as of 2/28/25 | Percent Exp |
|--------------------------|-------------|----------------------------|--|-------------|
| Rhode Island Free Clinic | \$2,000,000 | \$1,823,848 | \$1,823,848 | 91% |
| Open Door Health | \$2,000,000 | \$2,000,000 | \$2,000,000 | 100% |

- During the pandemic, the RIFC was unable to obtain sufficient volunteer medical personnel to meet demand for services. Through this SFRF funding, RIDOH provided a grant to RIFC to hire permanent staff in the amount of 6.74 paid FTEs and satisfy operational needs to stabilize operations to withstand future disruptions.
- RIFC’s goals are to improve statewide access and quality of primary care for uninsured adults, to increase access to dental care for uninsured adults, and to integrate with the statewide telehealth and electronic medical records system.
- SFRF funding was granted to ODH to acquire land to construct a building to expand its physical capacity, including the number of exam rooms, therefore resulting in an increase in the number of people they serve. Facility construction is moving forward. ODH recently established a Building Committee, and the chair is the former CEO of Meeting Street who previously constructed a commercial building and has brought his expertise to ODH’s process. They are currently fine tuning the architectural plan and have selected a construction manager.

State Fiscal Recovery Funds (SFRF)

- SFRF was awarded to RIDOH for FY 24 ongoing COVID-19 response activities for three projects (see table below). The timeline for using the funds was extended through FY 25 per the Pandemic Recovery Office. All remaining funds are obligated and are expected to be fully expended in FY 25.

| Project | Original Project Budget | Approved Budget Change | Revised and Reduced Project Budget | Spent through 2/28/2025 | Percent of Budget Expended |
|--|-------------------------|------------------------|------------------------------------|-------------------------|----------------------------|
| COVID-19 Testing Support | 8,916,800 | (6,146,574) | 2,770,226 | 2,706,558 | 98% |
| COVID-19 Epidemiology and Operations Support | 10,948,478 | (867,757) | 10,080,721 | 9,192,281 | 91% |
| COVID-19 Analytics and Operational Support | 15,044,300 | 4,301,836 | 19,346,136 | 17,070,213 | 88% |
| Totals | 34,909,578 | (2,712,495) | 32,197,083 | 28,969,052 | 90% |

RIDOH Rhode Island Capital Plan (RICAP) Projects

- State Health Laboratory building
- RIDOH received \$81.7 million of federal funds on the Epidemiology and Laboratory Capacity (ELC) grant for new health laboratory through July 2026. Additional funding includes **\$11.6 million from Rhode Island Capital Plan Funds (RICAP)** and \$4.4 million from the Department's indirect.
- State Laboratories and Office of Medical Examiners equipment
 - Total funding of **\$400,000 from RICAP** for FY 26; total funding for the 6-year project is \$2.8 million.
 - Funding for this project will be utilized for much of the agency's equipment, which is outdated or no longer supported by the vendor. This equipment is used to provide necessary testing services.
- Chapin Health Laboratory (DOA)
 - Total funding of **\$1.2 million from RICAP** from FY 25 through FY 27 to upgrade the HVAC control system and asset protection for any issues that should arise until new lab building is ready for occupancy.

RIDOH Rhode Island Capital Plan (RICAP) Projects

- Cannon Building (DOA)
- Total funding of **\$15.9 million from RICAP** from FY 25 through FY 30 for repairs/renovations to the Cannon Building, which includes, but is not limited to, weather-proofing the building; restroom renovations; auditorium restoration; and replacement of HVAC equipment, boiler, and air handlers.
- Medical Examiner's Office (DOA)
- Total funding of **\$2.5 million from RICAP** and \$0.3 million in federal awards from FY 25 through FY 30 for the configuration of a new Medical Examiners' building in Cumberland, in which, construction was completed. Relocation of Medical Examiner operations took place in January 2025.

Recruitment and Staffing

—
An Update on, Hiring, Recruitment,
and Retention

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Staffing



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FTE Recruitment and Cap Process

- As of March 2025, RIDOH has **554.6 filled FTEs** out of 572.6.
- The current FTE cap is 572.6 due to 3 Communications FTEs transferring to EOHHS in FY 25.
- RIDOH currently has 38 vacancies in active recruitment. RIDOH has continued to hire new staff within the FTE cap and address turnover.
- When vacancies occur, RIDOH leadership determines the highest priority positions that need to be filled at that time and gives permission to proceed with recruitment up to cap.
- Given that there was only enough room to include **FTE filled positions and priority vacancies** in the FTE cap, **RIDOH requested 20 backfill vacancies under Miscellaneous Expenses in Operating Budget.**
- RIDOH has an increasing number of federal grants that have specific FTE requirements to be hired within a timeframe. Inability for RIDOH to do so would jeopardize funding.

FTE Recruitment and Cap Process Continued

- The Governor recommends **\$154,300** in Restricted Receipt Funding through the Marijuana Trust Fund for the **addition of 1 FTE for the oversight of cannabis testing laboratories**. The position will focus on managing the increasing demands of cannabis product testing, responding to compliance investigations, and ensuring that Rhode Island's cannabis products meet stringent public health and safety standards.
- The Governor recommends **\$173,608** in general revenue, **\$180,269** in all sources of funds to recognize efficiencies of work performed within the division of Data, Information, and Health Systems Planning. This includes a **reduction of 1 FTE and 1 contractor position through consolidation and streamlining of administrative functions** within the Department.

Questions?

