

**STATE OF RHODE ISLAND
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES**

**3/28/2016 PUBLIC NOTICE OF PROPOSED CATEGORY III CHANGE TO
RHODE ISLAND'S COMPREHENSIVE 1115 WAIVER DEMONSTRATION**

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) will seek federal authority to implement the following Category III Change to Rhode Island's Comprehensive 1115 Waiver Demonstration (project no. 11-W-00242/1):

Rhode Island Medicaid Health System Transformation Project

As part of Governor Gina Raimondo's effort to reform Medicaid, the Working Group to Reinvent Medicaid issued an April report that recommended numerous initiatives to achieve financial savings in State Fiscal Year 2016. The Governor introduced those recommendations in a budget article entitled, "The Reinventing Medicaid Act of 2015." The Rhode Island General Assembly passed the Reinventing Medicaid Act in June.

As a result of the Act's passage, EOHHS has begun implementation of a performance-based payment program for hospitals and nursing homes. The payments will reward providers for meeting certain quality standards that shift Medicaid to a value-based delivery system focused on quality patient care and outcomes. The payments will also support development of accountable entities (AEs).

This Category III waiver change requests the use of costs not otherwise matchable (CNOM) authority to receive federal matching funds for services currently provided by various state agencies. The CNOMs will support a new Designated State Health Program (DSHP). The DSHP is aimed at supporting the Medicaid program's ongoing efforts to provide comprehensive, quality care to its members. These funds, totaling an estimate of approximately \$32.2 million for the first year and \$147.5 million over five (5) years, will subsequently be used to support the ~~performance-based payment programs.~~

This Category III request seeks federal authority to claim federal matching funds for the following services;

- Consumer assistance provided by the Office of the Child Advocate, Office of the Mental Health Advocate, Commission on the Deaf and Hard of Hearing, and Governor's Commission on Disabilities
- Infectious disease surveillance, clinical case review, and investigation by the Rhode Island Department of Health, Center for Acute Infectious Disease Epidemiology
- Certain state university and college health professional training program expenditures specifically devoted to training the health workforce that will be needed to provide health care to Medicaid enrollees in the transformed delivery system of provider-based Accountable Entities. Training will be provided at the Community College of Rhode Island, Rhode Island College, and the University of Rhode Island

- Consumer navigation assistance provided through RIREACH, the Rhode Island Health Insurance Consumer Support Line, which is overseen by the Office of the Health Insurance Commissioner
- Hearing screening, and any necessary diagnostic testing or referral services, for children at all Rhode Island public and private schools provided by the Rhode Island School for the Deaf, Hearing Center
- Diagnostic testing, case management services, and treatment services for uninsured or underinsured individuals with suspected or confirmed tuberculosis (TB) disease or latent TB infection, provided by The Miriam Hospital's RISE TB Clinic, overseen by the Rhode Island Department of Health
- Loan repayments for graduates enrolled in the Wavemaker Fellowship, a loan repayment program administered by the Rhode Island Department of Commerce, who work in a Rhode Island healthcare setting which serves Medicaid enrollees

This proposed Category III change is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-1965 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by April 27, 2016 to Melody Lawrence, Executive Office of Health and Human Services, Hazard Building, 74 West Road, Cranston, RI, 02920, or melody.lawrence@ohhs.ri.gov.

In accordance with the Rhode Island General Laws 42-35-3, a hearing will be conducted to receive public testimony on the proposed Category III change if requested by twenty-five (25) persons, or by an agency or association having at least twenty-five (25) members. A request for a hearing must be made within thirty (30) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or disability in acceptance for or provision of services or employment in its programs or activities.

