

State of Rhode Island Office of the Health Insurance Commissioner  
Social and Human Service Programs Review Advisory Council  
Meeting Minutes  
September 30, 2022 9:00 A.M. to 10:00 A.M.

**Attendance**

**Members**

Co-Chair Commissioner Patrick Tigue, Co-Chair Elena Nicolella, Beth Bixby, Gary Bliss, Margaret Holland McDuff, Linda Katz, Tanja Kubas-Meyer, Maureen Maigret, James Nyberg, Nicholas Oliver, Laurie-Marie Pisciotta, Tina Spears, John Tassoni

**Rhode Island Office of the Health Insurance Commissioner Staff**

Cory King, Molly McCloskey

**Unable to attend:**

Co-Chair Sam Salganik, Teresa Paiva Weed

**Minutes**

**1. Call to Order**

Commissioner Tigue called the meeting to order and welcomed members to the first meeting of the Social and Human Service Programs Review Advisory Council. Commissioner Tigue then introduced his fellow co-chairs, Elena Nicolella and Sam Salganik. Elena Nicolella stated that this important work is so needed and noted that the need for this work is not a negative reflection of the hard-working employees at EOHHS and the agencies under its purview. Sam Salganik was unable to attend the meeting due to an irreconcilable conflict. The remaining council members introduced themselves.

Commissioner Tigue explained that this group will meet at least monthly but may meet more frequently as needed. This is a level-setting meeting. The Commissioner called attention to the Advisory Council [draft charter](#), which is a starting point that can be built upon by the council. Commissioner Tigue also referenced [OHIC's bulletin](#), which describes how OHIC interprets the scope of the new duties required by statute.

**2. Social and Human Service Programs Review Scope**

The Commissioner led an overview of the Social and Human Service Programs Review Scope and prompted members to ask questions throughout [the presentation](#). The commissioner reviewed slides 1-4.

During Commissioner Tigue's summary of slide 4, which outlines January 1, 2023 deliverables, Nicholas Oliver asked about the status of the Social and Human Service Programs Review RFP process. Cory King emphasized that OHIC takes the Division of Purchasing rules very seriously and recommended that anyone interested in the status of the RFP check Purchasing's website.

Maureen Maigret asked if the turnaround time for applications will be included in the January 1 deliverables or would that come later. Commissioner Tigue responded, saying that OHIC will need to prioritize information to meet the deadlines articulated in the statute and will likely produce additional

in-depth supplemental reports. What Maureen is referring to is an example of something that might fall under a supplemental report.

Linda Katz asked about which programs/services will be captured in the scope of this work. Commissioner Tigie stated that that answer is outlined in upcoming slides (see slides 7-9). OHIC staff will clarify the scope details and council members will help us with this.

Tanja Kubas-Meyer asked who decides what is in and out of scope – gave the example of foster parents. Commissioner Tigie explained that for the purpose of analysis, OHIC will decide this but there will be a need for more granularity and OHIC will look to this Advisory Council for input and guidance. Cory King further explained that OHIC convened this Advisory Council for the members' expert knowledge and input. OHIC will also be working with EOHHS and its constituent agencies to determine what is included in the scope of this work. OHIC did not see the statute that created this review process until after it came out of House Finance, and OHIC did not have a say in how the statute was written. Commissioner Tigie agreed with Cory and further explained that in addition to the staff-level interagency working group that Cory referenced, Commissioner Tigie is also meeting regularly with leadership across the relevant state agencies, Senate/House staff, and elected officials. OHIC will broadly collect input from stakeholders throughout this process.

Commissioner Tigie reviewed slide 5, which outlined April 1, 2023 deliverables. One such deliverable is, “[a]n 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.” Nicholas Oliver asked if third party waitlists will also be included in OHIC’s analysis – e.g. MCO waitlists. Commissioner Tigie answered that when it comes to access, if waitlist data exists then it is likely relevant to the scope of this review.

