Governor's Commission on Disabilities
Legislation Committee
Monday March 8, 2010 3 – 5 PM

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Attendees:	Linda Ward (Chair.); Bill Inlow (Vice Chair.); Jeanne Behie; Rebecca Boss; Sharon Brinkworth; Rosemary C. Carmody; Linda Deschenes; Timothy Flynn; Liberty Goodwin; Jean Lawlor; Paula Parker; Gwendolyn Reeve; Msgr. Gerard O. Sabourin; Sarah Everhart Skeels; & Theresa Thoelke
Absent:	Ray Bandusky; Erin Casey; Julie DeRosa; Elaina Goldstein; Laura Jones; Maureen Maigret; Kate McCarthy-Barnett; & Arthur M. Plitt;

---------- Minutes ----------

Call to Order and Acceptance of the Minutes	**Linda Ward, Chairperson**	**5 min.**

Introductions: Chair called to order at 3:05 PM

MOTION: To accept the minutes of the previous meeting as presented LD/JL passed unanimously

A) The Commission's Legislative Package	**Bob Cooper, Executive Secretary**	**10 min.**

Item	Action to Date	Status in the House	Status in the Senate
1. Monitor and respond to implementation of **09 H 5983 Article 05 Sec. 01** the crisis intervention services for abused non-elderly adults (18-64) with severe impaired	Drafted: "An Act Relating to Criminal Offenses – Adult Crisis Intervention – Center and Protective Services" Drafted Sub A & sent to all interested entities for their review.	Representative Naughton 10 H 7369 referred to the House Finance Committee Sent House Letter 2/25/2010	Senator McCaffrey 10 S 2206 referred to the Senate Health and Human Services Committee Sent Senate Letter 2/25/2010
2. John J. MacDonald Jr. Transportation Initiative [accessible taxicabs]	Drafted and arranged for introduction: "An Act Relating to Wheelchair Accessible Transportation"	Speaker Pro-Tempori Coderre 10 H 7498 referred to the House Corporations Committee	Contacted Majority Leader Connor, waiting for a reply
3. Maintain the existing RIPTA/RIde service		Need to testify at DHS Budget Hearing	Need to testify at DHS Budget Hearing
4. Monitor and respond to Medicaid Reform proposals to ensure maintenance of the current services to individuals with severe disabilities			

Item	Action to Date	Status in the House	Status in the Senate
a. Sherlock Plan (Medicaid Buy – In Amendments	Drafted: **"**An Act Relating to Health Care Assistance for Working People with Disabilities"	Representative Naughton, checking with House Finance Cmte Chair to determine if a bill or budget article should be submitted	Contacted Senator Blais, waiting for a reply
b. 10 H 7397 Art. 21 RELATING TO MEDICAID REFORM ACT	Commission Recommends Finance Committees hold for Further Study – needs more detail description of changes	Sent House Letter 2/8/2010 House Testimony 2/8/2010 by BC	Sent Senate Letter 3/4/2010 Senate Testimony 3/4/2010 by BC
c. 10 H 7105 New Art. GBA 09 RELATING TO MEDICAID REFORM ACT	Commission Opposes unless amended	Sent House Letter 2/8/2010 House Testimony 2/8/2010 by BC	Sent Senate Letter 2/24/2010 Senate Testimony 3/4/2010 by BC
d. 10 H 7397 Art. 31 RELATING TO RITE CARE PROGRAM	Commission Opposes	Sent House Letter 2/24/2010 House Testimony 2/25/2010 by BC	Sent Senate Letter 3/1/2010 Senate Testimony 3/4/2010 by BC
e. 10 H 7397 Art. 19 RELATING TO CHILDREN'S HEALTH ACCOUNT	Commission Supports	House Testimony 2/25/2010 by BC	Sent Senate Letter 3/1/2010 Senate Testimony 3/4/2010 by BC
5. Mandate pedestrian crosswalks have curb cuts on both sides	Drafted and arranged for introduction: "An Act Relating To Highways –Accessible Crosswalks"	Representative Kennedy 10 H 7300 referred to to the House Municipal Government Committee Sent House Letter 2/24/2010 House Testimony 2/25/2010 by TF	Senator Tassoni 10 S 2133 referred to the Senate Housing and Municipal Government Committee Sent Senate Letter 2/24/2010
6. Increase home modification funding		Need to testify at DHS Budget Hearing	Need to testify at DHS Budget Hearing
7. Ensure implementation of the Disability Business Enterprise program	Drafted an amendment to: "10 S 2189 An Act Relating To Public Property And Works – Minority Business Enterprise"		
8. Mandate that mill conversions into apartments or condos have a minimum of one unit/federal formula designated as accessible and affordable	Need to propose regulatory changes with the RI Housing Resource Commission		
9. Mandate affordable,	Need to propose		

Item	Action to Date	Status in the House	Status in the Senate
accessible units for people with chemical sensitivities – including inside the apartment laundry and other washing machines	regulatory changes with the RI Housing Resource Commission		
10. Increase permanent supportive housing and other community services for people with behavioral health concerns		Does H 7730 RI Housing Resources address this issue?	
11. Address the workers' compensation liability for the person w/ the disability who employs in-home care services	Need to explore impact with Independent Living Centers, Medicaid & EOHHS		
12. 10 H 7397 Art. 25 RELATING TO DIVISION OF MOTOR VEHICLES FEES	Commission Opposed unless amended to charge fee to all non-drivers	Sent House Letter 2/24/2010 House Testimony 3/3/2010 by BC, House Finance & Admin. agree to amendment	Scheduled for hearing in Senate Finance Committee 3/9/2010 @ 2 in rm 211 Sent Senate Letter 3/1/2010
13. 10 H 7397 Art. 29 Governor's Amendment RELATING TO GOVERNMENT RESTRUCTURING	Commission Supports if amended	Sent House Letter 2/24/2010	Sent Senate Letter 2/25/2010 Senate Testimony 2/25/2010 by TF
Committee finds this bill Beneficial			
1. 10 H 7044 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT-STATE POLICE 2. 10 S 2055 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- STATE POLICE		House Judiciary Committee Held for Further Study Sent House Letter 2/24/2010	Senate Judiciary Committee Sent Senate Letter 2/24/2010
3. 10 H 7490 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - CRIMINAL PROCEDURE SENTENCE AND EXECUTION - HATE CRIMES		House Judiciary Committee **Need** to send House Letter	
4. 10 S 2149 AN ACT RELATING TO PROPERTY -- RHODE ISLAND FAIR HOUSING PRACTICES ACT			Senate Judiciary Committee Held for Further Study Sent Senate Letter 3/1/2010
5. 10 H 7361 AN ACT RELATING TO INSURANCE -- INSURANCE COVERAGE FOR MENTAL ILLNESS AND SUBSTANCE ABUSE		House Corporations Committee **Need** to send House Letter	
6. 10 H 7085 AN ACT RELATING TO MOTOR AND OTHER VEHICLES--CHILD RESTRAINTS		House Judiciary Committee Sent House Letter 2/24/2010	
7. 10 H 7111 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR VEHICLE OFFENSES 8. 10 S 2065 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR VEHICLE OFFENSES		House Judiciary Committee Sent House Letter 3/3/2010	Senate Judiciary Committee Held for further study 3/4/2010 Need to send Senate Letter
9. 10 H 7118 AN ACT RELATING TO MOTOR AND		House Judiciary	Senate Judiciary

Item	Action to Date	Status in the House	Status in the Senate
OTHER VEHICLES -- SUSPENSION OR REVOCATION OF LICENSES 10. 10 S 2062 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- SUSPENSION OR REVOCATION OF LICENSES		Committee Sent House Letter 2/24/2010	Committee Held for further study 3/4/2010 Sent Senate Letter 2/24/2010
Committee finds this bill Beneficial if amended			
11. 10 H 7036 AN ACT RELATING TO EDUCATION 12. 10 S 2034 AN ACT RELATING TO EDUCATION		House Health, Education, & Welfare Committee Held for Further Study Sent House Letter 2/24/2010	Senate Education Committee Scheduled for hearing 3/10/2010 @ Rise in S. Lounge Sent Senate Letter 2/24/2010
13. 10 H 7378 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- DEPARTMENT OF MENTAL HEALTH, RETARDATION AND HOSPITALS -- NEW TITLE		House Health, Education, & Welfare Committee Scheduled for hearing 3/10/2010 @ Rise in rm 135 Sent House Letter 2/24/2010	
Bills/Articles Legislation Committee Found Harmful unless amended			
14. 10 H 7408 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - OFFICE OF HEALTH AND HUMAN SERVICES		Sent House Letter 3/1/2010	
Bills/Articles Legislation Committee Found Harmful			
15. 10 H 7388 AN ACT RELATING TO ELECTIONS - VOTER IDENTIFICATION 16. 10 S 2141 AN ACT RELATING TO ELECTIONS		House Judiciary Committee Postponed by sponsor Sent House Letter 2/24/2010	Senate Judiciary Committee Sent Senate Letter 2/24/2010
17. 10 S 2113 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR FUEL TAX			Senate Finance Committee Sent Senate Letter 3/1/2010

Global Consumer Choice Compact Oversight Hearings

JOINT SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES
AND
SENATE FINANCE SUBCOMMITTEE ON HEALTH & HUMAN SERVICES

Monday, March 15, 2010 @ 3:30 P.M. in Room 313 - State House

AGENDA:

Joint Global Waiver Oversight - Hearing 1

Chairwoman Rhoda E. Perry, Chairman Juan Pichardo
Welcome and Introductions
Gary Alexander, Executive Office of Health and Human Services
Elena Nicolella, Medicaid Director, Department of Human Services
Corinne Calise Russo, Director, Department of Elderly Affairs
Craig Stenning, Director, Department of Mental Health, Retardation, and Hospitals
Adjournment

Monday, March 22, 2010 @ 3:30 P.M. in Room 313 - State House

AGENDA:

Joint Global Waiver Oversight - Hearing 2

Chairwoman Rhoda E. Perry, Chairman Juan Pichardo
Welcome and Introductions
Linda Katz, Rhode Island Poverty Institute
Maureen Maigret, Long Term Care Coordinating Council
Ann Mulready, Rhode Island Disability Law Center
Kathleen Heren, Alliance for Better Long Term Care
Elizabeth Earls, Rhode Island Council of Community Mental Health Organizations

10 H 7730 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- RHODE ISLAND HOUSING RESOURCES ACT OF 1998

Rep. Pacheco House Finance Committee

This act would establish and fund the neighborhood opportunities program to address the housing and revitalization needs of the state's deteriorating neighborhoods. The program would provide financial assistance to implement the following areas:

(A) The family affordable housing program, the purpose of which shall be to produce an additional supply of housing units at rents affordable to families working at or near minimum wage. State funding will leverage other resources for the production of housing, to create mixed income housing, and to revitalize neighborhoods through the rehabilitation of existing substandard units.

(B) The permanent supportive housing program, the purpose of which shall be to produce additional housing for disabled individuals to be coupled with services and case management to stabilize homeless individuals in permanent housing at affordable rents for persons receiving supplemental social security income (SSI).

(C) The neighborhood revitalization program, the purpose of which shall be to provide grants to local communities for renovation, demolition, and homeownership opportunities in neighborhoods designated for revitalization.

This act would take effect upon passage.

SECTION 1. Section 42-128-8 of the General Laws in Chapter 42-128 entitled "Rhode Island Housing Resources Act of 1998" is hereby amended to read as follows:

42-128-8. Powers and duties. -- In order to provide housing opportunities for all Rhode Islanders, to maintain the quality of housing in Rhode Island, and to coordinate and make effective the housing responsibilities of the agencies and subdivisions of the state, the commission shall have the following powers and duties:

(1) Policy, planning and coordination of state housing functions. - The commission shall have the power and duty:

(i) To prepare and adopt the state's plans for housing; provided, however, that this provision shall not be interpreted to contravene the prerogative of the state planning council to adopt a state guide plan for housing.

(ii) To prepare, adopt, and issue the state's housing policy.

(iii) To conduct research on and make reports regarding housing issues in the state.

(iv) To advise the governor and general assembly on housing issues and to coordinate housing activities among government agencies and agencies created by state law or providing housing services under government programs.

(2) Establish, implement, and monitor state performance measures and guidelines for housing programs. - The commission shall have the power and the duty:

(i) To promulgate performance measures and guidelines for housing programs conducted under state law.

(ii) To monitor and evaluate housing responsibilities established by state law, and to establish a process for annual reporting on the outcomes of the programs and investments of the state in housing for low and moderate income people.

(iii) To hear and resolve disputes pertaining to housing issues.

(3) Administer the programs pertaining to housing resources that may be assigned by state law. - The commission shall have the power and duty to administer programs for housing, housing services, and community development, including, but not limited to, programs pertaining to:

(i) Abandoned properties and the remediation of blighting conditions.

(ii) Lead abatement and to manage a lead hazard abatement program in cooperation with the Rhode Island housing and mortgage finance corporation.

(iii) Services for the homeless.

(iv) Rental assistance.

(v) Community development.

(vi) Outreach, education and technical assistance services.

(vii) Assistance, including financial support, to non-profit organizations and community

development corporations.

(viii) Tax credits that assist in the provision of housing or foster community development or that result in support to non-profit organizations performing functions to accomplish the purposes of this chapter.

(ix) The Supportive Services Program, the purpose of which is to help prevent and end homelessness among those who have experienced long-term homelessness and for whom certain services in addition to housing are essential. State funding for this program may leverage other resources for the purpose of providing supportive services. Services provided pursuant to this subsection may include, but not be limited to: assistance with budgeting and paying rent; access to employment; encouraging tenant involvement in facility management and policies; medication monitoring and management; daily living skills related to food, housekeeping and socialization; counseling to support self-identified goals; referrals to mainstream health, mental health and treatment programs; and conflict resolution.

(x) The neighborhood opportunities program, the purpose of which shall be to address the housing and revitalization needs of the state's deteriorating neighborhoods. The neighborhood opportunities program shall provide financial assistance to implement the following three (3) components:

(A) The family affordable housing program, the purpose of which shall be to produce an additional supply of housing units at rents affordable to families working at or near minimum wage. State funding will leverage other resources for the production of housing, to create mixed income housing, and to revitalize neighborhoods through the rehabilitation of existing substandard units.

(B) The permanent supportive housing program, the purpose of which shall be to produce additional housing for disabled individuals to be coupled with services and case management to stabilize homeless individuals in permanent housing at affordable rents for persons receiving supplemental social security income (SSI).

(C) The neighborhood revitalization program, the purpose of which shall be to provide grants to local communities for renovation, demolition, and homeownership opportunities in neighborhoods designated for revitalization.

SECTION 2. There is hereby appropriated out of any money in the treasury not otherwise appropriated for the fiscal year 2010-2011, the sum of ten million dollars ($10,000,000) for the purpose of carrying out the provisions of this act, and the state controller is hereby authorized to draw his orders upon the general treasurer for the payment of said sum, or so much thereof as may be from time to time required, upon receipt by him/her of properly authenticated vouchers.

SECTION 3. This act shall take effect upon passage.

MOTION: To find that **10 H 7730 An Act Relating to State Affairs and Government -- Rhode Island Housing Resources Act of 1998** would address item 10 of the Commission's 2010 Legislative Packet to increase permanent supportive housing and other community services for people with behavioral health concerns GR/JL passed; PP, LD,& RB abstained.

B. Tabled for More Information **10 min.**

2 **[**For more information from EOHHS]

10 H 7397 ARTICLE 20 GBA 05 RELATING TO MEDICAL ASSISTANCE

Requested by the Governor Held for Further Study or Continued In House Finance Committee
This article would provide a framework for the procurement and/or reprocurement of Medicaid managed care contracts for elderly and disabled residents (including those for managed long-term care) in FY 2011. Managed care systems may also include services and supports that optimize the health and independence of recipients who are determined to need Medicaid funded long-term care under § 40-8.10 {Long Term Care Service Reform for Medicaid Eligible Individuals} or to be at risk for such care under applicable rules and regulations. The department would be authorized to obtain

any approval for category II or III changes. Those categories II or III changes would include authorization to extend managed care to cover long-term care services and supports. This article would also authorize selective contracting for non-emergency transportation for Medicaid recipients. This article would take effect upon passage.

The Governor's Budget Amendment (GBA) 05 sets forth statutory changes that will facilitate the reprocurement of contracts for Medicaid managed care services in FY 2011. The success of this initiative is dependent upon the full participation of hospitals since hospital payments represent more than half of capitation-based expenditures. This requires that specific, binding contractual language relating to the hospitals be included in the associated legislation.

Also necessary is a change to the present "lesser of' language related to the Medicaid managed care payment rates to replace CMS national trends with the CMS Prospective Payment System Hospital Input Price Index in order to limit the scope of potential influences on rate detennination.

The reasons for modifying the current language are as follows:

(1) To achieve the intended effect, it has been detennined that this legislation must include specific language stipulating that acceptance of the managed care payments on the part ofthe hospitals shall be considered payment in full.

(2) The language must also include implications if a hospital refuses to accept a Medicaid managed care payment as payment in full. The proposed amendment mandates that acceptance of payment in full be a condition of a hospital's participation in the Medicaid program.

(3) Previously, the legislation required that the Medicaid managed care payments not exceed national Medicaid hospital care expenditure trend(s), as measured annually by CMS. The Department proposes amending this requirement to be based upon the annual CMS Prospective Payment System (IPPS) Hospital Input Price Index (HIPI). It is the Department's opinion, that it is more appropriate to use the HIPI rather than the national trends. The national trends are influenced by three factors: Medicaid caseload, utilization, and price. In order to limit influence solely to price, use of the HIPI is more appropriate.

ARTICLE 20

RELATING TO MEDICAL ASSISTANCE

SECTION 1. Sections 40-8-13.4 and 40-8-29 of the General Laws in Chapter 40-8 entitled "Medical Assistance" are hereby amended to read as follows:

40-8-13.4. Rate methodology for payment for in state and out of state hospital services. – (a) The department of human services shall implement a new methodology for payment for in state and out of state hospital services in order to ensure access to and the provision of high quality and cost-effective hospital care to its eligible recipients.

(b) In order to improve efficiency and cost effectiveness, the department of human services shall:

(1)(A) With respect to inpatient services~~: Implement~~ for persons in fee for service Medicaid, which is non-managed care, implement a new payment methodology for inpatient services utilizing the Diagnosis Related Groups (DRG) method of payment, which is, a patient classification method which provides a means of relating payment to the hospitals to the type of patients cared for by the hospitals. It is understood that a payment method based on Diagnosis Related Groups may include cost outlier payments and other specific exceptions.