Designated State Health Programs – Consumer Assistance Programs

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

Executive Office of Health and Human Services

State Budget Reference (unless noted)

Program Name

Consumer Assistance: Office of the Child Advocate; Office of the Mental Health Advocate; Commission on the Deaf and Hard of Hearing; Governor’s Commission on Disabilities

Program Code

Program Description (Expand on current description to identify specific service descriptions)

The Office of the Child Advocate (OCA) is an independent and autonomous Rhode Island state agency responsible for protecting the legal rights and interests of children in state care. OCA:

- monitors public and private residential placement facilities and shelters and conducts periodic on site visits
- is empowered to initiate litigation on behalf of children in state care
- may convene a formal investigative commission for any child fatality in which the child victim has any connection with DCYF
- assesses the quality of programs, interviews children, verifies any report of institutional abuse, and recommends corrective actions to be taken
- provides assistance to children in state care who may be entitled to crime victim compensation and pursues legal actions on behalf of certain child victims of sexual and/or severe physical abuse

The Office of the Mental Health Advocate is an independent state agency staffed by attorneys who are mandated to:

- protect and advocate for the rights of people with mental illnesses
- to investigate reports of abuse and neglect in facilities that care for or treat individuals with mental illnesses. These facilities, which may be public or private, include hospitals, nursing homes, community facilities, board and care homes, homeless shelters, jails, and prisons
- provide advocacy services or conduct investigations to address issues that arise during transportation or admission to such facilities, during residency in them, or within 90 days after discharge from them

The Commission on the Deaf and Hard of Hearing coordinates the promotion of an accessible environment in which deaf and hard of hearing persons in Rhode Island are afforded equal opportunity in all aspects of their lives. The commission:

- develops policy and recommends appropriate programs and legislation to enhance cooperation and coordination among agencies and organizations now serving, or having the potential to serve, the deaf and hard of hearing
- promotes greater accessibility to services for the deaf and hard of hearing by developing awareness, communication access, and training programs to agencies, organizations, and businesses
- provides statewide centralized sign language interpreter referral services, including emergency referrals
- implements RI’s comprehensive statewide strategic plan for children who are deaf or have hearing loss, and works with Medicaid and other state agencies serving low income Rhode Islanders to assure

Designated State Health Programs – Consumer Assistance Programs

compliance with the Americans with Disabilities Act and to improve access to services and the quality of life for deaf and hard of hearing persons in Rhode Island

The Governor's Commission on Disabilities is responsible for ensuring state agencies comply with the state/federal disability rights laws. It is willing to be a mediator in solving disability discrimination complaints and to explore options for resolving the complaint.

Employment Resources

- Vocational Rehabilitation Program offered by the RI Office of Rehabilitation Services
- Veterans' Recruitment Appointment
- Rhode Island Business Leadership Network

Disabilities Education Act

- Is a public state and federally funded program that assists individuals with disabilities to choose, prepare for, obtain and maintain employment

Assistive Technology

- Promotes greater independence by enabling people to perform tasks that they were formerly unable to accomplish, or had great difficulty accomplishing, by providing enhancements to or changed methods of interacting with the technology needed to accomplish such tasks

Comparable Service or Program Under Medicaid
Case Management Services and TB-Related Services - Case Management Services

Non-Medical Services Included
All services are non-medical

Process for Identifying Cost of Non-Medical Services
N/A

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)
Office of the Child Advocate – children under age 19
Office of the Mental Health Advocate – adults under 250% FPL with documented behavioral health issues
Commission on the Deaf and Hard of Hearing – adults under 250% FPL with a documented hearing problem
Governor's Commission on Disabilities – disabled adults under 250% FPL

Age of Eligible Individuals Covered Under this Program
Varies by program

Number of Clients served - FFY most current*
Varies by program

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)
Services are provided to eligible populations free of charge

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?
These services are not in demonstration.

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)
State inter-governmental transfer

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)
\$1,900,000 in state general revenue.

