

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2023

A N A C T

RELATING TO STATE AFFAIRS AND GOVERNMENT -- HEALTH CARE FOR
CHILDREN AND PREGNANT WOMEN

Introduced By: Senators Lauria, DiMario, Miller, Valverde, Lawson, Ujifusa, Murray,
Euer, Kallman, and Quezada

Date Introduced: February 16, 2023

Referred To: Senate Finance

It is enacted by the General Assembly as follows:

1 SECTION 1. Legislative findings.

2 The general assembly hereby finds as follows:

3 (1) Stable health coverage for infants and young children helps ensure children receive
4 high-quality and timely preventive health care, including vaccinations and screenings, routine care
5 for illnesses, specialized health care when needed, and emergency health care services;

6 (2) Routine physical and developmental screenings that occur over fourteen (14)
7 recommended scheduled well-child preventive health care visits from birth through age five (5)
8 years help to identify potential developmental delays and disabilities, as well as emerging vision,
9 hearing, dental, and physical conditions, as well as developmental delays and disabilities, as early
10 as possible so that further appropriate evaluations, interventions, and treatments can be provided;

11 (3) Young children experience six (6) to nine (9) acute, short-term illnesses per year that
12 can require a health care visit and treatment, including respiratory viruses, gastrointestinal illness,
13 croup, ear infections, conjunctivitis, fevers, and skin rashes and some young children have chronic,
14 long-term illnesses that require frequent health care visits for evaluations, diagnosis, treatment, and
15 management of these chronic conditions;

16 (4) At least fifty percent (50%) of infants and young children in Rhode Island have
17 Medicaid/Rite Care coverage;

18 (5) Children may temporarily lose their health coverage at the required yearly

1 redetermination of eligibility due solely to administrative barriers (commonly referred to as
2 “churn”);

3 (6) Continuous eligibility for RIte Track/RIte Care during infancy and the early childhood
4 years will prevent gaps in coverage, ensuring that children remain enrolled in their health plan with
5 consistent coverage so that they can receive timely and necessary preventative, routine, and
6 emergency care services and treatment for identified conditions to promote healthy development;
7 and

8 (7) Continuous eligibility also promotes health equity by limiting gaps in coverage for low-
9 income children who experience disproportionate rates of health disparities, particularly Children
10 of Color.

11 SECTION 2. Chapter 42-12.3 of the General Laws entitled "Health Care for Children and
12 Pregnant Women" is hereby amended by adding thereto the following section:

13 **42-12.3-17. Continuous coverage for children from birth through age five (5).**

14 (a) Individuals ages zero through five (5) years who are enrolled in RIte Track/RIte Care
15 pursuant to this chapter shall qualify for continuous eligibility until the end of the month in which
16 their sixth birthday falls. Continuous eligibility shall end if the individual is no longer a resident
17 of Rhode Island, the parent or guardian of the individual requests termination of eligibility, the
18 individual dies or the executive office of health and human services determines that eligibility was
19 erroneously granted.

20 (b) The executive office of health and human services shall seek any necessary
21 amendments to the Rhode Island Medicaid Section 1115 waiver to implement continuous
22 eligibility.

23 SECTION 3. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

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1 This act would provide children from birth through age five (5) years with continuous
2 coverage eligibility for RIte Track/RIte Care so that they are not at risk of losing coverage at the
3 yearly redetermination due solely to administrative barriers.

4 This act would take effect upon passage.

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