(B) With respect to inpatient services for persons enrolled in Medicaid managed care plans, it is required effective July 1, 2010 that (i) require that Medicaid managed care payment rates to any hospital, in aggregate on a case mix adjusted basis (adjusting payment for a beneficiary's condition and needs), shall not exceed that hospital's Medicaid payment rates; and (ii) Medicaid managed care payment ~~trend(s)~~ rates between each hospital and health plan shall not exceed contracted payment rates between the hospital and the health plan that were in effect during calendar year 2009 as adjusted by the Center for Medicare and Medicaid Services National CMS Prospective Payment System (IPPS) Hospital Input Price Index ~~national Medicaid hospital care expenditure trend(s), as measured annually by the Center for Medicare and Medicaid Services~~

~~(CMS)~~ and using calendar year 2009 as a base year; (iii) payments made for Medicaid services pursuant to this section shall be deemed as payment in full; and (iv) for all such hospitals, compliance with the provisions of this section shall be a condition of participation in the Rhode Island Medicaid program.

(2)(A) With respect to outpatient services~~.: Notwithstanding~~ and notwithstanding any provisions of the law to the contrary, for persons enrolled in fee for service Medicaid, the department will reimburse hospitals for outpatient services using a rate methodology determined by the department and in accordance with federal regulations.

(B) With respect to outpatient services and notwithstanding any provisions of law to the contrary, for persons enrolled in Medicaid managed care plans, it is required effective July 1, 2010 ~~the department shall: (i) require~~ that (i)Medicaid managed care payment rates to any hospital, in aggregate on a case mix adjusted basis shall not exceed that hospital's Medicaid payment rates; and (ii) Medicaid managed care Payment rates ~~trend(s)~~ between each hospital and health plan shall not exceed contracted payment rates between the hospital and the health plan that were in effect during calendar year 2009 as adjusted by the Center for Medicare and Medicaid Services National CMS Prospective Payment System (IPPS) Hospital Input Price ~~Index national Medicaid hospital care expenditure trend(s), as measured annually by CMS and~~ using calendar year 2009 as a base year for all such hospitals, compliance with the provisions of this section shall be a condition of participation in the Rhode Island Medicaid program.

(c) It is intended that payment utilizing the Diagnosis Related Groups method shall reward hospitals for providing the most efficient care, and provide the department the opportunity to conduct value based purchasing of inpatient care.

(d) The director of the department of human services and/or the secretary of executive office of health and human services is hereby authorized to promulgate such rules and regulations consistent with this chapter, and to establish fiscal procedures he or she deems necessary for the proper implementation and administration of this chapter in order to provide payment to hospitals using the Diagnosis Related Group payment methodology. Furthermore, amendment of the Rhode Island state plan for medical assistance (Medicaid) pursuant to Title XIX of the federal Social Security Act is hereby authorized to provide for payment to hospitals for services provided to eligible recipients in accordance with this chapter.

(e) The department shall comply with all public notice requirements necessary to implement these rate changes.

(f) As a condition of participation in the DRG methodology for payment of hospital services, every hospital shall submit year-end settlement reports to the department within one year from the close of a hospital's fiscal year. Should a participating hospital fail to timely submit a year-end settlement report as required by this section, the department shall withhold financial cycle payments due by any state agency with respect to this hospital by not more than ten percent (10%) until said report is submitted.

(g) The provisions of this section shall be effective upon implementation of the amendments and new payment methodology pursuant to this section and section 40-8-13.3, which shall in any event be no later than March 30, 2010, at which time the provisions of §§ 40-8-13.2, 27-19-14, 27-19-15 and 27-19-16 shall be repealed in their entirety.

40-8-29. Selective contracting. – (a) Notwithstanding any other provision of state law, the department of human services is authorized to utilize selective contracting with prior general assembly approval for the purpose of purchasing for Medicaid recipients shared living provider services, durable medical equipment and supplies, non-emergency transportation, and any other Medicaid services, when appropriate, in order to assure that all service expenditures under this chapter have the maximum benefit of competition, and afford Rhode Islanders the overall best value, optimal quality, and the most cost-effective care possible. Beneficiaries will be limited to using the services/products of only those providers determined in a competitive bidding process to meet the standards for best quality, performance and price set by the department in accordance with applicable federal and state laws.

(b) For purposes of this section "selective contracting" shall mean the process for choosing providers to serve Medicaid beneficiaries based on their ability to deliver the best quality products or services, at the best value or price.

(c) To ensure all services allowable for Medicare reimbursement for beneficiaries who are dually eligible, selective contractors must be willing and able to accept Medicare.

SECTION 2. Section 40-8.5-1.1 of the General Laws in Chapter 40-8.5 entitled "The Health Care for Elderly and Disabled Residents Act" is hereby amended to read as follows:

40-8.5-1.1. Managed health care delivery systems. – (a) To ensure that all medical assistance beneficiaries, including the elderly and all individuals with disabilities, have access to quality and affordable health care, the department of human services is authorized to implement mandatory managed care health systems.

(b) "Managed care" is defined as systems that: integrate an efficient financing mechanism with quality service delivery; provides a "medical home" to assure appropriate care and deter unnecessary services; and place emphasis on preventive and primary care. For purposes of Medical Assistance, managed care systems are also defined to include a primary care case management model in which ancillary services are provided under the direction of a physician in a practice that meets standards established by the department of human services. Managed care systems may also include services and supports that optimize the health and independence of recipients who are determined to need Medicaid funded long-term care under § 40-8.10 or to be at risk for such care under applicable rules and regulations promulgated by the department. ~~Those~~ Any medical assistance recipients who have third-party medical coverage or insurance may be provided such services through an entity certified by or in a contractual arrangement with the department or, as deemed appropriate, exempt from mandatory managed care in accordance with rules and regulations promulgated by the department of human services. The department is further authorized to redesign benefit packages for medical assistance beneficiaries subject to appropriate federal approval.

(c) ~~The~~ In accordance with § 42-12.4-7, the department is authorized to obtain any approval through waiver(s), category II or III changes, and/or state plan amendments, from the secretary of the United States department of health and human services, that are necessary to implement mandatory managed health care delivery systems for all medical assistance recipients, including the primary case management model in which ancillary services are provided under the direction of a physician in a practice that meets standards established by the department of human services. The waiver(s), category II or III changes, and/or state plan amendments shall include the authorization to ~~exempt~~ extend managed care to cover long-term care services and supports. Such authorization shall also include, as deemed appropriate, exempting certain beneficiaries with third-party medical coverage or insurance from mandatory managed care in accordance with rules and regulations promulgated by the department of human services.

(d) To ensure the delivery of timely and appropriate services to persons who become eligible for Medicaid by virtue of their eligibility for a U.S. social security administration program, the department of human services is authorized to seek any and all data sharing agreements or other agreements with the social security administration as may be necessary to receive timely and accurate diagnostic data and clinical assessments. Such information shall be used exclusively for the purpose of service planning, and shall be held and exchanged in accordance with all applicable state and federal medical record confidentiality laws and regulations.

SECTION 3. This article shall take effect upon passage.

Tabled at EOHHS request until the next meeting.

3 [For more information from MHRH]

10 H 7397 Budget Article 24 RELATING TO TREATMENT ALTERNATIVES TO STREET CRIME Rep. Watson Requested by the Governor

Held for Further Study or Continued In House Finance Committee

This article would eliminate the Treatment Alternatives to Street Crime (TASC) program as a requirement for persons who are initially convicted with a controlled substance; eliminates the program as a public substance abuse care agency defined within the continuum of care network; eliminates the program as a participant agency for individuals convicted of a violation under RIGL 31-27-2 {Driving under influence of liquor or drugs}; and transfers responsibility for conducting a clinical assessment of individuals convicted

of a driving under influence of liquor or drugs violation from a facility approved by the department of mental health retardation and hospitals to the community college of Rhode Island center for workforce and community education. This article would take effect upon passage.
Orignally federal funded project "TASC" when the federal funds ended, the RI project continued.
TASC conducted DWI assessment to determine who would be enroll in treatment and case management.
Now only conducts assessment and referral.

ARTICLE 24

RELATING TO TREATMENT ALTERNATIVES TO STREET CRIME

SECTION 1. Section 21-28-4.01 of the General Laws in Chapter 21-28 entitled "Uniform Controlled Substances Act" is hereby amended to read as follows:

21-28-4. 01. Prohibited acts A-Penalties. – (a)(1) Except as authorized by this chapter, it shall be unlawful for any person to manufacture, deliver, or possess with intent to manufacture or deliver a controlled substance.

(2) Any person who is not a drug addicted person, as defined in § 21-28-1.02(18), who violates this subsection with respect to a controlled substance classified in schedule I or II, except the substance classified as marijuana, is guilty of a crime and upon conviction may be imprisoned to a term up to life, or fined not more than five hundred thousand dollars ($500,000) nor less than ten thousand dollars ($10,000), or both.

(3) Where the deliverance as prohibited in this subsection shall be the proximate cause of death to the person to whom the controlled substance is delivered, it shall not be a defense that the person delivering the substance was at the time of delivery, a drug addicted person as defined in § 21-28-1.02(18).

(4) Any person, except as provided for in subdivision (2) of this subsection, who violates this subsection with respect to:

(i) A controlled substance classified in schedule I or II, is guilty of a crime and upon conviction may be imprisoned for not more than thirty (30) years, or fined not more than one hundred thousand dollars ($100,000) nor less than three thousand dollars ($3,000), or both;

(ii) A controlled substance classified in schedule III or IV, is guilty of a crime and upon conviction may be imprisoned for not more than twenty (20) years, or fined not more than forty thousand dollars ($40,000), or both; provided, with respect to a controlled substance classified in schedule III (d), upon conviction may be imprisoned for not more than five (5) years, or fined not more than twenty thousand dollars ($20,000), or both.

(iii) A controlled substance classified in schedule V, is guilty of a crime and upon conviction may be imprisoned for not more than one year, or fined not more than ten thousand dollars ($10,000), or both.

(b)(1) Except as authorized by this chapter, it is unlawful for any person to create, deliver, or possess with intent to deliver, a counterfeit substance.

(2) Any person who violates this subsection with respect to:

(i) A counterfeit substance classified in schedule I or II, is guilty of a crime and upon conviction may be imprisoned for not more than thirty (30) years, or fined not more than one hundred thousand dollars ($100,000), or both;

(ii) A counterfeit substance classified in schedule III or IV, is guilty of a crime and upon conviction may be imprisoned for not more than twenty (20) years, or fined not more than forty thousand dollars ($40,000), or both; provided, with respect to a controlled substance classified in schedule III (d), upon conviction may be imprisoned for not more than five (5) years, or fined not more than twenty thousand dollars ($20,000) or both.

(iii) A counterfeit substance classified in schedule V, is guilty of a crime and upon conviction may be imprisoned for not more than one year, or fined not more than ten thousand dollars ($10,000), or both.

(c)(1) It shall be unlawful for any person knowingly or intentionally to possess a controlled substance, unless the substance was obtained directly from or pursuant to a valid prescription or order of a practitioner while acting in the course of his or her professional practice, or except as otherwise authorized by this chapter.

(2) Any person who violates this subsection with respect to:

(i) A controlled substance classified in schedules I, II and III, IV, and V, except the

substance classified as marijuana, is guilty of a crime and upon conviction may be imprisoned for not more than three (3) years or fined not less than five hundred dollars ($500) nor more than five thousand dollars ($5,000), or both;

(ii) A controlled substance classified in schedule I as marijuana is guilty of a misdemeanor and upon conviction may be imprisoned for not more than one year or fined not less than two hundred dollars ($200) nor more than five hundred dollars ($500), or both.

(3) Additionally every person convicted or who pleads nolo contendere under paragraph (2)(i) of this subsection or convicted or who pleads nolo contendere a second or subsequent time under paragraph (2)(ii) of this subsection, who is not sentenced to a term of imprisonment to serve for the offense, shall be required to:

(i) Perform no less than one hundred (100) hours of community service;

(ii) ~~Be referred to Treatment Alternatives to Street Crime (TASC) to determine the existence of problems of drug abuse. Should TASC determine the person needs treatment, it will arrange for the treatment to be provided and after completion of the treatment, the person shall perform his or her required community service and attend the drug education program;~~

~~(iii)~~ Attend and complete a drug counseling and education program as prescribed by the director of the department of ~~health~~ mental health, retardation and hospitals and pay the sum of four hundred dollars ($400) to help defray the costs of this program which shall be deposited as general revenues. Failure to attend may result after hearing by the court in jail sentence up to one year;

~~(iv)~~(iii)The court shall not suspend any part or all of the imposition of the fee required by this subsection, unless the court finds an inability to pay;

~~(v)~~(iv) If the offense involves the use of any automobile to transport the substance or the substance is found within an automobile, then a person convicted or who pleads nolo contendere under paragraphs (2)(i) and (ii) of this subsection shall be subject to a loss of license for a period of six (6) months for a first offense and one year for each offense after this.

(4) All fees assessed and collected pursuant to paragraph (3)~~(iii)~~(ii) of this subsection shall be deposited as general revenues and shall be collected from the person convicted or who pleads nolo contendere before any other fines authorized by this chapter.

(d) It shall be unlawful for any person to manufacture, distribute, or possess with intent to manufacture or distribute, an imitation controlled substance. Any person who violates this subsection is guilty of a crime, and upon conviction shall be subject to the same term of imprisonment and/or fine as provided by this chapter for the manufacture or distribution of the controlled substance which the particular imitation controlled substance forming the basis of the prosecution was designed to resemble and/or represented to be; but in no case shall the imprisonment be for more than five (5) years nor the fine for more than twenty thousand dollars ($20,000).

(e) It shall be unlawful for a practitioner to prescribe, order, distribute, supply, or sell an anabolic steroid or human growth hormone for: (1) enhancing performance in an exercise, sport, or game, or (2) hormonal manipulation intended to increase muscle mass, strength, or weight without a medical necessity. Any person who violates this subsection is guilty of a misdemeanor and upon conviction may be imprisoned for not more than six (6) months or a fine of not more than one thousand dollars ($1,000), or both.

SECTION 2. Section 31-27-2 of the General Laws in Chapter 31-27 entitled “Motor Vehicle Offenses” is hereby amended to read as follows:

31-27-2. Driving under influence of liquor or drugs. – (a) Whoever drives or otherwise operates any vehicle in the state while under the influence of any intoxicating liquor, drugs, toluene, or any controlled substance as defined in chapter 28 of title 21, or any combination of these, shall be guilty of a misdemeanor except as provided in subdivision (d)(3) and shall be punished as provided in subsection (d) of this section.

(b)(1) Any person charged under subsection (a) of this section whose blood alcohol concentration is eight one-hundredths of one percent (.08%) or more by weight as shown by a chemical analysis of a blood, breath, or urine sample shall be guilty of violating subsection (a) of this section. This provision shall not preclude a conviction based on other admissible evidence. Proof of guilt under this section may also be based on evidence that the person charged was under

the influence of intoxicating liquor, drugs, toluene, or any controlled substance defined in chapter 28 of title 21, or any combination of these, to a degree which rendered the person incapable of safely operating a vehicle. The fact that any person charged with violating this section is or has been legally entitled to use alcohol or a drug shall not constitute a defense against any charge of violating this section.

(2) Whoever drives or otherwise operates any vehicle in the state with a blood presence of any scheduled controlled substance as defined within chapter 28 of title 21, as shown by analysis of a blood or urine sample, shall be guilty of a misdemeanor and shall be punished as provided in subsection (d) of this section.

(c) In any criminal prosecution for a violation of subsection (a) of this section, evidence as to the amount of intoxicating liquor, toluene, or any controlled substance as defined in chapter 28 of title 21, or any combination of these, in the defendant's blood at the time alleged as shown by a chemical analysis of the defendant's breath, blood, or urine or other bodily substance shall be admissible and competent, provided that evidence is presented that the following conditions have been complied with:

(1) The defendant has consented to the taking of the test upon which the analysis is made. Evidence that the defendant had refused to submit to the test shall not be admissible unless the defendant elects to testify.

(2) A true copy of the report of the test result was mailed within seventy-two (72) hours of the taking of the test to the person submitting to a breath test.

(3) Any person submitting to a chemical test of blood, urine, or other body fluids shall have a true copy of the report of the test result mailed to him or her within thirty (30) days following the taking of the test.

(4) The test was performed according to methods and with equipment approved by the director of the department of health of the state of Rhode Island and by an authorized individual.

(5) Equipment used for the conduct of the tests by means of breath analysis had been tested for accuracy within thirty (30) days preceding the test by personnel qualified as hereinbefore provided, and breathalyzer operators shall be qualified and certified by the department of health within three hundred sixty-five (365) days of the test.

(6) The person arrested and charged with operating a motor vehicle while under the influence of intoxicating liquor, toluene, or any controlled substance as defined in chapter 28 of title 21, or, any combination of these in violation of subsection (a) of this section was afforded the opportunity to have an additional chemical test. The officer arresting or so charging the person shall have informed the person of this right and afforded him or her a reasonable opportunity to exercise this right, and a notation to this effect is made in the official records of the case in the police department. Refusal to permit an additional chemical test shall render incompetent and inadmissible in evidence the original report.

(d)(1)(i) Every person found to have violated subdivision (b)(1) of this section shall be sentenced as follows: for a first violation whose blood alcohol concentration is eight one-hundredths of one percent (.08%) but less than one-tenth of one percent (.1%) by weight or who has a blood presence of any scheduled controlled substance as defined in subdivision (b)(2) shall be subject to a fine of not less than one hundred dollars ($100) nor more than three hundred dollars ($300), shall be required to perform ten (10) to sixty (60) hours of public community restitution, and/or shall be imprisoned for up to one year. The sentence may be served in any unit of the adult correctional institutions in the discretion of the sentencing judge and/or shall be required to attend a special course on driving while intoxicated or under the influence of a controlled substance, and his or her driver's license shall be suspended for thirty (30) days up to one hundred eighty (180) days.

(ii) Every person convicted of a first violation whose blood alcohol concentration is one-tenth of one percent (.1%) by weight or above but less than fifteen hundredths of one percent (.15%) or whose blood alcohol concentration is unknown shall be subject to a fine of not less than one hundred ($100) dollars nor more than four hundred dollars ($400) and shall be required to perform ten (10) to sixty (60) hours of public community restitution and/or shall be imprisoned for up to one year. The sentence may be served in any unit of the adult correctional institutions in the discretion of the sentencing judge. The person's driving license shall be suspended for a

period of three (3) months to twelve (12) months. The sentencing judge shall require attendance at a special course on driving while intoxicated or under the influence of a controlled substance and/or alcoholic or drug treatment for the individual.