* FFY - Federal Fiscal Year (October 1 - September 30)

Designated State Health Programs – Consumer Assistance Programs

Most current* Expenditures (Gross: Federal/State/Local)

\$792,000 (Federal fiscal year 2016 approximate expenditures through February 2016)

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$1,900,000 in state general revenue

If used as MOE, which Federal Grant

N/A

Designated State Health Programs – Center for Acute Infectious Disease Epidemiology

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

RI Department of Health

State Budget Reference (unless noted)

Program Name

Center for Acute Infectious Disease Epidemiology

Program Code

Program Description (Expand on current description to identify specific service descriptions)

This program conducts surveillance, clinical case review, and disease investigation for 86 reportable infectious diseases. Diseases include: Bacterial meningitis, food-borne diseases/outbreaks (e.g., salmonella, acute viral Hepatitis A), and vector-borne diseases (e.g. Lyme disease, Hantavirus, Eastern Equine Encephalitis, and West Nile Virus). Diseases reported by providers are risk assessed, case managed, investigated, tracked, and controlled at the state level, and ultimately reported to the Centers for Disease Control and Prevention (CDC).

Animal Bites Program:

This program provides complete case management related to animal bites and human expose to animal rabies. The program provides clinical guidance to medical professionals to ensure that person(s) exposed or at risk for animal rabies are appropriately treated. This program operates a 24/7 on-call animal bite case management system.

Bioterrorism/Public Health Emergencies (e.g. pandemic influenza):

This program enables the Division to maintain staffing capacity to closely monitor all reports of potential agents of bioterrorism (e.g. Anthrax, Plague, Ricin, Tularemia, Smallpox). This program maintains a 24/7 surveillance and response system for agents of bioterrorism. In addition, the program staff is trained to provide expert response for major disease outbreaks and public health emergencies (e.g. Mycoplasma, pandemic influenza, Ebola Viral Disease, and Middle Eastern Respiratory Syndrome Corona Virus) that pose an imminent threat to the public's health.

Comparable Service or Program Under Medicaid

Case Management Services and TB-Related Services - Case Management Services

Non-Medical Services Included

None

Process for Identifying Cost of Non-Medical Services

N/A

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)

Rhode Island residents

Age of Eligible Individuals Covered Under this Program

Rhode Island residents

Designated State Health Programs – Center for Acute Infectious Disease Epidemiology

Number of Clients served - FFY most current*

The Center's clinical staff handles approximately 1700 call a year from concerning individuals and clinicians seeking guidance about reportable and non-reportable diseases. Additionally, clinical staff investigate approximately 4400 disease reports annually.

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)

N/A

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?

These services are not in demonstration.

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)

State inter-governmental transfer

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

\$180,000 in state general revenue

Most current* Expenditures (Gross: Federal/State/Local)

\$75,000 (Federal fiscal year 2016 approximate expenditures through February 2016)

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$180,000 in state general revenue

If used as MOE, which Federal Grant

N/A

Designated State Health Programs – Health Workforce Development

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

University of Rhode Island, Rhode Island College, and Community College of Rhode Island

State Budget Reference (unless noted)

Program Name

Health Workforce Development Program

Program Code

Program Description (Expand on current description to identify specific service descriptions)

See description beginning on page 2

Comparable Service or Program Under Medicaid

Health Workforce development

Non-Medical Services Included

All services are non-medical

Process for Identifying Cost of Non-Medical Services

All costs are non-medical

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)

Health Professional Training Costs, which result in new health professionals employed in RI, serving Medicaid and other low-income populations.

Age of Eligible Individuals Covered Under this Program

N/A

Number of Clients served - FFY most current*

N/A

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)

N/A

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?

This service is not in the demonstration

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)

Certification of Public Expenditure (CPE)

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

\$28,500,000 in state general revenue

* FFY - Federal Fiscal Year (October 1 - September 30)

Designated State Health Programs – Health Workforce Development

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

Annual eligible budgeted expenditures of \$28,500,000 in general revenue funding

Most current* Expenditures (Gross: Federal/State/Local)

\$28,500,000 in state general revenue

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$28,500,000

If used as MOE, which Federal Grant

N.A.

