

# Executive Office of Health & Human Services Services for Older Rhode Islanders

The Executive Office of Health and Human Services (EOHHS) serves as the principal agency of the executive branch of state government (R.I.G.L. §42-7.2-2) responsible for overseeing the organization, finance and delivery of publicly funded health and human services. The agency mission is to foster and strengthen a community-driven, equitable, comprehensive, responsive, and high-quality health and human services system in Rhode Island.

EOHHS directly administers the State Medicaid Program and provides strategic support and direction to Rhode Island's other health and human services agencies, including:

- Rhode Island Department of Health (RIDOH)
- Department of Human Services (DHS)
- Department of Children, Youth, and Families (DCYF)
- Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH)
- Office of Health Aging (OHA)
- Office of Veterans Services (VETS)

EOHHS and its member agencies provided direct, safety-net services to over 350,000 Rhode Islanders in every city and town, every day. Collectively, these agencies also ensure an array of regulatory, protective, and health promotion services to Rhode Island's communities.

The State's Office of Healthy Aging (OHA) is Rhode Island's designated state agency on aging. They empower older Rhode Islanders (age 55+) and adults living with disabilities to age strong. Along with many partners, OHA connect older Rhode Islanders to information and resources in the community to help them live happily and healthfully. OHA's services include:

- Health insurance and health care cost assistance
- Caregiver supports
- Food and nutrition
- Supports for public benefits, legal, housing and transportation
- Fraud and abuse support

Besides OHA's comprehensive services for older Rhode Islanders, EOHHS and its agencies provide services for Rhode Islanders across the life span. Below are just some of the programs and services available for older Rhode Islanders.

## **Behavioral Health Services**

**BH Link and 988:** BH Link is a behavioral health facility providing immediate assistance to anyone in crisis with intervention services and connections to ongoing treatment and care. 988 offers 24/7 call, text and chat access to trained crisis counselors who can help people experiencing suicidal, substance use, and/or mental health crises, or any other kind of emotional distress.

**Butler Short Stay Unit:** The state funded a 25-bed Short Stay Unit at Butler Hospital, to provide mental health assessment and treatment initiation to divert from overcrowded emergency departments. The unit is expected to open at the end of June 2024.

**Certified Community Behavioral Health Clinics (CCBHCs)**: Our interagency team and providers are working towards an October 1<sup>st</sup> start date for Certified Community Behavioral Health Clinics (or CCBHCs) – a national set of standards for comprehensive behavioral health care that is jointly supported by the Centers for Medicare and Medicaid Services (CMS) and the Substance Abuse and Mental Health Services Administration (SAMHSA). This is a once in a lifetime opportunity to make generational change to the behavioral health system in the State. CCBHCs will enable us to build a stronger, more accessible, equitable, and sustainable behavioral health system for all Rhode Islanders. Eight CCBHC sites are currently Contingently Certified. All are expected to be Fully Certified and ready to Go Live October 1, 2024. When the state's CCBHC program starts on October 1<sup>st</sup>, 91% of Rhode Islanders will live in a catchment area with a CCBHC Two additional sites are actively pursuing certification and they may be Fully Certified by October 1, 2025. Finally, our team recently applied for a CCBHC Demonstration Grant from SAMHSA and will hear if our application is successful by mid-June.

**Community Mental Health Organizations**: Rhode Island has a network of six private, non-profit Community Mental Health Centers (CMHCs): Community Care Alliance, Gateway, The Providence Center, Thrive Behavioral Health, East Bay Community Action and Newport Mental Health. This network provides comprehensive behavioral health services to adults with behavioral health needs, including emergency services, general, and intensive community-based outpatient treatment. The CMHCs also coordinate and partner with additional resources in the community to benefit their clients, including local primary care clinics, local community action programs, affordable housing programs and housing services, benefit navigation, utilities assistance and resources to address food insecurity.

## **Dental Care**

EOHHS and its agencies have:

- Developed a Home Health (CAN) Mouth Care and Oral Health Assessment Training that has been accessed by over 117 Certified Nursing Assistants.
- Piloted Home Health and Community-Based Oral Health services estimated to serve 100-500 Medicaid eligible or enrolled clients with dental services.
- Recruited 47 Public Health Dental Hygienists to participate in the CCRI program—with 21 new practitioners already entering the workforce.
- Raised the Medicaid fee-for-service dental rates for the first time since 1992 to be aligned and competitive with the New England region.

### **Grandparent Kinship Care Support**

The Rhode Island Department of Children, Youth & Families (DCYF) provides supports to kinship foster families, which often include grandparents.

### Healthcare System Planning & Healthcare Workforce Initiatives

As part of his Rhode Island 2030 plan, which includes several goals related to our state's healthcare system, this spring Governor McKee signed an Executive Order establishing a state **Health Care System Planning Cabinet**. As the Health Care System Planning Cabinet lead, Secretary Charest's goal is to pull these planning processes together and establish a way forward that further stabilizes and strengthens our system. Part of the new healthcare planning process includes crosswalking and aligning these existing planning groups and initiatives into an overarching road map for additional healthcare system improvements in Rhode Island. We have held a few Cabinet meetings and Independent Advisory Committee meetings to date and look forward to presenting a report – with recommendations on next steps to strengthen our health care system – to Governor McKee by this December.