(iii) Every person convicted of a first offense whose blood alcohol concentration is fifteen hundredths of one percent (.15%) or above, or who is under the influence of a drug, toluene, or any controlled substance as defined in subdivision (b)(1) shall be subject to a fine of five hundred dollars ($500) and shall be required to perform twenty (20) to sixty (60) hours of public community restitution and/or shall be imprisoned for up to one year. The sentence may be served in any unit of the adult correctional institutions in the discretion of the sentencing judge. The person's driving license shall be suspended for a period of three (3) months to eighteen (18) months. The sentencing judge shall require attendance at a special course on driving while intoxicated or under the influence of a controlled substance and/or alcohol or drug treatment for the individual.

(2)(i) Every person convicted of a second violation within a five (5) year period with a blood alcohol concentration of eight one-hundredths of one percent (.08%) or above but less than fifteen hundredths of one percent (.15%) or whose blood alcohol concentration is unknown or who has a blood presence of any controlled substance as defined in subdivision (b)(2), and every person convicted of a second violation within a five (5) year period regardless of whether the prior violation and subsequent conviction was a violation and subsequent conviction under this statute or under the driving under the influence of liquor or drugs statute of any other state, shall be subject to a mandatory fine of four hundred dollars ($400). The person's driving license shall be suspended for a period of one year to two (2) years, and the individual shall be sentenced to not less than ten (10) days nor more than one year in jail. The sentence may be served in any unit of the adult correctional institutions in the discretion of the sentencing judge; however, not less than forty-eight (48) hours of imprisonment shall be served consecutively. The sentencing judge shall require alcohol or drug treatment for the individual, and may prohibit that person from operating a motor vehicle that is not equipped with an ignition interlock system for a period of one year to two (2) years following the completion of the sentence as provided in § 31-27-2.8.

(ii) Every person convicted of a second violation within a five (5) year period whose blood alcohol concentration is fifteen hundredths of one percent (.15%) or above by weight as shown by a chemical analysis of a blood, breath, or urine sample or who is under the influence of a drug, toluene, or any controlled substance as defined in subdivision (b)(1) shall be subject to mandatory imprisonment of not less than six (6) months nor more than one year, a mandatory fine of not less than one thousand dollars ($1,000) and a mandatory license suspension for a period of two (2) years from the date of completion of the sentence imposed under this subsection.

(3)(i) Every person convicted of a third or subsequent violation within a five (5) year period with a blood alcohol concentration of eight one-hundredths of one percent (.08%) or above but less than fifteen hundredths of one percent (.15%) or whose blood alcohol concentration is unknown or who has a blood presence of any scheduled controlled substance as defined in subdivision (b)(2) regardless of whether any prior violation and subsequent conviction was a violation and subsequent conviction under this statute or under the driving under the influence of liquor or drugs statute of any other state, shall be guilty of a felony and be subject to a mandatory fine of four hundred ($400) dollars. The person's driving license shall be suspended for a period of two (2) years to three (3) years, and the individual shall be sentenced to not less than one year and not more than three (3) years in jail. The sentence may be served in any unit of the adult correctional institutions in the discretion of the sentencing judge; however, not less than forty-eight (48) hours of imprisonment shall be served consecutively. The sentencing judge shall require alcohol or drug treatment for the individual, and may prohibit that person from operating a motor vehicle that is not equipped with an ignition interlock system for a period of two (2) years following the completion of the sentence as provided in § 31-27-2.8.

(ii) Every person convicted of a third or subsequent violation within a five (5) year period whose blood alcohol concentration is fifteen hundredths of one percent (.15%) above by weight as shown by a chemical analysis of a blood, breath, or urine sample or who is under the influence of a drug, toluene or any controlled substance as defined in subdivision (b)(1) shall be subject to mandatory imprisonment of not less than three (3) years nor more than five (5) years, a

mandatory fine of not less than one thousand dollars ($1,000) nor more than five thousand dollars ($5,000) and a mandatory license suspension for a period of three (3) years from the date of completion of the sentence imposed under this subsection.

(iii) In addition to the foregoing penalties, every person convicted of a third or subsequent violation within a five (5) year period regardless of whether any prior violation and subsequent conviction was a violation and subsequent conviction under this statute or under the driving under the influence of liquor or drugs statute of any other state shall be subject, in the discretion of the sentencing judge, to having the vehicle owned and operated by the violator seized and sold by the state of Rhode Island, with all funds obtained by the sale to be transferred to the general fund.

(4)(i) For purposes of determining the period of license suspension, a prior violation shall constitute any charge brought and sustained under the provisions of this section or § 31-27-2.1.

(ii) Any person over the age of eighteen (18) who is convicted under this section for operating a motor vehicle while under the influence of alcohol, other drugs, or a combination of these, while a child under the age of thirteen (13) years was present as a passenger in the motor vehicle when the offense was committed may be sentenced to a term of imprisonment of not more than one year and further shall not be entitled to the benefit of suspension or deferment of this sentence. The sentence imposed under this section may be served in any unit of the adult correctional institutions in the discretion of the sentencing judge.

(5)(i) Any person convicted of a violation under this section shall pay a highway assessment fine of five hundred dollars ($500) which shall be deposited into the general fund. The assessment provided for by this subsection shall be collected from a violator before any other fines authorized by this section.

(ii) Any person convicted of a violation under this section shall be assessed a fee. The fee shall be as follows:

FISCAL YEAR 1993-1995	FISCAL YEAR 1996-1999	FISCAL YEAR 2000-2010
$147	$173	$86

(6)(i) If the person convicted of violating this section is under the age of eighteen (18) years, for the first violation he or she shall be required to perform ten (10) to sixty (60) hours of public community restitution, and the juvenile's driving license shall be suspended for a period of six (6) months, and may be suspended for a period up to eighteen (18) months. The sentencing judge shall also require attendance at a special course on driving while intoxicated or under the influence of a controlled substance and alcohol or drug education and/or treatment for the juvenile. The juvenile may also be required to pay a highway assessment fine of no more than five hundred dollars ($500), and the assessment imposed shall be deposited into the general fund.

(ii) If the person convicted of violating this section is under the age of eighteen (18) years, for a second or subsequent violation regardless of whether any prior violation and subsequent conviction was a violation and subsequent under this statute or under the driving under the influence of liquor or drugs statute of any other state, he or she shall be subject to a mandatory suspension of his or her driving license until such time as he or she is twenty-one (21) years of age and may, in the discretion of the sentencing judge, also be sentenced to the Rhode Island training school for a period of not more than one year and/or a fine of not more than five hundred dollars ($500).

(7) Any person convicted of a violation under this section may undergo a clinical assessment at ~~a facility approved by the department of mental health retardation and hospitals~~ the community college of Rhode Island and it's center for workforce and community education. Should this clinical assessment determine problems of alcohol, drug abuse, or psychological problems associated with alcoholic or drug abuse, this person shall be referred to ~~the T.A.S.C. (treatment alternatives to street crime) program~~ an appropriate facility, licensed or approved by the department of mental health, retardation and hospitals for treatment placement, case management, and monitoring.

(e) Percent by weight of alcohol in the blood shall be based upon milligrams of alcohol per one hundred (100) cubic centimeters of blood.

(f)(1) There is established an alcohol and drug safety unit within the division of motor

vehicles to administer an alcohol safety action program. The program shall provide for placement and follow-up for persons who are required to pay the highway safety assessment. The alcohol and drug safety action program will be administered in conjunction with alcohol and drug programs ~~within~~ licensed by the department of mental health retardation and hospitals.

(2) Persons convicted under the provisions of this chapter shall be required to attend a special course on driving while intoxicated or under the influence of a controlled substance, and/or participate in an alcohol or drug treatment program. The course shall take into consideration any language barrier which may exist as to any person ordered to attend, and shall provide for instruction reasonably calculated to communicate the purposes of the course in accordance with the requirements of the subsection. Any costs reasonably incurred in connection with the provision of this accommodation shall be borne by the person being retrained. A copy of any violation under this section shall be forwarded by the court to the alcohol and drug safety unit. In the event that persons convicted under the provisions of this chapter fail to attend and complete the above course or treatment program, as ordered by the judge, then the person may be brought before the court, and after a hearing as to why the order of the court was not followed, may be sentenced to jail for a period not exceeding one year.

(3) The alcohol and drug safety action program within the division of motor vehicles shall be funded by general revenue appropriations.

(g) The director of the health department of the state of Rhode Island is empowered to make and file with the secretary of state regulations which prescribe the techniques and methods of chemical analysis of the person's body fluids or breath, and the qualifications and certification of individuals authorized to administer this testing and analysis.

(h) Jurisdiction for misdemeanor violations of this section shall be with the district court for persons eighteen (18) years of age or older and to the family court for persons under the age of eighteen (18) years. The courts shall have full authority to impose any sentence authorized and to order the suspension of any license for violations of this section. All trials in the district court and family court of violations of the section shall be scheduled within thirty (30) days of the arraignment date. No continuance or postponement shall be granted except for good cause shown. Any continuances that are necessary shall be granted for the shortest practicable time. Trials in superior court are not required to be scheduled within thirty (30) days of the arraignment date.

(i) No fines, suspensions, assessments, alcohol or drug treatment programs, course on driving while intoxicated or under the influence of a controlled substance, public community restitution, or jail provided for under this section can be suspended.

(j) An order to attend a special course on driving while intoxicated that shall be administered in cooperation with a college or university accredited by the state, shall include a provision to pay a reasonable tuition for the course in an amount not less than twenty-five dollars ($25.00), and a fee of one hundred seventy-five dollars ($175), which fee shall be deposited into the general fund.

(k) For the purposes of this section, any test of a sample of blood, breath, or urine for the presence of alcohol, which relies in whole or in part upon the principle of infrared light absorption is considered a chemical test.

(l) If any provision of this section or the application of any provision shall for any reason be judged invalid, such a judgment shall not affect, impair, or invalidate the remainder of the section, but shall be confined in this effect to the provision or application directly involved in the controversy giving rise to the judgment.

SECTION 3. Section 42-109-9 of the General Laws in Chapter 42-109 entitled "Omnibus Substance Abuse Prevention Act" is hereby amended to read as follows:

42-109-9. Legislative oversight commission. – (a) There is created a legislative commission entitled "Legislative Oversight Commission on Special Substance Abuse Programs", the purpose of which shall be to oversee the implementation and administration of all moneys and programs involving the Benjamin Rush Detox Program, and the Driving While Intoxicated Program, ~~and the TASC Program,~~ and to report to the director of the department of mental health, retardation, and hospitals and to the general assembly with advice and recommendations as to the adequacy, efficacy and efficiency of all statutes, rules, regulations, guidelines, practices, and programs relating to those substance abuse programs, and any other matters it deems appropriate.

10-23 (b) The commission shall consist of five (5) members: two (2) of whom shall be
10-24 appointed by the president of the senate as follows: one member who shall be a physician
10-25 licensed to practice medicine in this state and whose medical practice concentrates on substance
10-26 abuse treatment and prevention; one member who shall be a registered nurse (R.N.) who is
10-27 licensed in this state and concentrates in substance abuse treatment and prevention; three (3) of
10-28 whom shall be appointed by the speaker of the house as follows: one member who shall be a
10-29 certified chemical dependency professional (C.C.D.P.), one member who shall be clinical
10-30 supervisor of a private or public substance abuse treatment and prevention clinic; and one
10-31 member who shall be an executive director of a private or public substance abuse treatment
10-32 agency; provided, however, that no member of the general assembly shall be appointed to the
10-33 commission. The chairperson of the commission shall be appointed by the speaker of the house of
10-34 representatives. Members of the commission shall serve without compensation. The commission
11-1 may request and shall receive from any instrumentality of the state, including the department of
11-2 mental health, retardation, and hospitals, department of children, youth, and families, department
11-3 of human services and other departments as the commission sees fit and from any municipality or
11-4 any instrumentality thereof, any information and assistance that it deems necessary for the proper
11-5 execution of its powers and duties under this section. The commission shall meet at least
11-6 quarterly and shall report at least annually to the general assembly on its findings and
11-7 recommendations with respect to any matters relating to those substance abuse treatment
11-8 programs listed herein.
11-9 (c) The commission shall operate in conjunction with the permanent legislative oversight
11-10 commission on substance abuse prevention established pursuant to the provisions of § 16-21.2-9
11-11 and with the permanent legislative oversight commission on substance abuse treatment
11-12 established pursuant to the provisions of § 40.1-1-12; provided, however, that primary oversight
11-13 of the Benjamin Rush Detox Program, and the Driving While Intoxicated Program~~, and the TASC~~
11-14 ~~Program~~ shall be the function of the commission established in this section.
11-15 SECTION 4. This article shall take effect upon passage.

MOTION: To find beneficial **10 H 7397 Article 24 Relating to Treatment Alternatives to Street Crime** JL/SB passed; RB,LD, & PP abstained		
C. Consideration of New Bills	**Review Team Members**	**30 min.**

The Review Teams Members:

1. Budget: Tim Flynn, Arthur Plitt, Linda Ward, and Bill Inlow
2. Civil Rights: Tim Flynn, Jean Lawlor, Julie DeRosa, Liberty Goodwin, Linda Ward, and Bill Inlow
3. Disability Prevention: Gwen Reeve, Sharon Brinkworth, Theresa Thoelke, Linda Ward, and Bill Inlow
4. Employment: Elaina Goldstein, Rory Carmody, Linda Deschenes, Jeanne Behie, Liberty Goodwin, Laura Jones, Linda Ward, and Bill Inlow
5. Medicaid: Elaina Goldstein, Paula Parker, Linda Ward, and Bill Inlow
6. Health Care Insurance: Elaina Goldstein, Liberty Goodwin, Theresa Thoelke, Linda Ward, and Bill Inlow
7. Professional Standards: Liberty Goodwin, Gwen Reeve, Theresa Thoelke, Linda Ward, and Bill Inlow
8. Housing: Julie DeRosa, Sharon Brinkworth, Jeanne Behie, Liberty Goodwin, Linda Ward, and Bill Inlow
9. Human Services: Rory Carmody, Tim Flynn, Elaina Goldstein, Paula Parker, Linda Ward, and Bill Inlow
10. Special Education: Jeanne Behie, Linda Deschenes, Liberty Goodwin, Arthur Plitt, Msgr. Sabourin, Linda Ward, and Bill Inlow
11. Transportation: Gwen Reeve, Jean Lawlor, Jeanne Behie, Linda Ward, and Bill Inlow

Members who haven't joined a team:

Ray Bandusky, Rebecca Boss, Erin Casey, Kate McCarthy-Barnett, Maureen Maigret, & Sarah Everhart Skeels

Civil Rights

4 **10 H 7752 AN ACT RELATING TO EDUCATION - CAPTIONING OF ELECTRONIC VIDEO MATERIALS** Rep. Handy House Health, Education, & Welfare Committee

This act would require that all publishers or manufacturers of electronic video instructional materials offered for adoption or sale in the state intended to be used in the instructional programs of educational institutions would supply such materials with or closed captions. The failure of a publisher or manufacturer to comply with the requirement would subject the publisher or manufacturer to three times the cost of the purchaser to have captions placed on the materials. This act would take effect upon passage.

Reviewer's Comments:
Equal access is not just a ramp, it is video or webcasts with captions of spoken information and voice over of text.
Bob Cooper
Recommendation: ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

SECTION 1. Title 16 of the General Laws entitled "EDUCATION" is hereby amended by adding thereto the following chapter:

CHAPTER 91

CAPTIONING OF ELECTRONIC VIDEO MATERIALS

16-91-1. Definitions. – As used in this chapter, the following words and phrases are defined as follows:

(1) "Captions" are text superimposed over video of a program which places in text the audio portion of video programming;

(2) "Closed captions" are captions that may be turned on or off by the viewer;

(3) "Electronic video instructional materials" are materials designed, marketed, and sold for use in the instructional programs of educational institutions in Rhode Island, including, but not limited, to materials on videotape, CD-ROM, digital video disc (DVD), downloadable video clips, and film;

(4) "Open captions" are captions that are always viewable and cannot be turned on and off by the viewer.

16-91-2. Captioning of electronic video instructional materials. – (a) Beginning January 1, 2011, every publisher or manufacturer of electronic video instructional materials offered for adoption or sale in the state shall supply such materials with open captions or closed captions, except for the following:

(1) Video products or portions of video products for which the publisher does not have the rights to add captions; and

(2) Video products or portions of video products for which the user does not receive a physical copy of the product, but rather the product is otherwise broadcast into the instructional environment through television programming, teleconferences, and/or products distributed over the internet or world wide web; and

(b) If the publisher or manufacturer fails to comply with the requirements of this section, the publisher or manufacturer shall be liable to the entity that purchased the electronic video instructional materials in the amount of three (3) times the amount paid by the purchasing entity to have captions placed on the materials; and

(c) In order to ensure the effective implementation of subsection (b) of this section, a liability claim may be made on behalf of the purchasing entity by either the individual purchaser, a school, school district, college, or university that employs the individual purchaser; the Rhode Island department of elementary and secondary education, or the Rhode Island department of higher education.

(d) The provisions of chapter 16-91 ("Captioning of Electronic Video Materials") shall not apply to electronic video instructional materials purchased prior to July 1, 2011.

SECTION 2. This act shall take effect upon passage.

MOTION: To find beneficial **10 H 7752 An Act Relating to Education - Captioning**

of Electronic Video Materials BI/JB passed; LG abstained

5 **10 H 7786 AN ACT RELATING TO PUBLIC PROPERTY AND WORKS - ACCESSIBLE ELECTRONIC AND INFORMATION TECHNOLOGY** Rep. Handy House Judiciary Committee

This act would adopt the state section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794d), and would require all Rhode Island departments and agencies to provide access to electronic and information technology to all individuals, regardless of whether or not they are disabled, unless it would impose an undue hardship on the department or agency. This act would take effect upon passage

Reviewer's Comments:
Government information that is public should be accessible to all. Executive branch agencies are already required to design and maintain their websites with captions and voice over. The Commission has hosted training for state agency webmasters.
Bob Cooper
Recommendation: ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful ☐ no position

SECTION 1. Title 37 of the General Laws entitled "Public Property and Works" is hereby amended by adding thereto the following chapter:

CHAPTER 25

ACCESSIBLE ELECTRONIC INFORMATION TECHNOLOGY

37-25-1. Requirements for departments and agencies. –

(a) Accessibility

(1) Development, procurement, maintenance, or use of electronic and information technology. When developing, procuring, maintaining, or using electronic and information technology, regardless of the type of medium of the technology, each department or agency, shall ensure, unless an undue burden would be imposed on the department or agency, that the electronic and information technology enables:

(i) Individuals with disabilities who are state employees to have access to and use of information and data that is comparable to the access to and use of information and data by state employees who are not individuals with disabilities; and

(ii) Individuals with disabilities who are members of the public seeking information or services from a department or agency to have access to and use of information and data that is comparable to the access to and use of information and data by such members of the public who are not individuals with disabilities.