Health Care Workforce Development for Rhode Island's Future

The State of Rhode Island is committed to transforming our health care system so that our citizens receive better care at a cost that is sustainable. For Medicaid, this means we have to better serve the mentally ill, provide better primary care, and provide for more home and community-based long term care. To make this shift, we need to change our health care workforce.

A 2014 study by the Rhode Island Department of Labor and Training (DLT) evaluated the state's current health care workforce and current health workforce training programs. The study aimed to assess Rhode Island's readiness to meet the health care needs of our population, particularly in light of the expansion in insurance coverage expected under the federal Affordable Care Act. We expect that, in the future, Rhode Island will need, at a minimum, more primary care practitioners, more mental health practitioners, and more community-based long term care practitioners. More recently, use of such supports as community health workers and mental health peer supports is thought to be a cost-effective means of serving high-risk populations with non-medical care.

Rhode Island has a higher education community that currently trains thousands of health care professionals each year. The University of RI, Rhode Island College, and Community College of Rhode Island annually train nurses, pharmacists, home health workers and numerous other health care professionals. The graduates of these programs largely remain in RI after graduation and work in health care settings that serve Medicaid and uninsured patients. We believe that we can document this connection, and we believe these workers will be critical to meeting our workforce needs in the coming years. However, to date there has been no explicit planning process to connect how we spend state dollars on health care workforce training and our broader health system goals. We propose to create such a link, very explicitly, and to use higher education expenditures as a powerful state-level tool for health system transformation.

We are working proactively and concertedly with our higher education community to assure that we are training practitioners to meet our future needs. We will accelerate these efforts in the coming months and develop and implement programs, in partnership with higher education, to encourage health care professionals to remain in Rhode Island after graduation and serve the needs of Medicaid clients and other vulnerable populations. Finally, we will better track our efforts to assure that state and federal investments in health care workforce development are resulting in more trained professionals in our areas of need, and greater retention of those professionals to serve our target populations.

* FFY - Federal Fiscal Year (October 1 - September 30)

Designated State Health Programs – Health Workforce Development

The 2014 DLT study concluded that RI is not preparing the workforce needed for the future. DLT predicts that RI will have an unmet need for primary care practitioners (physicians, PAs, NPs), mental health professionals, community nurses, home health professionals, and other community-based health care professionals with associates, bachelors, or graduate degrees. The health care delivery system cannot transform without a significant infusion of new health professionals as well as retraining of the current workforce.

Medicaid is developing an exciting new Health Workforce partnership with RI's three public higher education institutions, the University of Rhode Island (URI), Rhode Island College (RIC), and the Community College of Rhode Island (CCRI), as well as with the Department of Labor and Training (DLT) and other critical organizations. This partnership will involve our Medicaid managed care organizations (MCOs) and Accountable Entities (AEs) as well, to align workforce development with the needs of the primary drivers of change in our health system. We propose launching this effort formerly by July 2016, supported by a full-time staff person and guided by a formal steering committee that includes the three higher education institutions, AEs and other major provider organizations, MCOs, state officials and consumer representatives. The work of the steering committee will build on the DLT study and aim to:

- Assess current health care provider supply and demand and project how they will change over the next ten years;
- Identify gaps in the current educational programs and graduate pipeline;
- Agree on how best to fill those gaps and design programs to train the professionals we most need;
- Develop a plan for filling the pipeline with trainees in our areas of need, for partnering with health care organizations to employ our trainees, and for retaining our trainees after graduation.

To advance this work, we are requesting federal matching of current state expenditures on higher education funding for health care workforce development in RI. Our specific request is outlined below.

Health Workforce Development DSHP Request

One of the financing sources for the Medicaid Health System Transformation Program will be a new Designated State Health Programs (DSHPs) under RI's current Medicaid 1115 Waiver, which will provide Medicaid coverage, over five years, of certain state university/college health professional training program expenditures SPECIFICALLY devoted to training the health workforce of the future, that will be needed to provide health care to Medicaid enrollees in the transformed delivery system of provider-based Accountable Entities.