Nicholas Oliver then referenced another deliverable on slide 5 - “[a]n 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” – and suggested that OHIC use DOH language around licensed/unlicensed personnel – e.g. paraprofessionals. He recommended that DOH regulatory language be mirrored. Commissioner Tigie agreed with Nicholas and said that this is also how OHIC interprets the statute. Commissioner Tigie reiterated that the language used in the slide deck to describe deliverables comes directly from the statute, which OHIC did not have a hand in drafting.

Linda Katz asked Commissioner Tigie if OHIC had met with the EOHHS Health Care Workforce Data Collection and Analytics Workgroup at DLT. Commissioner Tigie told Linda that OHIC presented to that group the week prior and that group will be a touchpoint for this work.

John Tassoni asked if this project will examine the standardization of rates. Managed Care Organization (MCO) rates are negotiated – the size and bandwidth of an agency plays a part in what the negotiated rate is – the agencies with more bandwidth may get a higher rate than smaller agencies. Commissioner Tigie responded that the Medicaid fee-for-service (FFS) rates are within the scope of this project. We will explore the legal/statutory relationship between MCO and FFS rates and what the mechanism is to change that. This project can be used to educate people about this. More information on this can be seen on slides 7 and 9.

Commissioner Tigie reviewed the September 1, 2023 deliverables on slide 6, “[a]n 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...”

While Commissioner Tigie was reviewing the “Social and Human Services Program Definition Scope” on slide 7, Elena Nicolella clarified that the scope of this project does not only include Medicaid-funded services but also state services with other funding sources. Commissioner Tigie agreed with Elena’s clarification and explained that Medicaid-funded services are only the floor of this project’s scope. The scope will include state services with other funding sources too.

Commissioner Tigie explained that OHIC understands the definition of “state” to include: the Executive Office of Health and Human Services (including Medicaid); the Department of Behavioral Health Care, Developmental Disabilities, and Hospitals; the Department of Children, Youth, and Families; the Department of Health; the Department of Human Services; the Office of Healthy Aging; and the Office of Veterans Services.

Commissioner Tigie reviewed slide 9, which summarizes out-of-scope rates. OHIC understands rates that are determined through statutorily mandated methodologies to be outside the scope of the Social and Human Services Programs Review, including Medicaid hospital rates and Medicaid nursing facility rates. Additionally, OHIC understands the rates negotiated for services between Medicaid managed care organizations and providers to be out of scope. James Nyberg suggested that the out-of-scope rates identified (i.e. Medicaid hospital rates and Medicaid nursing facility rates) should be included in this project – the established legislative process in statute does not always happen. Cory King responded that that OHIC did not think it made sense to invest limited resources in rates like these when the General Assembly had already made a policy decision to determine them through detailed and specified methodologies required by law.

Nicholas Oliver suggested that federal authority on rates needs to be taken into consideration, which Commissioner Tigie agreed with. Tanja Kubas-Meyer commented that Rhode Island’s small size should be taken into consideration when analyzing rates. Commissioner Tigie concurred with Tanja. Cory King stated that we need to manage our expectations and assess the availability of data.

Commissioner Tigie reviewed the purpose of the Social and Human Service Programs Review Advisory Council. Council members are charged 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 state law. Council meetings will allow providers, recipients, and other interested parties an opportunity to ask questions and provide comment

### **3. Social and Human Service Programs Review Advisory Council Charter**

Commissioner Tigie asked the Advisory Council members to review the [draft charter](#) and to share any feedback they may have with OHIC staff.

### **4. Public comment**

No one from the public commented, but a few council members made final comments.

Elena Nicolella suggested that in the next meeting, the council should discuss the Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals’ (BHDDH’s) existing intellectual and developmental disabilities rate review process, which is on a parallel track to this process.

Margaret Holland McDuff asked if eligibility that is mandated by the federal government is within the scope of this project. Commissioner Tighe said that it was.

Lisa Tomasso, representing council member Teresa Paiva Weed, reminded the Advisory Council that hospitals are more than just four walls – the Hospital Association of RI (HARI) represents other services– HARI supports a targeted focus on Health and Human Services rates.

## **5. Adjournment**