(2) Alternative means efforts.

When development, procurement, maintenance, or use of electronic and information technology that meets the standards published by the United States Access Board under 29 U.S.C. section 794 (d)(a)(2) would impose an undue burden, the department or agency shall provide individuals with disabilities covered by subsection (a) with the information and data involved by an alternative means of access that allows the individual to use the information and data.

(b) Acquisition planning.

In the event that a department or agency determines that compliance with the standards issued by the US Access Board under 29 U.S.C. section (d)(a)(2) relating to procurement, imposes an undue burden, the documentation by the department or agency supporting the procurement shall set forth the reasons compliance creates an undue burden.

(c) Construction.

(1) Equipment.

In a case in which the state provides access to the public, to information or data through electronic and information technology, nothing in this section shall be construed to require a department or agency:

(i) To make equipment owned by the state available for access and use by individuals with disabilities covered by paragraph (a) at a location other than the location where the electronic and information technology is provided to the public; or

(ii) To purchase equipment for access and use by individuals with disabilities covered by paragraph (a) at a location other than that where the electronic and information technology is provided to the public.

(2) Software and peripheral devices

Except as required to comply with standards issued by the US Access Board under 29 U.S.C. section 794 (d)(a)(2), nothing in subsection 37-25-1(a) shall require the installation of specific accessibility related software or the attachment of a specific accessibility related peripheral device at a workstation of a state employee who is not an individual with a disability.

37-25-2. Agency Evaluations. – Not later than six (6) months after the effective date of this chapter, the head of each department or agency shall evaluate the extent to which the electronic and information technology of the department or agency is accessible to and usable by individuals with disabilities, described in subsection 37-25-1(a), compared to the access to and use of technology by individuals described in each subsection who are not individuals with disabilities, and submit a report containing the evaluation to the state coordinating committee on disability rights pursuant to section 42-51-10.

37-25-3. Enforcement. – (a) This chapter shall apply only to electronic and information technology that is procured by a department or agency not less than six (6) months after the effective date of this chapter.

(b) The governor's commission on disabilities is empowered and directed to investigate and hear all complaints relating to alleged violations of this chapter.

SECTION 2. Sections 42-51-6.1 and 42-51-9 of the General Laws in Chapter 42-51 entitled "Governor's Commission on Disabilities" are hereby amended to read as follows:

42-51-6.1. Hearing boards. -- (a) The commission's chairperson shall appoint five (5) commissioners as the hearing board for the purpose of conducting hearings and rendering decisions on matters relating to the provisions of chapter 87 of this title, chapter 37-25 and sections 37-8-15.1 and 42-46-13 within the jurisdiction of the commission.

(b) Three (3) commissioners shall constitute a quorum of a hearing board.

(c) The hearing board is empowered to:

(1) Receive, investigate, and act upon charges of unlawful practices within its jurisdiction; and

(2) In connection with any investigation or hearing held on any matter within its jurisdiction to hold hearings, administer oaths, take the testimony of any person under oath, and to require the production for examination of any books and papers relating to any matter under investigation or in question before the hearing board.

42-51-9. Definitions. -- The following words and terms, unless the context clearly indicates a different meaning, shall have the following meanings:

(1) "Disability" means a disability as defined in section 42-87-1.

(2) "Federal and state laws protecting the rights of individuals with disabilities" means, but is not limited to, the Americans with Disabilities Act of 1990, 42 U.S.C. section 12101 et seq.; Title V of the Rehabilitation Act of 1973, 29 U.S.C. section 794; R.I. Const., art. I, section 2; the provisions of chapter 87 of title 42, chapter 37-25 and sections 23-6.3-11, 37-8-15, 37-8-15.1 and 42-46-13.

(3) "State agency" means any department, division, agency, commission, board, office, bureau, council, or authority, either branch of the Rhode Island general assembly or any agency or any committee thereof, or any other agency that is in any branch of Rhode Island state government and which exercises governmental functions.

(4) "Coordinating compliance" means the authority to:

(i) Issue guidelines, directives, or instructions that are necessary to effectuate compliance with federal and state laws protecting the rights of individuals with disabilities;

(ii) Establish a grievance procedure to promptly and equitably resolve complaints of noncompliance with federal and state laws protecting the rights of individuals with disabilities involving state agencies, including the power to investigate possible discrimination and eliminate unlawful practices by informal methods of conference, conciliation, and persuasion;

(iii) Initiate complaints against any state agency that willfully fails to comply with federal and state laws protecting the rights of individuals with disabilities to the appropriate state or federal agency; and

(iv) Develop, make periodic revisions to, and oversee the implementation of a transition plan for the removal of environmental and communication barriers in state-owned facilities.

(5) "Providing technical assistance to public and private agencies, businesses, and

4-11 citizens on complying with federal and state laws protecting the rights of individuals with
4-12 disabilities" means information dissemination and training designed to encourage the voluntary
4-13 compliance with laws protecting the rights of individuals with disabilities; conducting disability
4-14 accessibility surveys and providing advice on how to overcome any barriers to accessibility; and a
4-15 mediation service to assist parties who voluntarily chose to utilize that service to resolve
4-16 allegations of discrimination on the basis of disability.
4-17 (6) "Promoting on behalf of the people with disabilities and assuring, on behalf of the
4-18 state, that people with disabilities are afforded the opportunities to exercise all of the rights and
4-19 responsibilities accorded to citizens of this state" means the authority to act and appear on behalf
4-20 of the people with disabilities to present evidence and make arguments before any federal, state or
4-21 local agency or public body regarding matters pending before that agency or public body that
4-22 may have an adverse effect on persons with disabilities.
4-23 SECTION 3. This act shall take effect upon passage.

MOTION: To find beneficial **10 H 7786 An Act Relating to Public Property and Works - Accessible Electronic And Information Technology** GR/BI passed; PP & RB abstained

Employment

6 **10 H 7809 AN ACT RELATING TO LABOR AND LABOR RELATIONS – SICK LEAVE**
Rep. Messier House Labor Committee
This act would create comprehensive laws designed to provide workers to seek medical leave, to require employers to provide paid sick time for their employees and would protect employees from job loss for their approved use of their sick leave. This act would take effect ninety (90) days from passage, provided that in the case of employees covered by a collective bargaining agreement in effect at the time of passage, and would not go into effect until the applicable agreement expires

Reviewer's Comments: While I think this bill may be beneficial to a segment of employees with and without disabilities in the workplace, I have the following questions. Page 6 line 12 -15 will this represent a liability to employers as far as what time they have to carry on the books; page 7 line 24 and 25 use of the word "may" in "An employer **may** not require that the documentation explain the nature of the illness or the details of the violence". Does this mean they can require it? Line 26 – 30 page 7, is this requiring the employer to pay for tx. Appt. or is it copying fees related to medical records/documentation.
Linda Deschenes
Recommendation: ☐ beneficial ☑ beneficial if amended ☐ harmful unless amended ☐ harmful

1-1 SECTION 1. Title 28 of the General Laws entitled "LABOR AND LABOR
1-2 RELATIONS" is hereby amended by adding thereto the following chapter:
1-3 **CHAPTER 54**
1-4 **HEALTHY AND SAFE FAMILIES AND WORKPLACES ACT**
1-5 **28-54-1. Short title. –** This chapter shall be known and may be cited as the "Healthy and
1-6 Safe Families and Workplaces Act."
1-7 **28-54-2. Legislative findings. –** The general assembly finds that:
1-8 (1) Most workers in the State of Rhode Island will at some time during the year need
1-9 temporary time off from work to take care of his or her own health needs or the health needs of
1-10 members of their families.
1-11 (2) Nationally, fifty-two percent (52%) of all private sector workers have paid sick time
1-12 and only thirty percent (30%) of workers may use that time to care for sick children. There are
1-13 many workers in Rhode Island who do not have any paid sick time, or who have inadequate time,
1-14 to care for their own health needs or the health needs of members of their families. In fact, one
1-15 hundred ninety thousand (190,000) Rhode Islanders, or forty-six percent (46%) of all workers, are
1-16 unable to take a sick day when they are ill.
1-17 (3) Low-income workers are significantly less likely to have paid sick time than other
1-18 members of the workforce. Only one in five (5) low-income workers (twenty percent (20%) has
1-19 access to paid sick time.
2-1 (4) Providing workers time off to attend to their own health care and the health care of
2-2 family members will ensure a healthier and more productive workforce in the State of Rhode

Island.

(5) Paid sick time will have a positive effect on the public health of Rhode Island by allowing sick workers the occasional option of staying at home to care for themselves when ill, thus lessening their recovery time and reducing the likelihood of spreading illness to other members of the workforce and to the public.

(6) Paid sick time will allow parents to provide personal care for their sick children. Parental care makes children's recovery faster, prevents more serious illnesses, and improves children's overall mental and physical health.

(7) Providing a minimal amount of paid sick time is affordable for employers and good for business.

(8) Paid sick time is good for business. Employers who provide paid sick time have greater employee retention and avoid the problem of workers coming to work sick and lowering productivity.

(9) Almost sixty percent (60%) of those who provide unpaid care to an adult family member or friend must combine their caregiving with employment in order to provide financially for their family member and themselves.

(10) Employees frequently lose their jobs or are disciplined with suspensions or demerits for taking sick time to care for sick family members or even to recover from their own illnesses. One in six (6) workers report they or a family member has been fired, suspended, punished or threatened by an employer because they needed to take sick time for themselves or a family member.

(11) Workers in jobs with high public contact, such as service workers and restaurant workers, are very unlikely to have paid sick time. Because of the lack of paid sick time, these workers have no choice but to come to work when they are ill, thereby increasing the risk of passing illnesses on to co-workers and customers.

(12) In the event of an outbreak that presents a threat to public health – for example, the H1N1 outbreak of 2009 – government officials request that sick workers stay home and keep sick children home from school or child care to prevent the spread of the virus, and to safeguard workplace productivity. However, because many workers lack paid sick time, to protect their paychecks and their jobs, many are unable to comply with these requests.

(13) Many employers would like to provide their workers with paid sick time but fear being at a competitive disadvantage because other employers do not.

(14) Nearly 1 in three (3) American women report physical or sexual abuse by a husband or boyfriend at some point in their lives. Domestic abuse results in an estimated one thousand two hundred (1,200) deaths and two million (2,000,000) injuries among women annually. Two hundred forty-eight thousand three hundred (248,300) individuals were raped or sexually in 2007. Intimate partner violence also affects men; women account for eighty-five percent (85%) of the victims of intimate partner violence and men account for approximately fifteen percent (15%) of the victims. Therefore, women disproportionately need time off to care for their health or to find solutions, such as a restraining order or finding housing, to avoid or prevent physical or sexual abuse.

(15) The centers for disease control has estimated that domestic abuse costs over seven hundred million dollars ($700,000,000) annually due to the victim's lost productivity in employment.

(16) Victims of domestic abuse are forced to lose days of paid employment because of the violence they face. The mean number of days of paid work lost by rape victims is eight and one tenth (8.1) days, for victims of physical assault seven and two tenths (7.2) days and for stalking ten and one tenth (10.1) days. Without paid sick and safe days, these victims are in grave danger of losing their jobs. The loss of employment can be particularly devastating for victims of domestic abuse, who often need economic security to ensure safety.

(17) The general accounting office found that twenty-five percent (25%) – fifty percent (50%) of domestic abuse victims reported losing a job due, at least in part, to domestic abuse.

28-54-3. Legislative purposes. – (a) To ensure that all workers in Rhode Island can address their own health and safety needs and the health and safety needs of their families by requiring employers to provide a minimum level of paid sick and safe time including time for

3-24 family care.
3-25 (b) To diminish public and private health care costs in Rhode Island by enabling workers
3-26 to seek early and routine medical care for themselves and their family members;
3-27 (c) To protect employees in Rhode Island from losing their jobs while they use sick and
3-28 safe time to care for themselves or their families;
3-29 (d) To assist victims of domestic abuse and their family members by providing them with
3-30 job protected time away from work to allow them to receive treatment and to take the necessary
3-31 steps to ensure their protection;
3-32 (e) To safeguard the public welfare, health, safety and prosperity of the people of Rhode
3-33 Island; and
3-34 (f) To accomplish the purposes described above in a manner that is feasible for
4-1 employers.
4-2 **28-54-4. Definitions. –** As used in this chapter, the following words and terms have the
4-3 following meaning:
4-4 (1) "Agency" means Rhode Island department of labor and training.
4-5 (2) "Employee" is as defined in subdivision 28-12-2(5) and includes recipients of public
4-6 benefits who are engaged in work activity as a condition of receiving public assistance.
4-7 (3) "Employer" is as defined in subdivision 28-12-2(6).
4-8 (4) "Domestic abuse" is as defined in subdivision 15-15-1(2).
4-9 (5) "Sexual contact" is as defined in chapter 11-37.
4-10 (6) "Stalking" is defined as in Rhode Island general laws, subdivision 15-15-1(6).
4-11 (7) "Family member" is defined as:
4-12 (i) A biological, adopted or foster child, stepchild or legal ward, a child of a domestic
4-13 partner, or a child to whom the employee stand in loco parentis;
4-14 (ii) A biological, foster, stepparent or adoptive parent or legal guardian of an employee or
4-15 an employee's spouse or domestic partner or a person who stood in loco parentis when the
4-16 employee was a minor child;
4-17 (iii) A person to whom the employee is legally married under the laws of Rhode Island;
4-18 (iv) A grandparent or spouse or domestic partner of a grandparent;
4-19 (v) A grandchild;
4-20 (vi) A biological, foster, or adopted sibling or spouse or domestic partner of a biological,
4-21 foster or adopted sibling;
4-22 (vii) A domestic partner; or
4-23 (viii) Any other individual related by blood or affinity whose close association with the
4-24 employee is the equivalent of a family relationship.
4-25 (8) "Small business" means any private individual, firm, partnership, institution,
4-26 corporation, or association for which fewer than ten (10) persons work for compensation during a
4-27 given week. In determining the number of persons performing work for compensation during a
4-28 given week, all persons performing work for compensation on a full-time, part-time, or temporary
4-29 basis shall be counted, including persons made available to work through the services of
4-30 temporary services or staffing agency or similar entity. In situations in which the number of
4-31 persons who work for compensation per week fluctuates above and below ten (10) or more per
4-32 week over the course of a year, an employer is not considered a small business if it maintained
4-33 ten (10) or more employees on the payroll during twenty (20) or more calendar workweeks (not
4-34 necessarily consecutive workweeks) in either the current or the preceding calendar year.
5-1 (9) "Health care professional" means any person licensed under federal or Rhode Island
5-2 law to provide medical or emergency services, including, but not limited to, doctors, nurses and
5-3 emergency room personnel.
5-4 (10) "Paid sick time" (or "paid sick and safe time") means time that is compensated at the
5-5 same hourly rate and with the same benefits, including health care benefits, as the employee
5-6 normally earns during hours worked and is provided by an employer to an employee for the
5-7 purposes described in section 28-54-6 of this chapter, but in no case shall the hourly wage be less
5-8 than that provided under Rhode Island general laws, section 28-12-2.
5-9 (11) "Retaliatory personnel action" means the discharge, suspension, or demotion by an
5-10 employer or an employee or any other adverse action taken by an employer against an employee

5-11 and also includes any sanctions against a recipient of public benefits.
5-12 **28-54-5. Accrual of paid sick and safe time. –** (a) All employees who work in Rhode
5-13 Island for more than four (4) days in a year have the right to paid sick and safe time as provided
5-14 in this section.
5-15 (b) Employees will not accrue more than seven (7) days of paid sick and safe time in a
5-16 calendar year or to a pro rata number of paid days or hours under the provisions of subsection (a),
5-17 unless the employer selects a higher limit.
5-18 (1) All employees shall accrue a minimum of one hour of paid sick and safe time for
5-19 every thirty (30) hours worked up to the maximum of seven (7) paid sick days.
5-20 (c) Employees of small businesses will not accrue more then four (4) days of paid sick
5-21 and safe time in a calendar year, unless the employer selects a higher limit.
5-22 (d) Employees who are exempt from overtime requirements under 29 U.S.C. §213(a)(1)
5-23 of the federal fair labor standards act will be assumed to work forty (40) hours in each work week
5-24 for purposes of paid sick and safe time accrual unless their normal work week is less than forty
5-25 (40) hours, in which case paid sick and safe time accrues based upon that normal work week.
5-26 (e) Paid sick and safe time as provided in this section shall begin to accrue at the
5-27 commencement of employment.
5-28 (f) Employees shall be entitled to use accrued paid sick and safe time beginning on the
5-29 ninetieth (90th) calendar day following commencement of their employment. After the ninetieth
5-30 (90th) calendar day of employment, employees may use paid sick and safe time as it is accrued.
5-31 (g) Paid sick and safe time shall be carried over to the following calendar year; however,
5-32 an employee's use of paid sick and safe time provided under this act in each calendar year shall
5-33 not exceed four (4) days for employees of small businesses and seven (7) days for employees of
5-34 all other businesses.
6-1 (h) Any employer with a paid leave policy, such as a paid time off policy, who makes
6-2 available an amount of paid leave sufficient to meet the accrual requirements of this section that
6-3 may be used for the same purposes and under the same conditions as paid sick and safe time
6-4 under; this section is not required to provide additional paid sick and safe time.
6-5 (i) Nothing in this section shall be construed as requiring financial or other
6-6 reimbursement to an employee from an employer upon the employee's termination, resignation,
6-7 retirement, or other separation from employment for accrued paid sick and safe time that has not
6-8 been used.
6-9 (j) If an employee is transferred to a separate division, entity or location, but remains
6-10 employed by the same employer, the employee is entitled to all paid sick time accrued at the prior
6-11 division, entity or location and is entitled to use all paid sick time as provided in this section.
6-12 When there is a separation from employment and the employee is rehired within 1 year of
6-13 separation by the same employer, previously accrued paid sick and safe time that had not been
6-14 used shall be reinstated. Further, the employee shall be entitled to use accrued paid sick and safe
6-15 time and accrue additional sick and safe time at the re-commencement of employment.
6-16 (k) At its discretion, the employer may loan sick and safe time to the employee in
6-17 advance of accrual by such employee.
6-18 **28-54-6. Use of paid sick and safe time. –** (a) Paid sick and safe time shall be provided
6-19 to an employee by an employer for:
6-20 (1) An employee's mental or physical illness, injury or health condition; an employee's
6-21 need for medical diagnosis, care, or treatment of a mental or physical illness, injury or health
6-22 condition; an employee's need for preventive medical care;
6-23 (2) Care of a family member with a mental or physical illness, injury or health condition;
6-24 care of a family member who needs medical diagnosis, care, or treatment of a mental or physical
6-25 illness, injury or health condition; care of a family member who needs preventive medical care.
6-26 (3) Closure of the employee's place of business by order of a public official due to a
6-27 public health emergency or an employee's need to care for a child whose school or place of care
6-28 has been closed by order the pubic official due to a public health emergency or care for a family
6-29 member when it has been determined by the health authorities having jurisdiction or by a health
6-30 care provider that the family member's presence in the community would jeopardize the health of
6-31 others because of the family member's exposure to a communicable disease, whether or not the

family member has actually contracted the communicable disease.