Regarding the health and human services workforce, Rhode Island is experiencing severe workforce shortages across health and human services – the state's single largest employment sector. Over 160 partner organizations, who have been

involved in an intensive stakeholder engagement process over the past two years, have voiced concerns of workforce shortages that are growing while the supply of workers is shrinking. **Our "Rhode Ahead" collaboration**, between EOHHS, the Rhode Island Department of Labor and Training, the Office of the Post-Secondary Commissioner, and hundreds of partners, has been working on innovative strategies to train new workers and retain the current workforce are needed to avoid worsening shortages. The combined efforts of our private and public partners also resulted in the development of a "<u>Rhode Map</u>" to "attract, train, and retain" the future healthcare workforce through further collaboration, investment, and innovation.

## **Housing Supports**

Over the last two years, EOHHS and its agencies have:

- Launched the Pay for Success pilot program and have engaged over 50 individuals eligible for the program in the first six months of operations. The program has housed 5 individuals and has assisted these clients in entering leases;
- Launched and expanded the Medical Respite program from 20 to 38 beds serving over 150 individuals who would have otherwise been discharged to homelessness;
- Created and implemented Mobile Medical Respite to provide wound care to 66 victims of Xylazine drug contamination and overdose; and
- Created a Municipal Supportive Services Resource Map to assist local organizations establish essential services for those who are unhoused or in need of supports.

#### Medicaid

- Long-Term Services and Supports (LTSS): Serves people who have disabilities or chronic care needs in the setting ideal for them and their families. Services may be episodic or ongoing. Services may be provided in a person's home, the community (for example, shared living or assisted living), or institutional settings (for example, intermediate care facilities, hospitals, or nursing homes) to optimize their health and retain their independence.
- Implementation of the new Hospital Licensing Fee structure
  - o <u>Hospital state directed payments</u>
- Launch of the Medicaid Managed Care Organization procurement
- OHIC rate review and recommended rate increases
- Non-Emergency Medical Transportation (NEMT) Rhode Island Medicaid enhanced the new NEMT contract with MTM
- \$10M in SFRF funding to nursing homes in advance of the October 2024 re-array (if approved by the legislature)
  State Plan Amendments (SPAs) for important programs:
  - <u>Ticket to Work</u>: implement a new eligibility group for working adults who have disabilities, as authorized by the Ticket to Work and Work Incentives Improvement Act. The pathway would offer Medicaid coverage to higher-income workers with disabilities who aside from earned income, meet the Social Security definition of disability. Premiums for this eligibility group are based on family income, beginning at 150% FPL on a sliding fee scale up to 5% of family income.
  - <u>Vaccine coverage expansion</u>: codify and expand the coverage, payment methodologies and permissible qualified providers of vaccines and their administration, including both COVID-19 and non-COVID-19 vaccines.
  - <u>Community health worker services</u>: Certified CHWs provide health promotion and coaching; health education and training; health system navigation and resource coordination services; and care planning with a member's interdisciplinary care team.
  - Several rate increases: <u>home care</u>, <u>home health agency</u>, <u>adult dental</u>, <u>nursing facilities</u>, among others.
- Medicaid Renewals:
  - Completion of one year of Medical Renewals
  - Distributed four rounds of mini-grants to community partners to support Medicaid renewals for the eight most vulnerable populations likely to be left behind in this process change.

 Achieved over 31,000 downloads of the Health Rhode mobile application and 92,693 unique Stay Covered RI website hits.

### **Overdose Prevention and Substance Use Treatment**

In January 2022, Rhode Island joined the **national opioid settlement** with three major opioid distributors, providing over \$90 million in funding for state and local efforts to address Rhode Island's opioid crisis. Together with additional settlements secured by the Attorney General's Office against several opioid manufacturers, Rhode Island's opioid litigation recoveries total more than \$166 million over the next 18 years.

Recommendations for opioid settlement funding are made to the Executive Office of Health and Human Services (EOHHS) Secretary Richard Charest, from the State's Opioid Settlement Advisory Committee. The Advisory Committee, as required by the national settlement agreement, is comprised of an equal number of state and municipal representatives, as well as expert and community representatives. The Advisory Committee receives public input on how to spend opioid settlement dollars from a wide array of professional and community participants in Governor Dan McKee's Overdose Task Force.

The Opioid Stewardship funds are maintained by EOHHS and provide funding for varies projects including Regional Prevention Coalitions, naloxone/harm reduction infrastructure (centralized inventory control and distribution center), Medication for Opioid Use Disorder (MOUD) treatment at the Adult Correction Institute (ACI), Recovery Friendly Workplaces, and the Director of the Governor's Overdose Task Force and grants management at EOHHS. EOHHS staff provide oversight and work with State Between all three state accounts (Settlement, Stewardship, and McKinsey) over \$55 million dollars has been allocated in FY23 and FY24 across the continuum of care. There is also an additional \$18 million dollars in investments planned for FY25.