~~The DSHP will provide reimbursement of a portion of core health professional training costs at the 3~~ colleges/university. The portion of actual state expenditures to be reimbursed as a DSHP will be limited to a percentage of costs equal to the percentage of graduates of these programs who stay and work in their profession in RI in a setting that serves the Medicaid population.

We estimate that the State of Rhode Island will spend \$28,500,000 annually between July 1, 2016 and December 31, 2018 at the three state colleges/universities to train health professions graduates who remain and work in RI and serve underserved populations after graduation. This includes only the direct cost of educating graduates, and does not include other costs, such as indirect costs, buildings, or grounds. The figure is adjusted to reflect the percent of students who are estimated to remain and work in RI after graduation.

RI is requesting that Medicaid cover these actual eligible expenditures over a 5-year period from July 1, 2016 through June 30, 2021, at an estimated total expenditure of up to \$142,500,000. This would result in a federal expenditure not to exceed \$71,250,000 over five years.

Because this request spans two waivers, RI is requesting that claiming for Workforce Training begin on July 1, 2016 and be approved through December 31, 2018, the end of the current approved 1115 waiver period. This makes a total request to cover the actual expenditures over 2.5 years, at an estimated total expenditure of \$71,250,000, all

Designated State Health Programs – Health Workforce Development

funds. This assumes a federal share of approximately \$35,625,000 over 2.5 years, which is well within RI's approved CNOM/DSHP budget assumptions in the currently approved "with waiver" budget neutrality agreement.

Rhode Island also requests that this DSHP be renewed with the next waiver extension request, limited to an additional 2.5 years, which would be a total workforce development DSHP request in the next waiver of \$71,250,000 all funds, which will be an additional federal share request of \$35,625,000 in the renewal of RI's 1115 waiver renewal beginning Jan 1, 2019.

Tracking eligible expenditures and evidence that RI's health professional training programs encourage graduates to stay in RI and serve vulnerable populations

Determining the number of graduates staying in RI to work in their professions: Medicaid will engage the colleges in tracking students post-graduation for this purpose, and will also use health professional licensure data on new licensees at the RI Department of Health to assist in tracking and verifying the number of new graduates from health professions training programs at RI state colleges and university who stay and work in RI.

Determining the portion of grads working in RI who serve Medicaid enrollees: A quarter of RI's population is now enrolled in Medicaid. Eighty five percent of RI's Medicaid population is enrolled in health plans under RI's fully capitated Medicaid managed care program. Since 1994, RI has required any provider who participates in a health plans' commercial business to also participate in Medicaid managed care, and be open to new patients equitably. Medicaid managed care enrollees can choose their own providers from any open provider in their health plan. Because of this, RI does not have a two-tiered delivery system as other states may, where Medicaid enrollees have more restricted access than commercial enrollees. Virtually all health care providers in Rhode Island serve commercially insured, Medicaid and Medicare populations equitably. Therefore, our assumption will be that all RI health professional grads who obtain a RI professional license to stay and work in RI in their professions will be working in their profession in a provider organization which serves Medicaid enrollees.

All RI's universities and colleges imbed in their professional training programs encouragement, skills development and experience in effectively serving a culturally diverse, low income population.

University of Rhode Island (URI)

The University of RI has recognized the need for collaboration among providers and training programs by forming the Academic Health Collaborative (AHC). The collaborative, which will be officially in place by July 2016, is comprised of the Colleges of Pharmacy and Nursing, as well as the new College of Health Sciences. The Institute for Integrated Health and Innovation, a key feature of the new Collaborative, is in the process of being created. The Institute is designed to facilitate interdisciplinary collaboration among faculty, students, and professionals in the community through teams of multidisciplinary health experts.