(4) Absence necessary due to domestic abuse, sexual assault or stalking, provided the leave is to:

(i) Seek medical attention for the employee or employee's child, spouse, parent, grandparent or extended family member to recover from physical or psychological injury or disability caused by domestic or sexual violence; or

(ii) Obtain services from a victim services organization; or

(iii) Obtain psychological or other counseling; or

(iv) Seek relocation due to the domestic or sexual violence or stalking; or

(5) Take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from the domestic or sexual violence.

(b) Paid sick and safe time shall be provided upon the oral request or an employee. When possible, the request shall include the expected duration of the absence.

(c) When the use of paid sick and safe time is foreseeable, the employee shall make good faith effort to provide notice the need for such time to the employer in advance of the use of the sick and safe time and shall make a reasonable effort to schedule the use of sick and safe time in a manner that does not unduly disrupt the operations of the employer.

(d) Accrued sick and safe time may be used in the smaller of hourly increments or the smallest increment that the employer's payroll system uses to account for absences or use of other time.

(e) For sick and safe time of more than three (3) consecutive days, an employer may require reasonable documentation that the sick and safe time is covered by subsection (1). Documentation signed by a health care professional indicating that sick time is necessary shall be considered reasonable documentation. A police report indicating that the employee was a victim of domestic abuse, stalking, or sexual assault; a court order; or a signed statement from a victim and witness advocate affirming that the employee is involved in legal action related to domestic abuse, stalking or sexual assault shall be considered reasonable documentation. An employer may not require that the documentation explain the nature of the illness of the details of the violence. If an employer chooses to require documentation for sick time and the employee does not have health insurance, the employer is responsible for paying all of out of pocket expenses the employee incurs in obtaining the documentation. If the employee does have health insurance, the employer is responsible for paying any costs charged to the employee by the health care provider for providing the specific documentation required by the employer.

(f) An employer may not require, as a condition of providing paid sick and safe time under this chapter, that the employee search for or find a replacement worker to cover the hours during which the employee is on paid sick and safe time.

28-54-7. Exercise of rights protected; retaliation prohibited. – (a) It shall be unlawful for an employer or any other person to interfere with, restrain, or deny the exercise of, or the attempt to exercise, any right protected under this chapter.

(b) An employer shall not take retaliatory personnel action or discriminate against an employee because the employee has exercised rights protected under this chapter. Such rights include but are not limited to the right to use paid sick and safe time pursuant to this chapter; the right to file a complaint or inform any person about any employer's alleged violation of this chapter; the right to cooperate with the agency in its investigations of alleged violations of this chapter; and the right to inform any person of his or her potential rights under this section.

(c) It shall be unlawful for an employer's absence control policy to count paid sick and safe time taken under this chapter as an absence that may lead to or result in discipline, discharge, demotion, suspension, or ay other adverse action.

(d) Protections of this section shall apply to any person who mistakenly but in good faith alleges violations of this section.

(e) There shall be a rebuttable presumption of unlawful retaliation under this section whenever an employer takes adverse action against a person within ninety (90) days of when that person: (1) Files a complaint with the agency or a court alleging a violation of any provision of this section; (2) Informs any person about an employer's alleged violation of this section; (3) Cooperates with the agency or other persons in the investigation or prosecution of any alleged

violation of this section; (4) Opposes any policy, practice, or act that is unlawful under this section; or (5) Informs any person of his or her rights under this section.

28-54-8. Notice and posting. – (a) Employers shall give notice that employees are entitled to paid sick and safe time, the amount of paid sick and safe time, and the terms of is use guaranteed under this chapter, that the retaliation against employees who request or use paid sick and safe time is prohibited and that each employee has the right to file a complaint or bring a civil action if sick and safe time as required by this section is denied by the employer or the employee is retaliated against for requesting or taking paid sick and safe time.

(b) Employers may comply with this section by supplying each of their employees with a notice in English and in any language that is the first language spoken by at least five percent (5%) of the employer's workforce, all information required under subsection (a).

(c) Employers may comply with this section by displaying a poster in a conspicuous and accessible place in each establishment where such employees are employed which contains in English and in any language that is the first language spoken by at least five percent (5%) of the employer's workforce, all information required under subsection (a).

(d) The agency shall create and make available to employers posters that contain the information required under subsection (a) for their use in complying with this subsection.

(e) An employer who willfully violates the notice and posting requirements of this section shall be subject to a civil fine in an amount not to exceed one hundred dollars ($100) for each separate offense.

28-54-9. Employer records. – Employers shall retain records documenting hours worked by employees and paid sick and safe time taken by employees, for a period of five (5) years, and shall allow the agency access to such records, with appropriate notice and at a mutually agreeable time, to monitor compliance with the requirements of this chapter. When an issue arises as to an employee's entitlement to paid sick and safe time under this section, if the employer does not maintain or retain adequate records documenting hours worked by the employee and paid sick and safe time taken by the employee, or does not allow the agency reasonable access to such records, it shall be presumed that the employer has violated the chapter, absent clear and convincing evidence otherwise.

28-54-10. Regulations. – The agency shall be authorized to coordinate implementation and enforcement of this section and shall promulgate appropriate guidelines or regulations for such purposes.

28-54-11. Enforcement. – (a) Administrative enforcement. (1) An employee or other person may report to the agency any suspected violation of this act. The agency shall encourage reporting pursuant to this subsection by keeping confidential, to the maximum extent permitted by applicable laws, the name and other identifying information of the employee or person reporting the violation. Provided, however, that with the authorization of such person, the agency may disclose his or her name and identifying information as necessary to enforce this section or for other appropriate purposes.

(2) The agency is authorized to take appropriate steps to enforce this section.

28-54-12. Confidentiality and non-disclosure. – An employer may not require disclosure of details relating to domestic abuse, sexual assault or stalking or the details of an employee's medical condition as a condition of providing paid sick leave under this chapter. If an employer possesses health information or information pertaining to domestic abuse, sexual assault or stalking about an employee or employee's family member, such information shall be treated as confidential and not disclosed except to the affected employee or with the permission of the affect employee.

28-54-13. Encouragement of more generous sick and safe time policies; No effect on more generous policies. – (a) Nothing in this chapter shall be construed to discourage or prohibit an employer from the adoption or retention of a paid sick and safe time policy more generous than the one required herein.

(b) Nothing in this chapter shall be construed as diminishing the obligation of an employer to comply with any contract, collective bargaining agreement, employment benefit plan or other agreement providing more generous sick and safe time to an employee than required herein.

10-6 (c) Nothing in this chapter shall be construed as diminishing the rights of public
10-7 employees regarding paid sick and safe time or use of sick and safe time as provided in Rhode
10-8 Island general laws.
10-9 **28-54-14. Other legal requirements. –** This chapter provides minimum requirements
10-10 pertaining to paid sick and safe time and shall not be construed to preempt, limit, or otherwise
10-11 affect the applicability of any other law, regulation, requirement, policy, or standard that provides
10-12 for greater accrual or use by employees of sick and safe time, whether paid or unpaid, or that
10-13 extends other protections to employees.
10-14 **28-54-15. Severability. –** If any provision of this chapter or application thereof to any
10-15 person or circumstance is judged invalid, the invalidity shall not affect other provisions or
10-16 applications of the chapter which can be given effect without the invalid provision or application,
10-17 and to this end the provisions of this chapter are declared severable.
10-18 This chapter shall take effect ninety (90) days following enactment, provided that in the
10-19 case of employees covered by a collective bargaining agreement in effect on the effective date
10-20 prescribed herein, this act shall apply on the date of the termination of such agreement.

MOTION: To take no position on **10 H 7809 An Act Relating to Labor and Labor Relations – Sick Leave** GR/JB passed; BI nay; RB, PP, & LD abstain

Health Insurance

7 **10 H 7260 AN ACT RELATING TO INSURANCE–AUTISM SPECTRUM DISORDERS** Rep. Palumbo House Corporations Committee

This act would require coverage for the diagnosis and treatment of autism spectrum disorders (any of the pervasive developmental disorders as defined by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), including Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Not Otherwise Specified).

Every individual or group health insurance contract, plan, or policy delivered, issued for delivery or renewed in this state shall provide coverage for the diagnosis and treatment of autism spectrum disorders. No insurer shall terminate coverage, or refuse to deliver, execute, issue, mend, adjust, or renew coverage to an individual solely because the individual is diagnosed with one of the autism spectrum disorders or has received treatment for autism spectrum disorders. This act would take effect upon passage.

Reviewer's Comments:

Linda Ward

Recommendation: ☐ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

1-1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness
1-2 Insurance Policies" is hereby amended by adding thereto the following section:
1-3 **27-18-71. Mandatory coverage for diagnosis and treatment of autism spectrum**
1-4 **disorders. –** (a) As used in this section:
1-5 (1) "Applied behavior analysis" means the design, implementation and evaluation of
1-6 environmental modifications, using behavioral stimuli and consequences, to produce socially
1-7 significant improvement in human behavior, including the use of direct observation,
1-8 measurement, and functional analysis of the relationship between environment and behavior.
1-9 (2) "Autism services provider" means any person, entity, or group that provides treatment
1-10 of autism spectrum disorders.
1-11 (3) "Autism spectrum disorders" means any of the pervasive developmental disorders as
1-12 defined by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders
1-13 (DSM), including Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Not
1-14 Otherwise Specified.
1-15 (4) "Diagnosis of autism spectrum disorders" means medically necessary assessment,
1-16 evaluations, or tests to diagnose whether an individual has one of the autism spectrum disorders.
1-17 (5) "Habilitative or rehabilitative care" means professional counseling, and guidance
1-18 services and treatment programs, including applied behavioral analysis, that are necessary to
1-19 develop, maintain, and restore, to the maximum extent practicable, the functioning of an
2-1 individual.

(6) “Health insurance policy” means any group health policy or contract issued by an insurance entity subject to chapters 18, 19, 20 and 41 of title 27 of the general laws.

(7) “Medically necessary” means reasonably expected to do the following:

(i) Prevent the onset of an illness, condition, injury or disability;

(ii) Reduce or ameliorate the physical, mental or developmental effects of an illness, condition, injury or disability; or

(iii) Assist to achieve or maintain maximum functional capacity in performing daily activities, taking into account both the functional capacity of the individual and the functional capacities that are appropriate for individuals of the same age.

(8) “Pharmacy care” means medications prescribed by a licensed physician and any health-related services deemed medically necessary to determine the need or effectiveness of the medications.

(9) “Psychiatric care” means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

(10) “Psychological care” means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

(11) “Therapeutic care” means services provided by licensed or certified speech therapists, occupational therapists, or physical therapists.

(12) “Treatment for autism spectrum disorders” will include the following care prescribed, provided, or ordered for an individual diagnosed with one of the autism spectrum disorders by a licensed physician or a licensed psychologist who determines the care to be medically necessary:

(i) Habilitative or rehabilitative care;

(ii) Pharmacy care;

(iii) Psychiatric care;

(iv) Psychological care; and

(v) Therapeutic care.

(b)(1) Every individual or group health insurance contract, plan, or policy delivered, issued for delivery or renewed in this state shall provide coverage for the diagnosis and treatment of autism spectrum disorders. No insurer shall terminate coverage, or refuse to deliver, execute, issue, mend, adjust, or renew coverage to an individual solely because the individual is diagnosed with one of the autism spectrum disorders or has received treatment for autism spectrum disorders.

(2) The coverage required under this section shall not be subject to dollar limits, deductibles, or coinsurance provisions that are less favorable to an insured than the dollar limits, deductibles, or coinsurance provisions that apply to physical illness generally under the health insurance policy.

(3) Coverage under this section shall not be subject to any limits on the number of visits an individual may make to an autism services provider.

(4) This section shall not be construed as limiting benefits that are otherwise available to an individual under a health insurance policy.

SECTION 2. Chapter 27-19 of the General Laws entitled “Nonprofit Hospital Service Corporations” is hereby amended by adding thereto the following section:

27-19-62. Mandatory coverage for diagnosis and treatment of autism spectrum disorders. – (a) As used in this section:

(1) “Applied behavior analysis” means the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in human behavior, including the use of direct observation, measurement, and functional analysis of the relationship between environment and behavior.

(2) “Autism services provider” means any person, entity, or group that provides treatment of autism spectrum disorders.

(3) “Autism spectrum disorders” means any of the pervasive developmental disorders as defined by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), including Autistic Disorder, Asperger’s Disorder, and Pervasive Developmental Not Otherwise Specified.

(4) “Diagnosis of autism spectrum disorders” means medically necessary assessment, evaluations, or tests to diagnose whether an individual has one of the autism spectrum disorders.

(5) “Habilitative or rehabilitative care” means professional counseling, and guidance services and treatment programs, including applied behavioral analysis, that are necessary to develop, maintain, and restore, to the maximum extent practicable, the functioning of an individual.

(6) “Health insurance policy” means any group health policy or contract issued by an insurance entity subject to chapters 18, 19, 20 and 41 of title 27 of the general laws.

(7) “Medically necessary” means reasonably expected to do the following:

(i) Prevent the onset of an illness, condition, injury or disability;

(ii) Reduce or ameliorate the physical, mental or developmental effects of an illness, condition, injury or disability; or

(iii) Assist to achieve or maintain maximum functional capacity in performing daily activities, taking into account both the functional capacity of the individual and the functional capacities that are appropriate for individuals of the same age.

(8) “Pharmacy care” means medications prescribed by a licensed physician and any health-related services deemed medically necessary to determine the need or effectiveness of the medications.

(9) “Psychiatric care” means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

(10) “Psychological care” means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

(11) “Therapeutic care” means services provided by licensed or certified speech therapists, occupational therapists, or physical therapists.

(12) “Treatment for autism spectrum disorders” will include the following care prescribed, provided, or ordered for an individual diagnosed with one of the autism spectrum disorders by a licensed physician or a licensed psychologist who determines the care to be medically necessary:

(i) Habilitative or rehabilitative care;

(ii) Pharmacy care;

(iii) Psychiatric care;

(iv) Psychological care; and

(v) Therapeutic care.

(b)(1) Every individual or group health insurance contract, plan, or policy, including any nonprofit hospital service contract plan or policy delivered, issued for delivery or renewed in this state shall provide coverage for the diagnosis and treatment of autism spectrum disorders. No insurer shall terminate coverage, or refuse to deliver, execute, issue, mend, adjust, or renew coverage to an individual solely because the individual is diagnosed with one of the autism spectrum disorders or has received treatment for autism spectrum disorders.

(2) The coverage required under this section shall not be subject to dollar limits, deductibles, or coinsurance provisions that are less favorable to an insured than the dollar limits, deductibles, or coinsurance provisions that apply to physical illness generally under the health insurance policy.

(3) Coverage under this section shall not be subject to any limits on the number of visits an individual may make to an autism services provider.

(4) This section shall not be construed as limiting benefits that are otherwise available to an individual under a health insurance policy.

SECTION 3. Chapter 27-20 of the General Laws entitled “Nonprofit Medical Service Corporations” is hereby amended by adding thereto the following sections:

27-20-57. Mandatory coverage for diagnosis and treatment of autism spectrum disorders. – (a) As used in this section:

(1) “Applied behavior analysis” means the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in human behavior, including the use of direct observation, measurement, and functional analysis of the relationship between environment and behavior.

(2) “Autism services provider” means any person, entity, or group that provides treatment of autism spectrum disorders.

(3) “Autism spectrum disorders” means any of the pervasive developmental disorders as defined by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), including Autistic Disorder, Asperger’s Disorder, and Pervasive Developmental Not Otherwise Specified.

(4) “Diagnosis of autism spectrum disorders” means medically necessary assessment, evaluations, or tests to diagnose whether an individual has one of the autism spectrum disorders.

(5) “Habilitative or rehabilitative care” means professional counseling, and guidance services and treatment programs, including applied behavioral analysis, that are necessary to develop, maintain, and restore, to the maximum extent practicable, the functioning of an individual.

(6) “Health insurance policy” means any group health policy or contract issued by an insurance entity subject to chapters 18, 19, 20 and 41 of title 27 of the general laws.

(7) “Medically necessary” means reasonably expected to do the following:

(i) Prevent the onset of an illness, condition, injury or disability;

(ii) Reduce or ameliorate the physical, mental or developmental effects of an illness, condition, injury or disability; or

(iii) Assist to achieve or maintain maximum functional capacity in performing daily activities, taking into account both the functional capacity of the individual and the functional capacities that are appropriate for individuals of the same age.

(8) “Pharmacy care” means medications prescribed by a licensed physician and any health-related services deemed medically necessary to determine the need or effectiveness of the medications.

(9) “Psychiatric care” means direct or consultative services provided by a psychiatrist licensed in the state in which the psychiatrist practices.

(10) “Psychological care” means direct or consultative services provided by a psychologist licensed in the state in which the psychologist practices.

(11) “Therapeutic care” means services provided by licensed or certified speech therapists, occupational therapists, or physical therapists.

(12) “Treatment for autism spectrum disorders” will include the following care prescribed, provided, or ordered for an individual diagnosed with one of the autism spectrum disorders by a licensed physician or a licensed psychologist who determines the care to be medically necessary:

(i) Habilitative or rehabilitative care;

(ii) Pharmacy care;

(iii) Psychiatric care;

(iv) Psychological care; and

(v) Therapeutic care.

(b)(1) Any nonprofit medical service contract, plan, or policy delivered, issued for delivery or renewed in this state shall provide coverage for the diagnosis and treatment of autism spectrum disorders. No insurer shall terminate coverage, or refuse to deliver, execute, issue, mend, adjust, or renew coverage to an individual solely because the individual is diagnosed with one of the autism spectrum disorders or has received treatment for autism spectrum disorders.

(2) The coverage required under this section shall not be subject to dollar limits, deductibles, or coinsurance provisions that are less favorable to an insured than the dollar limits, deductibles, or coinsurance provisions that apply to physical illness generally under the health insurance policy.

(3) Coverage under this section shall not be subject to any limits on the number of visits an individual may make to an autism services provider.

(4) This section shall not be construed as limiting benefits that are otherwise available to an individual under a health insurance policy.

