



## **Bulletin 2022-3**

### **Issued September 7, 2022**

### **Effective September 8, 2022**

## **Social and Human Service Programs Review Scope**

### **Introduction**

The State of Rhode Island Office of the Health Insurance Commissioner (OHIC) issues this bulletin to inform state agencies, health care providers, and the public at large of information concerning the scope of comprehensive reviews conducted by OHIC of all social and human service programs having a contract with or licensed by the state, inclusive of the State of Rhode Island Executive Office of Health and Human Services (EOHHS) and the state agencies under its purview, as required by [State of Rhode Island General Laws \(RIGL\) § 42-14.5-3\(t\)](#). This review is required to encompass the completion of analyses, reports, and studies to be published January 1, 2023, April 1, 2023, and September 1, 2023 as follows:

1. An assessment and detailed reporting on social and human service program rates, including rates currently being paid and the date of the last increase to be published by January 1, 2023
2. An assessment and detailed reporting on utilization trends from the period of January 1, 2017 through December 31, 2021 for social and human service programs to be published by January 1, 2023
3. An assessment and detailed reporting on eligibility standards and processes of social and human service programs to be published by January 1, 2023
4. An assessment and detailed reporting on the structure of the state government as it relates to the provision of services by social and human service providers including eligibility and functions of the provider network to be published by January 1, 2023
5. An assessment and detailed reporting on accountability standards for services for all social and human service programs to be published by January 1, 2023
6. An assessment and detailed reporting on professional licensed and unlicensed personnel requirements for established rates for social and human service programs pursuant to a contract or established fee schedule to be published by April 1, 2023
7. An assessment and detailed reporting on access to social and human service programs, to include any wait lists and length of time on wait lists, in each service category to be published by April 1, 2023
8. An assessment and reporting of national and regional Medicaid rates in comparison to Rhode Island social and human service provider rates to be published by April 1, 2023
9. An assessment and reporting on usual and customary rates paid by private insurers and private pay for similar social and human service providers, both nationally and regionally, to be published by April 1, 2023

**Protecting Consumers • Engaging Providers • Improving the System • Ensuring Solvency**

[www.ohic.ri.gov](http://www.ohic.ri.gov) • 1511 Pontiac Avenue • Building 69-1 • Cranston, RI 02920 • 401.462.9517

10. An assessment and review process that is completed on a biennial basis and includes the following components: eligibility, scope of services, relationship of social and human service, providers and the state, national and regional rate comparisons, and accountability standards that results in recommended rate adjustments to be published by September 1, 2023

OHIC also ensures that the review is conducted consistent with its statutory purpose outlined in [RIGL § 42-14.5-2](#).

### **Social and Human Service Program Definition Scope**

For purpose of specifying the scope of the review, in light of RIGL § 42-14.5-2.1(5) read within the context of RIGL § 42-14.5-2 and RIGL § 42-14.5-3(t), OHIC understands the definition of “social and human service program” to mean the array of services on the Medicaid fee-for-service (FFS) fee schedules. In addition, OHIC understands the definition to include the array of services financed by the state both through Medicaid and through other funding sources in the following subject areas: social, mental health, developmental disability, child welfare, juvenile justice, prevention services, habilitative, rehabilitative, substance use disorder treatment, residential care, adult or adolescent day services, vocational, employment and training, and aging.

### **State Definition Scope**

For purpose of specifying the scope of the review, in light of RIGL § 42-14.5-2.1(2) ) read within the context of RIGL § 42-14.5-2 and RIGL § 42-14.5-3(t), OHIC understands the definition of “state” to mean the following agencies and subdivisions of these agencies: EOHHS (inclusive of Medicaid), the State of Rhode Island Department of Behavioral Health Care, Developmental Disabilities, and Hospitals, the State of Rhode Island Department of Children, Youth, and Families, the State of Rhode Island Department of Health, and the State of Rhode Island Department of Human Services. In addition, OHIC understands the definition to include the State of Rhode Island Office of Healthy Aging and the State of Rhode Island Office of Veterans Services.

### **Out-of-Scope Rates**

For purpose of specifying the scope of the review, in light of RIGL § 42-14.5-2.1(3) read within the context of RIGL § 42-14.5-2 and RIGL § 42-14.5-3(t), OHIC understands rates that are determined through statutorily mandated methodologies to be out of scope. This includes, but is not necessarily limited to, Medicaid hospital rates (as outlined in [RIGL § 40-8-13.4](#)) and Medicaid nursing facility rates (as outlined in [RIGL § 40-8-19](#)).

Additionally, OHIC understands the rates negotiated for services between Medicaid managed care organizations (MCOs) and providers to be out of scope. However, while OHIC understands these negotiated rates for services in of themselves to be out of scope, OHIC also understands it to be necessary to take into account the relationship between the rates for services on the Medicaid FFS fee schedules and the rates negotiated by Medicaid MCOs and overall context of the role that Medicaid MCOs play in financing Medicaid services in order to successfully carry out RIGL § 42-14.5-3(t).

Finally, it is important to note that OHIC makes a distinction between out-of-scope rates and any prioritization decisions that will need to be made regarding which rates are analyzed during particular timeframes. OHIC expects that it will need to make prioritization decisions regarding which rates are analyzed during particular timeframes, informed by a range of factors, including but not to limited to those

factors suggested through public input, but any such prioritization should not be construed to mean that rates prioritized for analysis at a later time are out-of-scope.

### **Social and Human Service Program Review Advisory Council**

For the purpose of ensuring that the scope of the review is carried out to the highest standards of credibility, integrity, and transparency, in light of RIGL § 42-14.5-3(t)(2)(x) read within the context of RIGL § 42-14.5-2 and RIGL § 42-14.5-3(t), OHIC will convene a public body to act in an advisory capacity for the office on all aspects of the review. This body shall be known as the Social and Human Service Program Review Advisory Council with members appointed by the health insurance commissioner representing those with the requisite expertise related to social and human service programs. The health insurance commissioner shall charge council members with providing advice that is consistent with advancing the welfare of the public regardless of organizational affiliation and OHIC shall retain all decision-making authority to be exercised consistent with RIGL § 42-14.5-2 and RIGL § 42-14.5-3(t). Meetings of the council shall be conducted to allow providers, recipients, and other interested parties an opportunity to ask questions and provide comment.

### **Conclusion**

This bulletin shall take effect on September 8, 2022.

Dated at Cranston, Rhode Island this 7th day of September 2022.



Patrick M. Tighe  
Health Insurance Commissioner