URI's health professions training programs provide students with multiple training experiences in meeting the needs of low income patients. For example, the Pharmacy Program provides training in nursing homes and Disproportional Share Hospitals (DSH). The College of Nursing has a HRSA-funded Area Health Education Center (AHEC) imbedded in the College. The AHEC aims to develop high quality, culturally competent healthcare workers by recruiting and supporting students as they progress through their academic careers. Through this Center, in collaboration with community partners, the URI College of Nursing recruits and trains nurses to work in RI health care settings which provide care to populations who at at-risk due to such issues as poverty, homelessness, cultural and language issues, or being uninsured or underinsured. Clinical experience includes skilled nursing facilities where the vast majority of patients are Medicaid enrolled, hospitals that serve a disproportionate share of Medicaid and uninsured populations, prison health clinics, the RI Free Clinic and community health centers. Faculty and students participate in Primary Care Clinics at Crossroads on a regular basis, which provides shelter, food and health care to RI's homeless population.

Designated State Health Programs – Health Workforce Development

URI draws students from states throughout the region. URI's Health Professions Training Programs graduate over 1200 students per year, almost half of whom stay in Rhode Island and work in their profession in settings which serve significant numbers of Medicaid enrollees.

URI's Health Professions Training Programs include:

- Communicative Disorders
- Gerontology
- Health Studies
- Human Development
- Human Science and Services
- Kinesiology
- Medical Lab Science
- Nursing Nutrition
- Pharmacy
- Physical Therapy
- Psychology

Rhode Island College (RIC)

Rhode Island College has well-recognized programs in nursing and social work. Both programs train graduates for professional licensure and careers where graduates are well-prepared to serve disadvantaged populations, including Medicaid, uninsured, disabled, and homeless individuals and families.

The College of Nursing graduates over 450 students annually. Nurses are prepared to serve the most difficult to treat populations, including training at the Rhode Island Free Clinic, Eleanor Slater (long term care) Hospital, community health centers, and schools for children with disabilities. More than 90 percent of RIC Nursing graduates stay in RI immediately after graduation and work in all types of health care agencies, including long term care, acute care, and community-based programs.

RIC's School of Social Work offers an MSW, which prepares students as practitioners and clinicians working in Behavioral Health Care. The social work program prepares practitioners to work with low income, disadvantaged populations, including Medicaid and the uninsured.

The Health Care Administration program was developed as an interdisciplinary program between the Schools of Management and Nursing. The program prepares students to work in health care settings including clinics, hospitals, long term care organizations, assisted living facilities, mental health organizations, public health departments, physician practices, health care associations, and rehabilitation centers. Students complete internships in a variety of settings including nursing homes, assisted living facilities, health centers, hospitals, health plans, physician offices, and the state Medicaid office.

Drawing principally from Rhode Island, 90 percent of the RIC health services curriculum graduates stay and work in RI in their profession post graduation, in settings that serve Medicaid enrollees. RIC offers health professional training programs in the following areas:

- Nursing
- Social Work
- Health Care Administration
- Addiction & Behavioral Health
- Community Health & Wellness
- Health Professions Certificate Programs

Community College of Rhode Island (CCRI)

CCRI offers associates degree programs in nursing, dental hygiene, and several other health professions. Students receive community-based experience as an integral component of their training, preparing students to service Rhode Island’s diverse, multicultural, and low-income populations. The Dental Hygiene is well known for the Dental Clinic they operate, in which the students receive training and practice, and Rhode Islanders can receive cleaning and exams, sealants, or radiographs for a nominal fee. As Rhode Island has a high number of dental uninsured, and its adult Medicaid dental benefit is very limited, this clinic provides valuable services to Medicaid enrollees and the uninsured, as well as trains students to treat high risk populations with untreated dental needs. More than 90 percent of CCRI’s health students remain in Rhode Island to work in their field. CCRI offers the following health professions training programs:

- Nursing
- Medical Assistant
- Respiratory Therapy
- Dental Assistant
- Dental Hygiene

Designated State Health Programs - RIPIN

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

Office of the Health Insurance Commissioner

State Budget Reference (unless noted)

Program Name

Rhode Island Parent Information Network info Line

Program Code

Program Description (Expand on current description to identify specific service descriptions)