SECTION 4. Chapter 27-41 of the General Laws entitled “Health Maintenance Organizations” is hereby amended by adding thereto the following section:

27-41-75. Mandatory coverage for diagnosis and treatment of autism spectrum

6-31 **disorders. –** (a) As used in this section:
6-32 (1) "Applied behavior analysis" means the design, implementation and evaluation of
6-33 environmental modifications, using behavioral stimuli and consequences, to produce socially
6-34 significant improvement in human behavior, including the use of direct observation,
7-1 measurement, and functional analysis of the relationship between environment and behavior.
7-2 (2) "Autism services provider" means any person, entity, or group that provides treatment
7-3 of autism spectrum disorders.
7-4 (3) "Autism spectrum disorders" means any of the pervasive developmental disorders as
7-5 defined by the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders
7-6 (DSM), including Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Not
7-7 Otherwise Specified.
7-8 (4) "Diagnosis of autism spectrum disorders" means medically necessary assessment,
7-9 evaluations, or tests to diagnose whether an individual has one of the autism spectrum disorders.
7-10 (5) "Habilitative or rehabilitative care" means professional counseling, and guidance
7-11 services and treatment programs, including applied behavioral analysis, that are necessary to
7-12 develop, maintain, and restore, to the maximum extent practicable, the functioning of an
7-13 individual.
7-14 (6) "Health insurance policy" means any group health policy or contract issued by an
7-15 insurance entity subject to chapters 18, 19, 20 and 41 of title 27 of the general laws.
7-16 (7) "Medically necessary" means reasonably expected to do the following:
7-17 (i) Prevent the onset of an illness, condition, injury or disability;
7-18 (ii) Reduce or ameliorate the physical, mental or developmental effects of an illness,
7-19 condition, injury or disability; or
7-20 (iii) Assist to achieve or maintain maximum functional capacity in performing daily
7-21 activities, taking into account both the functional capacity of the individual and the functional
7-22 capacities that are appropriate for individuals of the same age.
7-23 (8) "Pharmacy care" means medications prescribed by a licensed physician and any
7-24 health-related services deemed medically necessary to determine the need or effectiveness of the
7-25 medications.
7-26 (9) "Psychiatric care" means direct or consultative services provided by a psychiatrist
7-27 licensed in the state in which the psychiatrist practices.
7-28 (10) "Psychological care" means direct or consultative services provided by a
7-29 psychologist licensed in the state in which the psychologist practices.
7-30 (11) "Therapeutic care" means services provided by licensed or certified speech
7-31 therapists, occupational therapists, or physical therapists.
7-32 (12) "Treatment for autism spectrum disorders" will include the following care
7-33 prescribed, provided, or ordered for an individual diagnosed with one of the autism spectrum
7-34 disorders by a licensed physician or a licensed psychologist who determines the care to be
8-1 medically necessary:
8-2 (i) Habilitative or rehabilitative care;
8-3 (ii) Pharmacy care;
8-4 (iii) Psychiatric care;
8-5 (iv) Psychological care; and
8-6 (v) Therapeutic care.
8-7 (b)(1) Every health maintenance organization contract, plan, or policy delivered, issued
8-8 for delivery or renewed in this state shall provide coverage for the diagnosis and treatment of
8-9 autism spectrum disorders. No insurer shall terminate coverage, or refuse to deliver, execute,
8-10 issue, mend, adjust, or renew coverage to an individual solely because the individual is diagnosed
8-11 with one of the autism spectrum disorders or has received treatment for autism spectrum
8-12 disorders.
8-13 (2) The coverage required under this section shall not be subject to dollar limits,
8-14 deductibles, or coinsurance provisions that are less favorable to an insured than the dollar limits,
8-15 deductibles, or coinsurance provisions that apply to physical illness generally under the health
8-16 insurance policy.
8-17 (3) Coverage under this section shall not be subject to any limits on the number of visits

an individual may make to an autism services provider.

(4) This section shall not be construed as limiting benefits that are otherwise available to an individual under a health insurance policy.

SECTION 5. This act shall take effect upon passage.

MOTION: To tabled until the next meeting **10 H 7260 An Act Relating to Insurance–Autism Spectrum Disorders** BI/SB passed unanimously
8 **10 H 7701 AN ACT RELATING TO INSURANCE--HEARING AIDS** Rep. Handy House Corporations Committee This act would increase the hearing aid medical insurance coverage for those insured under the age of nineteen (19) from one thousand five dollars ($1,500) to full cost and for those age nineteen (19) and older from seven hundred dollars ($700) to one thousand five hundred dollars ($1,500). This act would take effect upon passage.
Reviewer's Comments: Health insurance policies that include durable medical equipment (including wheelchairs, prosthesis, etc.) should no longer have separate (and never equal) limits on hearing aids. Bob Cooper Recommendation ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful ☐ no position

SECTION 1. Section 27-18-60 of the General Laws in Chapter 27-18 entitled "Accident and Sickness Insurance Policies" is hereby amended to read as follows:

27-18-60. Hearing aids. -- (a) (1) Every individual or group health insurance contract, or every individual or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide coverage for ~~one thousand five hundred dollars ($1,500) per individual hearing aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall provide coverage for seven hundred dollars ($700) per individual hearing aid, per ear, every three (3) years for anyone of the age of nineteen (19) years and older~~ anyone under the age of nineteen (19) years old for one individual hearing aid, each per ear, no more than every three (3) years but shall provide for anyone at least nineteen (19) years old coverage for one thousand five hundred dollars ($1,500) for individual hearing aids every three (3) years.

(2) Every group health insurance contract or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide, as an optional rider, additional hearing aid coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies subject to the small employer health insurance availability act, chapter 50 of this title.

(b) For the purposes of this section:

(1) "Hearing aid" means any nonexperimental, wearable instrument or device designed for the ear and offered for the purpose of aiding or compensating for impaired human hearing, but excluding batteries, cords, and other assistive listening devices, including, but not limited to FM systems.

(c) It shall remain within the sole discretion of the accident and sickness insurer as to the provider of hearing aids with which they choose to contract. Reimbursement shall be provided according to the respective principles and policies of the accident and sickness insurer. Nothing contained in this section precludes the accident and sickness insurer from conducting managed care, medical necessity, or utilization review.

(d) This section does not apply to insurance coverage providing benefits for: (1) hospital confinement indemnity; (2) disability income; (3) accident only; (4) long term care; (5) Medicare supplement; (6) limited benefit health; (7) specified diseased indemnity; (8) sickness of bodily injury or death by accident or both; (9) and other limited benefit policies.

SECTION 2. Section 27-19-51 of the General Laws in Chapter 27-19 entitled "Nonprofit Hospital Service Corporations" is hereby amended to read as follows:

27-19-51. Hearing aids. -- (a) (1) Every individual or group health insurance contract, or every individual or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide coverage for ~~one thousand five hundred dollars ($1,500) per individual hearing aid, per~~

~~ear, every three (3) years for anyone under the age of nineteen (19) years, and shall provide coverage for seven hundred dollars ($700) per individual hearing aid, per ear, every three (3) years for anyone of the age of nineteen (19) years and older~~ anyone under the age of nineteen (19) years old for one individual hearing aid, each per ear, no more than every three (3) years but shall provide for anyone at least nineteen (19) years old coverage for one thousand five hundred dollars ($1,500) for individual hearing aids every three (3) years.

(2) Every group health insurance contract or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide, as an optional rider, additional hearing aid coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies subject to the small employer health insurance availability act, chapter 50 of this title.

(b) For the purposes of this section, "hearing aid" means any nonexperimental, wearable instrument or device designed for the ear and offered for the purpose of aiding or compensating for impaired human hearing, but excluding batteries, cords, and other assistive listening devices, including, but not limited to, FM systems.

(c) It shall remain within the sole discretion of the nonprofit hospital service corporation as to the provider of hearing aids with which they choose to contract. Reimbursement shall be provided according to the respective principles and policies of the nonprofit hospital service corporation. Nothing contained in this section precludes the nonprofit hospital service corporation from conducting managed care, medical necessity, or utilization review.

SECTION 3. Section 27-20-46 of the General Laws in Chapter 27-20 entitled "Nonprofit Medical Service Corporations" is hereby amended to read as follows:

27-20-46. Hearing aids. -- (a) (1) Every individual or group health insurance contract, or every individual or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide coverage for ~~one thousand five hundred dollars ($1,500) per individual hearing aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall provide coverage for seven hundred dollars ($700) per individual hearing aid, per ear, every three (3) years for anyone of the age of nineteen (19) years and older~~ anyone under the age of nineteen (19) years old for one individual hearing aid, each per ear, no more than every three (3) years but shall provide for anyone at least nineteen (19) years old coverage for one thousand five hundred dollars ($1,500) for individual hearing aids every three (3) years.

(2) Every group health insurance contract or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide, as an optional rider, additional hearing aid coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies subject to the small employer health insurance availability act, chapter 50 of this title.

(b) For the purposes of this section, "hearing aid" means any nonexperimental, wearable instrument or device designed for the ear and offered for the purpose of aiding or compensating for impaired human hearing, but excluding batteries, cords, and other assistive listening devices, including, but not limited to, FM systems.

(c) It shall remain within the sole discretion of the nonprofit medical service corporation as to the provider of hearing aids with which they choose to contract. Reimbursement shall be provided according to the respective principles and policies of the nonprofit medical service corporation. Nothing contained in this section precludes the nonprofit medical service corporation from conducting managed care, medical necessity, or utilization review.

SECTION 4. Section 27-41-63 of the General Laws in Chapter 27-41 entitled "Health Maintenance Organizations" is hereby amended to read as follows:

27-41-63. Hearing aids. -- (a) (1) Every individual or group health insurance contract, or every individual or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide coverage for ~~one thousand five hundred dollars ($1,500) per individual hearing aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall provide coverage for seven hundred dollars ($700) per individual hearing aid, per ear, every three (3) years for anyone of the age of nineteen (19) years and older~~ anyone under the age of nineteen (19)

years old for one individual hearing aid, each per ear, no more than every three (3) years but shall provide for anyone at least nineteen (19) years old coverage for one thousand five hundred dollars ($1,500) for individual hearing aids every three (3) years.

(2) Every group health insurance contract or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, ~~2006~~ 2011, shall provide, as an optional rider, additional hearing aid coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies subject to the small employer health insurance availability act, chapter 50 of this title.

(b) For the purposes of this section, "hearing aid" means any nonexperimental, wearable instrument or device designed for the ear and offered for the purpose of aiding or compensating for impaired human hearing, but excluding batteries, cords, and other assistive listening devices, including, but not limited to FM systems.

(c) It shall remain within the sole discretion of the health maintenance organizations as to the provider of hearing aids with which they choose to contract. Reimbursement shall be provided according to the respective principles and policies of the health maintenance organizations. Nothing contained in this section precludes the health maintenance organizations from conducting managed care, medical necessity, or utilization review.

SECTION 5. This act shall take effect upon passage.

MOTION: To find beneficial **10 H 7701 An Act Relating To Insurance--Hearing Aids** LG/BI passed, LD,RB, & PP abstained

9 **10 H 7702 AN ACT RELATING TO INSURANCE--IMPLANTABLE HEARING DEVICES**

Rep. Jacquard House Corporations Committee

This act would require health insurance providers to provide coverage for implantable hearing restorative or assistive devices. This act would take effect upon passage.

Reviewer's Comments:

Health insurance policies that include hip, knee, pacemakers, etc, should no longer have separate (and never equal) limits on implantable hearing aids.

Bob Cooper

Recommendation ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness Insurance Policies" is hereby amended by adding thereto the following section:

27-18-71. Mandatory coverage for surgery and services for implantation of Federal Drug Administration (FDA) approved implantable hearing devices. – (a) Every individual or group hospital or medical services plan or policy delivered, issued for delivery, or renewed in this state shall provide coverage for surgery and services for implantation of a Federal Drug Administration (FDA) approved implantable hearing device in each ear that shall include, but not be limited to:

(1) Pre- and post-surgery treatment services;

(2) Supplies and accessories necessary for proper operation of the devices; and

(3) Upgrades that are required to maintain the devices.

(b) The following definitions shall apply to the provisions of this section:

(1) "Implantable hearing device" includes any implantable instrument or device that is designed to restore hearing or mitigate the effects of partial hearing loss.

(2) "Pre- and post surgery treatment services" includes diagnosis, evaluation, surgery, mappings, auditory oral rehabilitation and therapy as medically prescribed.

SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service Corporations" is hereby amended by adding thereto the following section:

27-19-62. Mandatory coverage for surgery and services for implantation of Federal Drug Administration (FDA) approved implantable hearing devices. – (a) Every individual or group hospital or medical services plan or policy delivered, issued for delivery, or renewed in this state shall provide coverage for surgery and services for implantation of a Federal Drug Administration (FDA) approved implantable hearing device in each ear that shall include, but not be limited to:

(1) Pre- and post-surgery treatment services;

2-7 (2) Supplies and accessories necessary for proper operation of the devices; and
2-8 (3) Upgrades that are required to maintain the devices.
2-9 (b) The following definitions shall apply to the provisions of this section:
2-10 (1) "Implantable hearing device" includes any implantable instrument or device that is
2-11 designed to restore hearing or mitigate the effects of partial hearing loss.
2-12 (2) "Pre- and post surgery treatment services" includes diagnosis, evaluation, surgery,
2-13 mappings, auditory oral rehabilitation and therapy as medically prescribed.
2-14 SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service
2-15 Corporations" is hereby amended by adding thereto the following section:
2-16 **27-20-57. Mandatory coverage for surgery and services for implantation of Federal**
2-17 **Drug Administration (FDA) approved implantable hearing devices. –** (a) Every individual or
2-18 group nonprofit medical services plan or policy delivered, issued for delivery, or renewed in this
2-19 state shall provide coverage for surgery and services for implantation of a Federal Drug
2-20 Administration (FDA) approved implantable hearing device in each ear that shall include, but not
2-21 be limited to:
2-22 (1) Pre- and post-surgery treatment services;
2-23 (2) Supplies and accessories necessary for proper operation of the devices; and
2-24 (3) Upgrades that are required to maintain the devices.
2-25 (b) The following definitions shall apply to the provisions of this section:
2-26 (1) "Implantable hearing device" includes any implantable instrument or device that is
2-27 designed to restore hearing or mitigate the effects of partial hearing loss.
2-28 (2) "Pre- and post surgery treatment services" includes diagnosis, evaluation, surgery,
2-29 mappings, auditory oral rehabilitation and therapy as medically prescribed.
2-30 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance
2-31 Organizations" is hereby amended by adding thereto the following section:
2-32 **27-41-75. Mandatory coverage for surgery and services for implantation of Federal**
2-33 **Drug Administration (FDA) approved implantable hearing devices. –** (a) Every health
2-34 maintenance organization plan or policy delivered, issued for delivery, or renewed in this state
3-1 shall provide coverage for surgery and services for implantation of a Federal Drug Administration
3-2 (FDA) approved implantable hearing device in each ear that shall include, but not be limited to:
3-3 (1) Pre- and post-surgery treatment services;
3-4 (2) Supplies and accessories necessary for proper operation of the devices; and
3-5 (3) Upgrades that are required to maintain the devices.
3-6 (b) The following definitions shall apply to the provisions of this section:
3-7 (1) "Implantable hearing device" includes any implantable instrument or device that is
3-8 designed to restore hearing or mitigate the effects of partial hearing loss.
3-9 (2) "Pre- and post surgery treatment services" includes diagnosis, evaluation, surgery,
3-10 mappings, auditory oral rehabilitation and therapy as medically prescribed.
3-11 SECTION 5. This act shall take effect upon passage.

MOTION: To find beneficial **10 H 7702 An Act Relating to Insurance--Implantable Hearing Devices** TF/GR passed, LD, RB, PP, & TT abstained
Professional Standards
10 **10 H 7331 AN ACT RELATING TO HEALTH AND SAFETY – LICENSING OF HEALTH CARE FACILITIES** Rep. McNamara House Corporations Committee This act would implement a moratorium on new initial licenses for hospice providers, home nursing care providers, and home care providers until July 1, 2012. This act would take effect upon passage.
Reviewer's Comments: Linda Ward Recommendation: ☐ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

1-1 SECTION 1. Chapter 23-17 of the General Laws entitled "Licensing of Health Care
1-2 Facilities" is hereby amended by adding thereto the following section:

23-17-44.1. Moratorium on New Initial Licenses for Hospice Providers – Home Nursing Providers and Home Care Providers. – (a) The licensing agency shall not issue any new initial licenses for hospice providers, home nursing providers, or home care providers until July 1, 2012.

(b) The moratorium contained herein shall not foreclose the issuance of a license for hospice providers, home nursing care providers or home care providers as a result of a change in effective control of the ownership of any currently licensed hospice provider, home nursing care provider, or home care provider.

SECTION 2. This act shall take effect upon passage.

MOTION: To find harmful **10 H 7331 An Act Relating to Health and Safety – Licensing of Health Care Facilities** BI/ TF passed, LD, RB, & PP abstained

Special Education

11 **10 H 7068 AN ACT RELATING TO EDUCATION – STATE REIMBURSEMENT**

Rep. Carter House Finance Committee

This act would provide that cities and towns would receive a reimbursement from the state for costs to educate students receiving special education services. This act would also provide that for children in group homes and other state care, state funds paid to the cities or towns for the education of said children would follow the residence of said children. In the event a child moves to another city or town during the school year, the state funds would be prorated and distributed in proportion to the number of days during the year that the student is being educated by the city or town. This act would take effect upon passage.

Reviewer's Comment:
Seems obvious that helping towns and cities to provide special education Services is a good thing. And, having the money follow a student who Moved to a new residence would have to make things easier for them.
Liberty Goodwin
Recommendation: ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

SECTION 1. Chapter 16-7.2 of the General Laws entitled "The Education Equity and Property Tax Relief Act" is hereby amended by adding thereto the following sections:

16-7.2-3. Special education reimbursement program. – (a) There is hereby established, subject to appropriation, a special education reimbursement program. Said program shall reimburse municipalities for the eligible instructional costs associated with implementing individual education plans, so-called, of students receiving special education services pursuant to any applicable state and/or federal laws, including, but not limited to, chapter 16-24 ("Children with disabilities") and/or any other applicable federal or state law. Said reimbursements shall be in addition to amounts distributed pursuant to chapter 16-7 ("Foundation level school support") and shall not be included in the calculation of state aid, as set for the in said chapter 16-7, for any subsequent fiscal year. Said reimbursement shall not include costs incurred by municipalities for transportation. Charter schools shall receive reimbursements under this section in the same manner as districts. The department of elementary and secondary education shall define, consistent with this section and in regulations it shall promulgate, those instructional costs associated with implementing individual education plans for pupils that shall be eligible for reimbursement under said program.

(b) For the purposes of this section, the following words shall have the following meanings:

(1) "Instructional costs", shall include only those costs directly attributable to providing the special education services on the student's individual education plan, such as salary of education personnel, salary of related services personnel, costs for specialized books, materials, or equipment, tuition costs, if the student is receiving services from other than the local public school, consultant costs if directly attributable to the student's instructional program, and instructional costs of extended day or year services if such services are a part of the individual education plan. Such costs shall be prorated as appropriate to reflect group activities or costs for part-time services. Instructional costs shall not include transportation costs, administrative or overhead costs, the costs of adapting classrooms or materials that are used by more than one

student, the costs of fringe benefits of personnel employed by the school district, nor the costs associated with evaluation, development of the individual education plan, or service coordination for the student with disabilities. Instructional costs for the purposes of this reimbursement program also shall not include the salary of personnel providing educational services when such services are not specially designed instruction for the student with disabilities.

16-7.2-4. Costs eligible for reimbursement. – (a) Instructional costs eligible for reimbursement under the program shall be reported by a school district to the department in a form and manner as prescribed by the commissioner. For each such school district, the department shall review the report and approve those per pupil instructional costs that are eligible for reimbursement pursuant to the program within thirty (30) days of submission. Based upon the approved costs, the department shall calculate the reimbursement due a municipality. The costs of programs shall be reimbursed at seventy-five percent (75%) of all the approved costs that exceed four (4) times the state average per pupil foundation level, as set forth in chapter 16-7, for the previous fiscal year.

(b) Notwithstanding the foregoing, the reimbursement rate for students who have no father, mother, or guardian living in the state, and for any school age child placed in a school district other than a home town by, or under the auspices of the department children and families, shall be one hundred percent (100%) of all the approved costs that exceed four (4) times the state average per pupil foundation budget.

16-7.2-5. Changes in calculations – Distributions. – (a) Districts shall notify the department within thirty (30) days of any change in previously approved instructional costs, including, but not limited to, changes in a student's enrollment status or individual educational plan.

(b) In preparing a budget recommendation for the subsequent fiscal year for consideration by the local appropriating authority, a school district shall project special education costs and enrollments, including per pupil instructional costs eligible for reimbursement under this program. The school committee's budget recommendation shall exclude any such instructional costs eligible for reimbursement under this program. Upon receipt of reimbursements paid under this program by the municipal treasurer and/or other agent designated to receive such funds for the local and/or regional schools districts, the municipality or district shall record such amounts as additional appropriations to the school committee, without any further action being required on the part of the local appropriating authority.

(c) Reimbursements shall be made based on the previous years' per pupil instructional costs, in compliance with department of elementary and secondary education audits and procedures. Reimbursements shall be made in installments or payments to coincide with the distribution of funds made available pursuant to chapter 16-7.

16-7.2-6. Payment for private residential placements. – (a) Notwithstanding the foregoing, the state shall continue to pay to approved private residential schools sums pursuant to chapter 16-64, authorized by this section on a direct payment basis as the request of a district and the private residential school to which that district sends a student whose tuition is partly reimbursable pursuant to this section.

SECTION 2. Sections 16-64-1.1, 16-64-1.2, 16-64-1.3 and 16-64-2 of the General Laws in Chapter 16-64 entitled "Residence of Children for School Purposes" are hereby amended to read as follows:

16-64-1.1. Payment and reimbursement for educational costs of children placed in foster care, group homes, or other residential facility by a Rhode Island state agency. – (a) Children placed in foster care by a Rhode Island licensed child placing agency or a Rhode Island governmental agency shall be entitled to the same free appropriate public education provided to all other residents of the city or town where the child is placed. The city or town shall pay the cost of the education of the child during the time the child is in foster care in the city or town.

(b) Children placed by DCYF in a group home or other residential facility that does not include the delivery of educational services are to be educated by the community in which the group home or other residential facility is located, and those children shall be entitled to the same free appropriate public education provided to all other residents of the city or town where the child is placed. For purposes of payment and reimbursement for educational costs under this

chapter, the term “group home or other residential facility” shall not include independent living programs. Each city and town that contains one or more group homes or other residential facilities that do not include delivery of educational services will receive funds as part of state aid to education in accordance with the following provisions:

(1) On December 31 of each year the DCYF shall provide the department of elementary and secondary education with a precise count of how many group home or other residential facility “beds” exist in each Rhode Island city or town, counting only those “beds” in facilities that do not include the delivery of educational services. The number of “beds” in each group home or other residential facility shall be equal to the maximum number of children that may be placed in that group home or other residential facility on any given night according to the applicable licensure standards of the DCYF.

(2) For the fiscal year beginning July 1, 2007, if the number of beds certified by the Department of Children, Youth and Families for a school district by December 31, 2007 is greater than the number certified March 14, 2007 upon which the education aid for FY 2008 was appropriated, the education aid for that district will be increased by the number of increased beds multiplied by fifteen thousand dollars ($15,000). Notwithstanding the provisions of this section or any law to the contrary, the education aid for all group home or other residential facility “beds” located or associated with the Children’s Residential and Family Treatment (CRAFT) program located on the East Providence campus of Bradley Hospital shall be twenty-two thousand dollars ($22,000) per bed. The Department of Elementary and Secondary Education shall include the additional aid in equal payments in March, April, May and June, and the Governor’s budget recommendations pursuant to section 35-3-8 shall include the amounts required to provide the increased aid.

For all fiscal years beginning after June 30, 2008, education aid for each school district shall include fifteen thousand dollars ($15,000) for each bed certified by the Department of Children, Youth and Families by the preceding December 31. Notwithstanding the provisions of this section or any law to the contrary, the education aid for all group home or other residential facility “beds” located or associated with the Children’s Residential and Family Treatment (CRAFT) program located on the East Providence campus of Bradley Hospital shall be twenty-two thousand dollars ($22,000) per bed. For all fiscal years beginning after June 30, 2008, whenever the number of beds certified by the Department of Children, Youth and Families for a school district by December 31 is greater than the number certified the prior December 31 upon which the education aid for that fiscal year was appropriated, the education aid for that district as enacted by the assembly during the prior legislative session for that fiscal year will be increased by the number of increased beds multiplied by the amount per bed authorized for that fiscal year. The Department of Elementary and Secondary Education shall include the additional aid in equal payments in March, April, May and June, and the Governor’s budget recommendations pursuant to section 35-3-8 shall include the amounts required to provide the increased aid.

(3) [Deleted by P.L. 2007, ch. 73, art. 21, section 6.]

(4) [Deleted by P.L. 2007, ch. 73, art. 21, section 6.]

(5) [Deleted by P.L. 2007, ch. 73, art. 21, section 6.]

(c) Children placed by DCYF in a residential treatment program, group home, or other residential facility, whether or not located in the state of Rhode Island, which includes the delivery of educational services, provided by that facility (excluding facilities where students are taught on grounds for periods of time by teaching staff provided by the school district in which the facility is located), shall have the cost of their education paid for as provided for in subsection (d) of this section and section 16-64-1.2. The city or town determined to be responsible to DYCF for a per-pupil special education cost pursuant to section 16-64-1.2 shall pay its share of the cost of educational services to DCYF or to the facility providing educational services.

(d) Children placed by DCYF in group homes, child caring facilities, community residences, or other residential facilities shall have the entire cost of their education paid for by DCYF if:

(1) The facility is operated by the state of Rhode Island or the facility has a contract with DCYF to fund a pre-determined number of placements or part of the facility’s program;

(2) The facility is state-licensed; and

(3) The facility operates an approved on-grounds educational program, whether or not the child attends the on-grounds program.

(e) Provided, that for all school years commencing after June 30, 2010, any state funds provided to cities or towns pursuant to this section shall be tracked by the department of education and paid based on the actual number of students who are being educated in the city or town. If a student moves to another residence in another city or town during the school year, the moneys paid by the state to the city or town shall be prorated and disbursed in proportion to the number of days during the year that the student is being educated by the city or town. By way of clarification, it is the intention of the general assembly that the state moneys paid shall follow the residence of the child and be utilized for the education of such child, to the greatest extent reasonably possible.

16-64-1.2. Designation of residency of children in state care for purposes of financial responsibility under section 16-64-1.1(c) – Effect of designation of residence. – (a) An initial factual determination and designation of the residence of the parent(s) of a child placed in the care and custody of the state shall be made by the family court in accordance with section 33-15.1-2. The director of the department of children, youth, and families shall incorporate any designation of parent's residence on the child's intra-state education identification card and update the designation pursuant to section 42-72.4-1(b).

(b) If no factual determination and designation of the residence of the parent(s) of a child placed in the care and custody of the state is made by the family court pursuant to section 16-64-1.2(a), then the department of elementary and secondary education shall designate the city or town to be responsible for the per-pupil special education cost of education to be paid to DCYF or to the facility providing educational services for children in state care pursuant to section 16-64-1.1(c).

(c) The department of elementary and secondary education shall designate the city or town to be responsible for the per-pupil special education cost of education to be paid to DCYF for children in state care who have neither a father, mother, nor guardian living in the state or whose residence can be determined in the state or who have been surrendered for adoption or who have been freed for adoption by a court of competent jurisdiction using the following criteria: (1) last known Rhode Island residence of the child's father, mother, or guardian prior to moving from the state, dying, surrendering the child for adoption or having parental rights terminated; (2) when the child's parents are separated or divorced and neither parent resides in the state, the last known residence of the last parent known to have lived in the state. This designation by the department of elementary and secondary education shall be incorporated on the child's intra-state education identification card.

(d) The designation of a city or town pursuant to subsection (a), (b), or (c) of this section shall constitute prima facie evidence of parents' residence in the city or town and/or the city or town's financial responsibility for the child's education as provided in section 16-64-1.1, except as otherwise provided for in subsection (e) herein and in subsection 16-64-1.1(e). Pending any final decision under section 16-64-6 that a different city, town or agency bears any financial responsibility, the commissioner shall be authorized to order the general treasurer to deduct the amount owed from the designated community's school aid and to pay this amount to DCYF.

(e) Provided, that for all school years commencing after June 30, 2010, any state funds provided to cities or towns pursuant to this section shall be tracked by the department of education and paid based on the actual number of students who are being educated in the city or town. If a student moves to another residence in another city or town during the school year, the moneys paid by the state to the city or town shall be prorated and disbursed in proportion to the number of days during the year that the student is being educated by the city or town. By way of clarification, it is the intention of the general assembly that the state moneys paid shall follow the residence of the child and be utilized for the education of such child, to the greatest extent reasonably possible.

16-64-1.3. Educational responsibility for children in group homes and other residential placements. – (a) The city or town in which a foster home, group home, or other residential facility that does not include the delivery of educational services is located shall be responsible for the free appropriate public education of any child residing in those placements,

including all procedural safeguards, evaluation, and instruction in accordance with regulations under chapter 24 of this title, for any period during which a child is residing in the city or town. The city or town shall coordinate its efforts with any other city or town to which a child moves when exiting the city or town responsible under this subsection.

(b) The city or town responsible for payment under section 16-64-1.1(c) for payment of a city or town's per pupil special education cost to DCYF for a child placed in a residential facility, group home, or other residential facility that includes the delivery of educational services shall be responsible for the free, appropriate public education, including all procedural safeguards, evaluation and instruction in accordance with regulations under chapter 24 of this title.

(c) Provided, that for all school years commencing after June 30, 2010, any state funds provided to cities or towns pursuant to this section shall be tracked by the department of education and paid based on the actual number of students who are being educated in the city or town. If a student moves to another residence in another city or town during the school year, the moneys paid by the state to the city or town shall be prorated and disbursed in proportion to the number of days during the year that the student is being educated by the city or town. By way of clarification, it is the intention of the general assembly that the state moneys paid shall follow the residence of the child and be utilized for the education of such child, to the greatest extent reasonably possible..

16-64-2. Retention of residence. – A child shall be eligible to receive education from the city or town in which the child's residence has been established until his or her residence has been established in another city or town and that city or town has enrolled the child within its school system, unless the commissioner of elementary and secondary education, pursuant to section 16-64-6, has ordered otherwise. Nothing contained in this section shall be construed to prohibit a city or town in its own discretion from enrolling a child within its school system before a child has established technical residency within the city or town. The commissioner of elementary and secondary education shall promulgate any rules that may be needed to implement the educational provisions of the Stewart B. McKinney Homeless Assistance Act (P.L. 105-220), 42 U.S.C. section 11431 et seq. Provided further, that to the greatest extent reasonably possible, state moneys paid to the city or town pursuant to this chapter shall follow the residence of the child and be utilized for the education of such child.

SECTION 3. This act shall take effect upon passage.

MOTION: To find beneficial **10 H 7068 AN ACT RELATING TO EDUCATION – STATE REIMBURSEMENT** LG/JL passed LD, BI,PP, & RB abstained

12 **10 H 7074 AN ACT RELATING TO MILITARY AFFAIRS AND DEFENSE**

Rep. Carter House Finance Committee

This act would establish an Ocean State Youth ChalleNGe Academy for at-risk youth through a cooperative agreement between the Rhode Island national guard and the Rhode Island adjutant general. "At-risk youth" means a person who is at least sixteen (16) years old but less than twenty (20) years of age and who has "quit", been suspended or expelled from school, is habitually truant, or is otherwise habitually disruptive in school and/or is unemployed or underemployed. This act would take effect upon passage.

Reviewer's Comment:

The military is not known for sensitivity towards those with emotional problems – nor, I believe would they treat those, with special needs appropriately. Such youngsters could get caught up in the web of "at risk" youth. In fact, I don't see the "get tough" approach is helpful for any troubled kids.

Liberty Goodwin

Recommendation: ☐ beneficial ☐ beneficial if amended ☐ harmful unless amended ☑ harmful

SECTION 1. Title 30 of the General Laws entitled "Military Affairs and Defense" is hereby amended by adding thereto the following chapter:

CHAPTER 34

RHODE ISLAND NATIONAL GUARD

OCEAN STATE YOUTH CHALLENGE ACADEMY PROGRAM ACT

1-6 **30-34-1. Short Title. –** This chapter shall be known and may be cited as "The Rhode
1-7 Island National Guard Ocean State Youth ChalleNGe Academy Act".
1-8 **30-34-2. Definitions. –** As used in this chapter:
1-9 (a) "At-risk youth" means a person who is at least sixteen (16) years old but less than
1-10 twenty (20) years of age and who has "quit", been suspended or expelled from school, is
1-11 habitually truant, or is otherwise habitually disruptive in school and/or is unemployed or
1-12 underemployed.
1-13 (b) "GED" means a certificate that demonstrates that a person has passed a battery of
1-14 tests given at a testing center, authorized by the commissioner of education, that are designed to
1-15 measure the major outcomes and concepts generally associated with four (4) years of high school
1-16 education.
1-17 (c) "Program" means the Ocean State Youth ChalleNGe Academy Program.
1-18 **30-34-3. Authorization. –** The office of adjutant general is hereby authorized to operate
1-19 a Youth ChalleNGe Academy program through the use of National Guard facilities and
2-1 equipment for the purpose of providing at-risk youth with a program to help them obtain a GED,
2-2 and/or high school diploma, increase their employment potential, and enhance their education and
2-3 life skills.
2-4 The office of the adjutant general is herby authorized to establish forty-seven (47) state
2-5 positions to support the new program. The Ocean State Youth ChalleNGe Academy employees
2-6 will be hired in accordance with the program start-up timeline established by the national guard
2-7 bureau.
2-8 **30-34-4. Costs. –** The state of Rhode Island intends to enter into a cooperative agreement
2-9 to establish the Ocean State Youth ChalleNGe Academy; provided, the cooperative agreement
2-10 specifies that the national guard bureau will provide a seventy-five percent/twenty-five percent
2-11 (75%/25%) federal/state matching fund requirement. The state match will not exceed twenty-five
2-12 percent (25%).
2-13 **30-34-5. Criteria and conditions of program. –** The program shall comply with the
2-14 criteria and conditions specified in a cooperative agreement entered into between the chief of the
2-15 national guard bureau and the adjutant general of the state of Rhode Island.
2-16 **30-34-6. Program Management and Resource Utilization. –**
2-17 (a) The adjutant general shall appoint, in writing, a program manager for the Ocean State
2-18 Youth ChalleNGe Academy.
2-19 (b) The program manager is directed and authorized to apply for federal monies that may
2-20 be available to the state for the implementation and operation of the program.
2-21 (c) The adjutant general of the state of Rhode Island is authorized to accept, on behalf of
2-22 the state, any gifts, grants, or donations from any private or public source for the purpose of
2-23 implementing this chapter unless the gift, grant, or donation is subject to conditions that are
2-24 inconsistent with this chapter or any other law of the state.
2-25 (d) The adjutant general is directed to establish a restricted receipt account to facilitate
2-26 the state's financial management of this program.
2-27 (e) All private and public monies received through gifts, grants, or donations shall be
2-28 transmitted to the general treasurer, who shall credit the same amount received to the Ocean State
2-29 Youth ChalleNGE Academy program restricted receipt account.
2-30 (f) The funds credited to this account are to be utilized for the sole purpose of resourcing
2-31 direct and indirect costs associated with the implementation and administration of this program
2-32 without regard to state or federal fiscal year limitations.
2-33 (g) All investment earnings derived from the deposit and investment of monies in the
2-34 fund shall be credited to the program's restricted receipt account.
3-1 (h) Any funds not expended by the end of the state fiscal year, in any given year, shall
3-2 remain in the account and shall not be transferred or revert to the general fund at the end of any
3-3 fiscal year.
3-4 (i) The Rhode Island national guard may receive federal funding to implement, conduct
3-5 and administer this program. The adjutant general and the United States property and fiscal
3-6 officer for Rhode Island will ensure that the expenditure of any funds received comply with
3-7 appropriate federal laws, regulations and policies. In the event that the Rhode Island national

3-8 guard does not receive federal funds in any given federal fiscal year, the Rhode Island national
3-9 guard is not authorized to conduct this program.
3-10 SECTION 2. This act shall take effect upon passage.

MOTION: To find harmful 10 H 7074 **An Act Relating to Military Affairs and Defense** LG/died for lack of a second

MOTION To find it beneficial if amended to include a diagnostic assessment 10 H 7074 **An Act Relating to Military Affairs and Defense** TF/GS Aye (4) TF, JL, GS, & TT; Nay (4) LG, JB, BI, & SB; motion failed on a tie vote; abstained LW(Chair), RB, LD, PP, SES, & GR.

MOTION: To tabled 10 H 7074 **An Act Relating to Military Affairs and Defense** for information from the National Guard TF/JB passed, LG abstained

13 **10 H 7123 AN ACT RELATING TO EDUCATION–THE EDUCATION ADEQUACY ACT**
Rep. Corvese House Finance Committee

This act would establish a permanent education foundation aid formula for calculating state aid to public education. It would also expand the statewide purchasing system to include purchasing programs developed by any state agency, regional educational collaborative, or consortia of public school districts, and may be structured to allow participation by both public and private institutions of higher education, private elementary or secondary school systems, or public or private day care providers.