RI Reach, part of the Rhode Island Parent Information Network (RIPIN) programs, provides a statewide Rhode Island's Health Insurance Consumer Support Line that empowers consumers to get what they need from their coverage by helping consumers navigate the process. RI Reach:

- assists Rhode Island residents with information about eligibility; enrollment, and benefits
- assists Rhode Island residents with questions about existing care or difficulties accessing care
- screens for potential Medicaid eligibility, including the new Medicaid adult expansion group
- assists with locating participating providers
- assists callers with completing and filing complaints or grievances
- provides outreach and information about the availability of consumer assistance line

Comparable Service or Program Under Medicaid

Case Management Services and TB-Related Services - Case Management Services

Non-Medical Services Included

Non-medical case management, application assistance

Process for Identifying Cost of Non-Medical Services

All costs are non-medical

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)

Rhode Island residents

Age of Eligible Individuals Covered Under this Program

All ages

Number of Clients served - FFY most current*

Approximately 3000 Rhode Islanders served annually

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)

Free service for Rhode Island residents

* FFY - Federal Fiscal Year (October 1 - September 30)

Designated State Health Programs - RIPIN

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?

This service is not in the demonstration

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)

State inter-governmental transfer

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

\$400,000 in state general revenue

Most current* Expenditures (Gross: Federal/State/Local)

\$167,000 (Federal fiscal year 2016 approximate expenditures through February 2016)

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$400,000 in state general revenue

If used as MOE, which Federal Grant

N/A

Designated State Health Programs – RI Child Audiology Center

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

RI School for the Deaf

State Budget Reference (unless noted)

Program Name

Hearing / Screening Center

Program Code

Program Description (Expand on current description to identify specific service descriptions)

Provides statewide hearing screening for children at all Rhode Island public and private schools; further diagnostic testing and referral for treatment, if appropriate, is provided for any child who screens at-risk for hearing loss.

Comparable Service or Program Under Medicaid

Early and Periodic Screening, Diagnostic, and Treatment Services (EPSDT)

Non-Medical Services Included

None

Process for Identifying Cost of Non-Medical Services

N/A

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)

School-age children under 19

Age of Eligible Individuals Covered Under this Program

School-age children under 19

Number of Clients served - FFY most current*

55,000 children screened annually

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)

Free clinic services

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?

This service is not in the demonstration

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)

State inter-governmental transfer

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

\$554,398 in state general revenue

* FFY - Federal Fiscal Year (October 1 - September 30)

Designated State Health Programs – RI Child Audiology Center

Most current* Expenditures (Gross: Federal/State/Local)

\$230,000 (Federal fiscal year 2016 approximate expenditures through February 2016)

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$554,398 in state general revenue

If used as MOE, which Federal Grant

N/A

Designated State Health Programs – Tuberculosis Clinic

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

Department of Health

State Budget Reference (unless noted)

Program Name

TB Clinic

Program Code

Program Description (Expand on current description to identify specific service descriptions)

Miriam Hospital’s RISE tuberculosis (TB) Clinic serves all RI residents with TB. All patients with suspected or confirmed TB disease or latent TB infection can be referred to the RISE Clinic for TB specialty care. The Clinic provides TB Specialty Clinical Services (adult and pediatric clinical services) including special negative pressure examination rooms, laboratory and radiological testing, and drugs packaged for daily observed therapy at patient homes.

RI Department of Health has a contract with the Miriam Hospital’s Statewide TB clinic to pay for drugs, lab tests, and other services provided by the clinic to the uninsured and under-insured. The underinsured include low income Rhode Island residents with coverage that has high deductibles or drug copays which are not affordable. This contract is paid for with \$300,000 in General Revenue.

Comparable Service or Program Under Medicaid

Case Management Services and TB-Related Services—Special TB-Related Services

Non-Medical Services Included

None

Process for Identifying Cost of Non-Medical Services

N/A

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)

Uninsured or under-insured people under 250% FPL

Age of Eligible Individuals Covered Under this Program

Adults over 19

Number of Clients served - FFY most current*

The clinic sees approximately 800 patients for 4400 patient visits per year.

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)

Free clinic services for the uninsured

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?

This service is not in demonstration

* FFY - Federal Fiscal Year (October 1 - September 30)

Designated State Health Programs – Tuberculosis Clinic

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)

State Inter-governmental transfer

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

\$300,000 in state general revenue

Most current* Expenditures (Gross: Federal/State/Local)

\$125,000 (Federal fiscal year 2016 approximate expenditures through February 2016)

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$300,000 in state general revenue

If used as MOE, which Federal Grant

N/A

Designated State Health Programs – Health Workforce Loan Repayment

Please complete the form below for each program/service identified in the demonstration, providing a current, specific and complete description. The Q&A field information may be copied and pasted on subsequent pages, with a page break at the beginning of each new program/service.

Agency

RI Department of Commerce

State Budget Reference (unless noted)

Program Name

Wavemaker Loan Repayment Fellowship

Program Code

Program Description (Expand on current description to identify specific service descriptions)

The Wavemaker Fellowship is a state-funded loan repayment program. To be eligible, an applicant for the fellowship must have incurred student loan debt during the completion of an associate's, bachelor's, or graduate degree and must work in Rhode Island in the health or medical cares. Those who qualify are awarded a loan repayment amount over 2 to 4 years. Payment is made to the graduate on an annual basis. The Rhode Island Department of Commerce is responsible for state tax filing, collecting tax payments, and of making refunds as appropriate for RI residents. The department uses this system to make the loan repayments by issuing a state tax credit to the graduate as the vehicle for payment. Fellowship awardees receive an annual redeemable tax credit for up to four years. The annual tax credit amount will equal the fellow's annual loan repayment expenses, currently subject to the following caps: \$6,000 for a fellow with a graduate degree, \$4,000 for a fellow with a bachelor's degree, and \$1,000 for a fellow with an associate's degree.

Rhode Island proposes a federal match to loan repayments for program enrollees. Loan repayments which qualify for Medicaid matching funds under this proposal will be limited to those funds awarded to recipients who work in a Rhode Island health care setting which serves Medicaid enrollees. Recipients will be specifically identified as meeting this qualification by the Wavemaker Program Administrator at the Rhode Island Department of Commerce. This information along with each individual's annual loan repayment amount will be provided to Medicaid by the department on an annual basis after the payment is made. This will be used to determine the amount eligible to be claimed for federal match.

Comparable Service or Program Under Medicaid

Health workforce development

Non-Medical Services Included

All services are non medical

Process for Identifying Cost of Non-Medical Services

All costs are non medical

Eligibility (e.g. groups and income, including approx. proportion of adults under 200% FPL)

Recent graduates receiving a state loan repayment who work in Rhode Island's health care industry, at an employer who serves a significant Medicaid population.

Age of Eligible Individuals Covered Under this Program

Adults over 19

Designated State Health Programs – Health Workforce Loan Repayment

Number of Clients served - FFY most current*

Approximately 100 recently graduated health professionals participate in this state loan repayment program each year.

What Delivery System is Utilized? (e.g. capitated managed care, FFS, block grant, PCCM)

N/A

Is Service also in the Demo? If so, how will you ensure billing for costs is not duplicated?

This service is not in the demonstration

Method of Payment (e.g. Offline - vouchers & warrants, Online - MMIS, other?)

State tax credit

Most current* Budget for Programs Identify sources and type of funding (Federal/State/Local)

\$400,000 in state general revenue

Most current* Expenditures (Gross: Federal/State/Local)

Approximately \$167,000 in state general revenue

"Matched Amount (Federal Amount)"

N/A

"MOE Amount (Amount required for State to draw down Federal grant money)"

N/A

Unmatched Amount including MOE

\$400,000 in state general revenue

If used as MOE, which Federal Grant

N/A