The permanent foundation aid program will provide direct state funding for excess costs associated when an individual special education student shall be deemed to be "extraordinary." Excess costs are defined as exceeding five (5) times the current fiscal year's statewide per pupil foundation amount. This act would take effect upon passage.

Reviewer's Comment:

Expanding statewide purchasing systems could be a good way to save the money needed to provide more funding for special education.

Liberty Goodwin

Recommendation: ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful ☐ no position

1-1 SECTION 1. Sections 16-2-9.3 and 16-2-9.4 of the General Laws in Chapter 16-2
1-2 entitled "School Committees and Superintendents" are hereby amended to read as follows:
1-3 **16-2-9.3. The advisory council on school finances. –** (a) The legislature hereby finds
1-4 and declares that there is a need for an advisory council on school finances to strengthen the fiscal
1-5 accountability of school districts, regional school districts, state schools and charter schools in
1-6 Rhode Island. The council shall be composed of five (5) members as follows:
1-7 (1) The auditor general of the state of Rhode Island or his or her designee;
1-8 (2) The executive director of the Rhode Island association of school committees or his or
1-9 her designee;
1-10 (3) The president of the Rhode Island association of school business officials or his or
1-11 her designee;
1-12 (4) The commissioner of elementary and secondary education or his or her designee; and
1-13 (5) The director of the department of administration or his or her designee. The auditor
1-14 general or his or her designee shall serve as chair of the council. By July 1, 2005, the council shall
1-15 develop recommendations for a uniform system of accounting, including a chart of accounts for
1-16 all school districts, regional school districts, state schools and charter schools. By July 1, 2009 the
1-17 council shall develop recommendations for a uniform system of accounting, that may include a
1-18 uniform chart of accounts, for all educational regional collaboratives identified in section 16-3.1.
1-19 Said recommendations shall be advisory in nature and may be adopted by the office of auditor
2-1 general and the department of elementary and secondary education in part or in whole.
2-2 (b) The council shall meet no less than annually and recommend changes in accounting
2-3 procedures to be adopted by school districts, regional school districts, state schools and charter

schools as well as apprise school business officials, charter school officials, school committees and school superintendents, school administrators and state school officials about professional development opportunities that promotes sound fiscal practices and a knowledge of current state and federal rules and regulations regarding school finance. The council shall also report, annually, its activities and recommendations to the house committee on education accountability, the senate committee on education and the office of the governor.

16-2-9.4. School district accounting compliance. – (a) The office of auditor general and the department of elementary and secondary education shall promulgate a uniform system of accounting, including a chart of accounts based on the recommendations of the advisory council on school finance, and require all accounts of the school districts, regional school districts, state schools, ~~and~~ charter schools, and regional collaboratives to be kept in accordance therewith; provided, that in any case in which the uniform system of accounting is not practicable, the office of auditor general in conjunction with the department of elementary and secondary education shall determine the manner in which the accounts shall be kept.

(b) For the purpose of securing a uniform system of accounting and a chart of accounts the advisory council on school finances, as defined in section 16-2-9.2 may make such surveys of the operation of any school districts, regional school district, state school or charter school as they shall deem necessary.

(c) If any school district, regional school district, state school, regional collaborative or charter school fails to install and maintain the uniform system of accounting, including a chart of accounts, or fails to keep its accounts and interdepartmental records, or refuses or neglects to make the reports and to furnish the information in accordance with the method prescribed by the office of auditor general and the department of education or hinders or prevents the examination of accounts and financial records, the auditor general and the commissioner of education may make a report to the board of regents for elementary and secondary education in writing, specifying the nature and extent of the failure, refusal, neglect, hindrance, or prevention, and the board of regents is hereby authorized and directed to review the matter so reported. If the regents shall find that failure, refusal, neglect, hindrance, or prevention exists and that the school district, regional school district, state school, regional collaborative or charter school should properly comply in the matter so reported, the regents shall direct the school district, regional school district, state school, regional collaborative or charter school, in writing, to so comply. If the failure, refusal, neglect, hindrance, or prevention shall continue for a period of ten (10) days following the written direction, the regents may withhold distribution of state aid to said school district, regional school district, state school, regional collaborative or charter school.

SECTION 2. Section 16-5-34 of the General Laws in Chapter 16-5 entitled "State Aid" is hereby amended to read as follows:

16-5-34. Statewide purchasing system. – The department of elementary and secondary education, pursuant to the collaborative established in Rhode Island General Laws section 6-2-9.2 along with the department of administration, shall develop a plan for the establishment, facilitation and/or implementation of a statewide purchasing system for all public schools in this state. For the purposes of this chapter, the statewide purchasing system may include purchasing programs developed by any state agency, regional educational collaborative, or consortia of public school districts, and may be structured to allow participation by both public and private institutions of higher education, private elementary or secondary school systems, or public or private day care providers. Said statewide purchasing system shall develop requests for proposals relating to goods and services to enhance and support the mission of public schools and public education in general throughout this state, including, but not limited to, the purchase of the following goods, supplies, and services:

(a) General school supplies such as paper goods, office supplies, and cleaning products that are or may be utilized by school departments;

(b) Textbooks, telecommunications, wireless services, and software that have been identified by local school departments as needed to support local curriculum objectives;

(c) A statewide school transportation system for children with special needs. Local school departments shall be eligible to participate in this system by purchasing transportation services on a fee-for-service basis. It is stated herein that the goals and intent of establishing this

state-wide transportation system for children with special needs shall be as follows:

(1) To reduce the duplication of bus routes;

(2) To improve services to children through the development of shorter, more efficient routes that minimize the amount of time spent by the student traveling on school transportation to and from school and school-related/sponsored activities; and

(3) To reduce transportation costs to local educational authorities through greater efficiency and cost-effective measures.

(d) General non-medical and dental insurance products and services, provided however, that the statewide purchasing system shall permit districts to establish their own benefit and coverage levels.

(e) Administrative functions, such as personnel, payroll services, accounting and data information services, student services, technology implementation, where and when possible.

(f) Insurance services such as property and casualty, workers' compensation and general liability insurance.

(g) Participation in any statewide purchasing system shall be compulsory, unless a district can demonstrate that such participation would increase the existing cost of any goods and/or services that the district is currently utilizing or contracted for. Exemptions to participation in any statewide purchasing system shall be at the discretion of the Rhode Island strategic purchasing advisory commission.

~~(e)~~ (h) The department of elementary and secondary education, in collaboration with the department of administration, shall also develop policies and procedures to reduce the cost of health care insurance to local school departments by developing a collaborative process which shall include local educational authorities and representatives of local educational unions in discussions of cost saving efficiencies that could be achieved by including these employees in a state health insurance contract.

SECTION 3. Section 37-2-79 of the General Laws in Chapter 37-2 entitled "State Purchases" is hereby amended to read as follows:

37-2-79. Establishment of the Rhode Island Strategic Purchasing Advisory Commission. – In order to provide a means of collaboration between the state, cities/towns and school committees a permanent advisory commission is established named the "Rhode Island Strategic Purchasing Advisory Commission." This Advisory Commission will consist of nine (9) members including: (1) the state purchasing agent or his or her designee, who will serve as chair, (2) a designee of the board of regents of the Rhode Island department of elementary and secondary education, (3) a designee of the board of governors of higher education, (4) a designee of the Rhode Island School Committees Association, (5) a designee of the Rhode Island League of Cities and Towns, (6) a designee of the Association of School Business Officials, (7) a designee of the Rhode Island Municipal Purchasing Agents Association, (8) a designee of the Rhode Island economic development corporation and, (9) a designee of the state budget officer. The advisory commission may exempt a school district or group of districts from compulsory participation in any statewide purchasing plan, if the district or group of districts can substantiate that participation in such statewide purchasing plan would increase the cost to the district. The advisory commission shall provide technical assistance to the Rhode Island department of administration, the Rhode Island department of elementary and secondary education, any regional educational collaborative, or school district consortia in implementing the mandates of section 16-5-34. The advisory commission shall meet no less than four (4) times annually.

SECTION 4. Sections 16-7.1-1 and 16-7.1-2 of the General Laws in Chapter 16-7.1 entitled "The Paul W. Crowley Rhode Island Student Investment Initiative" are hereby amended to read as follows:

16-7.1-1. Legislative findings. – (a) Legislative intent. – (1) The intent of this legislation is to enact a comprehensive state education aid funding program which addresses four (4) fundamental principles:

(i) Closing the inequitable resource gaps among school districts and schools;

(ii) Closing inequitable gaps in performance and achievement among different groups of students, especially those correlated with poverty, gender, special needs, and language background;

(iii) Targeting investments to improve student and school performance; and

(iv) Establishing a predictable method of distributing state education aid in a manner that addresses the over-reliance on the property tax to finance education.

(2) This legislation is further designed to accelerate the implementation of the State Comprehensive Education Strategy. The strategy is an action plan for ensuring that all children achieve at high levels and become lifelong learners, productive workers, and responsible citizens. The standard for expected student achievement is currently being set at a high level both by the board of regents and in Rhode Island's districts and schools. High standards must be supported and these expectations must now be reached by all our students. All the state's children must enjoy the success that comes with proficiency in skill and knowledge.

(b) Evaluation of success. – Improved student and school performance is the key measure of the success of Rhode Island's schools. This success cannot occur without investment based on the four (4) fundamental principles as stated in subsection (a) of this section. The success of these investments shall be evaluated based on: accountability for student and school performance; accountability in terms of whether the state's investment is sufficiently adequate and equitable to support improvement in performance; and on accountability for district and school expenditures.

16-7.1-2. Accountability for student performance. – (a) The board of regents shall adopt and publish statewide standards of performance and performance benchmarks in core subject areas to include writing and mathematics (grades four (4), eight (8), and ten (10)). These standards and performance benchmarks shall be ratified by the board and implemented, and performance standards and performance benchmarks for reading in two (2) grades shall be added.

(b) Districts and schools need to be held accountable for student performance results. Therefore, every school district receiving state education aid under this title shall develop a district strategic plan. The district strategic plan shall: (1) be based on high academic standards for student performance consistent with the statewide standards and benchmarks; (2) be the product of a shared community wide process which defines a vision of what students should know and be able to do; (3) address the needs of each school in the district; (4) encourage the development of school-based improvement planning and implementation; (5) include a process for mentoring of new teachers; (6) be designed to improve student achievement with emphasis on closing the performance gaps among groups of students such as the performance gaps correlated with poverty, gender, language background, and disability; (7) include establishment of student intervention teams to address the instructional needs of diverse learners, include high standards of student behavior designed to create an orderly educational environment with due regard for the rights of students, and an asset protection plan; and (8) be consistent with Rhode Island's comprehensive education strategy. In order to assure the most efficient use of resources implementing strategic plans, and to create economies of scale, districts and schools are encouraged to work together as consortia and as part of the regional collaboratives.

(c) (1) The strategic plan shall include strategies to improve the performance of students in mathematics, reading, and writing. Each plan must describe a scientific research based, as described in the No Child Left Behind Act of 2001, Title 1, Part B, Section 1208 [20 U.S.C. section 6368] reading instruction to improve the reading skills of all students in the early grades (kindergarten through grade five (5)) that is aligned with the board of regents reading policy. The district must develop, implement and evaluate a Personal Literacy Program for each student in these grades who is performing below grade level. These strategies shall be based on the adequate yearly progress expected for students and schools. Annual performance targets for determining whether schools and districts have made adequate yearly progress will be set by the commissioner of elementary and secondary education. The general assembly expects these district strategies to increase the number of fourth grade students performing at or above the proficient standard in mathematics, reading, and writing in each district and school. The increase shall be established annually in accordance with section 16-7.1-4.

(2) The general assembly recognizes the contribution of school counselors to positive educational change, to the implementation of the No Child Left Behind Act of 2001, and to the success of students in three (3) developmental domains: academic, career, and personal/social. It endorses the National Standards for School Counseling Programs as developed by the American

School Counselor Association (ASCA). Further, the general assembly encourages every district to implement a K-12 standards-based comprehensive, developmental school counseling program.

(d) Each strategic plan must indicate the manner in which self-studies will be completed at the school level in accordance with guidelines established by the commissioner. Funds shall be appropriated to the department of elementary and secondary education to assist districts with on-site reviews. Schools to be visited shall be determined by the commissioner.

(e) Each strategic plan must indicate the method in which school administrators and staff shall achieve and maintain an orderly educational environment in accordance with due process and with due regard for the rights of students.

(f) Each strategic plan shall include the development of inter-agency agreements for the coordination of services among state and local agencies responsible for service to children and families. These agreements shall address the identification and provision of services to pre-school children with disabilities and children and youth with behavioral health care needs.

(g) All district strategic plans and annual updates shall be submitted to the commissioner of elementary and secondary education no later than May 1, of each year.

(h) All strategic plans shall include strategies to decrease obesity and improve the health and wellness of students and employees through nutrition, physical activity, health education, and physical education. Said strategies shall be submitted by May 1st of each year to the Rhode Island department of elementary and secondary education and the Rhode Island department of health.

SECTION 5. Section 16-7.2-1 of the General Laws in Chapter 16-7.2 entitled "The Education Equity and Property Tax Relief Act" is hereby amended to read as follows:

16-7.2-1. Legislative findings. – (a) The general assembly recognizes the need for an equitable distribution of resources among the state's school districts, property tax relief and a predicable method of distributing education aid. The general assembly finds that there is a need to reform the way public education is financed because:

(1) All children should have access to an adequate and meaningful education regardless of their residence or economic means;

(2) A school funding system should treat property taxpayers ~~equably~~ equitably, limit the portion of school budgets financed by property taxes, ~~and~~ establish sufficient cost controls on school spending, and promote efficiency in the use and distribution of limited resources;

(3) The state should ensure that its school funding structure adequately reflects the different needs of students, and closes the educational inequities among the state's school districts; ~~and~~

(4) The state education funding system should provide a predicable amount and source of funding to ensure stability in the funding of schools~~.~~; and

(5) The state education funding system must be anchored in systems of fiscal and programmatic accountability that measure whether state and local programs and expenditures actually provide the opportunity for a sound basic education in a manner consistent with Rhode Island law.

(b) The intent of this chapter is to promote a school finance system in Rhode Island that is predicated on student need and property taxpayer ability to pay. A new school funding system in the state should promote educational equity for all students and reduce the reliance on the property tax to fund public education. This legislation is intended to ensure educational opportunity to each pupil in each city or town on substantially equal terms. Adequate per pupil support will be provided through a combination of state school aid and local education property tax levies. The successful implementation of this comprehensive funding system will require the full implementation of the uniform system of accounting established by section 16-2-9.4, as well as incorporation of fiscal oversight into the state system of accountability as set forth in chapter 16-7.1. Funding shall be allocated on a annual basis to the department of elementary and secondary education for the purpose of implementing an accountability framework designed to ensure fiscal efficiency and program effectiveness.

SECTION 6. Section 16-7.2-2 of the General Laws in Chapter 16-7.2 entitled "The Education Equity and Property Tax Relief Act" is hereby repealed.

~~**16-7.2-2. Joint legislative committee to establish a permanent education foundation aid formula for Rhode Island.** – (a) There is hereby established a joint legislative committee to~~

~~develop a basic foundation support program and an appropriate transition plan to fully implement a new funding system.~~

~~The committee shall consist of ten (10) members, five (5) of which shall be appointed by the speaker of the house, one (1) of which shall be from the minority party, and five (5) members appointed by the president of the senate, one (1) of which shall be from the minority party. The speaker of the house and president of the senate shall each appoint a committee co-chair.~~

~~The joint legislative committee is directed to consider the following framework in developing a new education foundation support program:~~

~~(1) A state education funding formula that is student population and needs driven. Student counts should include enrollments, students eligible for free and reduced lunch, those participating in language assistance programs, and special education. Provisions should be made for those school districts that experience declining enrollments.~~

~~(2) The accounting for "extraordinary special education expenditures" in special education spending for one child in a given fiscal year.~~

~~(3) A per pupil foundation amount to be used in the calculation of school funding. The per pupil foundation amount should be based on what the cost is to provide an equitable and adequate education, and consider various cost factors, such as pupil-teacher ratios, teacher and staff compensation, technology investments, educational supplies, teacher training and professional development, student performance assessments, curriculum offerings and support services and other costs associated with the delivery of educational services.~~

~~(4) Per pupil cost, based on a least cost option plan to provide purchase of service contracts in areas such as equipment, repair, benefits, transportation, general purchasing, capital construction, data processing and health and other insurance programs. In addition, the department of education should assist regional collaboratives in identifying opportunities to maximize multiple school district participation for "high cost" programs.~~

~~(5) Various methods of funding the system.~~

~~(6) A transition education funding plan.~~

~~(b) The speaker of the house and president of the senate, in consultation with the committee co-chairs, are hereby directed to appoint a foundation aid technical advisory group, and a property tax relief technical advisory group.~~

~~(c) The foundation aid technical advisory group shall advise and assist the committee in recommending foundation aid amounts by:~~

~~(1) Identifying specific resources and least cost options to provide every child the opportunity to necessary educational opportunities to meet education performance standards; and~~

~~(2) Systematically calculating the amount of per pupil funding necessary to support an effective and efficient educational system. The group may create task forces to consider the needs of special populations, comprehensive education programs, and noneducational support activities, composed of experts in these areas. In developing a foundation aid amount, the group shall consider, among other factors, pupil-teacher ratios, compensation, collective bargaining practices, technology investments, educational supplies, teacher training and professional development, student performance assessments, curriculum offerings and support services and all other costs and needs associated with the delivery of educational services.~~

~~(d) The property tax relief technical advisory group shall advise and assist the committee in identifying the options and the impact of replacing existing local education property tax levies that support the funding of elementary and secondary education with other resources.~~

~~(e) The joint committee shall issue a report outlining its findings and recommendations no later than May 15, 2007.~~

~~All state agencies and departments shall be directed to cooperate with and provide all necessary information to the joint legislative committee.~~

SECTION 7. Chapter 16-7 of the General Laws entitled "Foundation Level School Support" is hereby amended by adding thereto the following sections:

16-7-20.8. Permanent education foundation aid formula established. – (a) Beginning in the first fiscal year following the 2010 fiscal year, in which the revenue and caseload estimating conference publishes findings that estimate an increase in general revenues for two (2) consecutive annual fall reports, the following foundation education aid formula shall take effect.

The foundation education aid for each district shall consist of three (3) components:

(1) An amount equal to the total dollar amount received by each district, in the fiscal year two (2) years prior to the revenue and caseload estimating conference, estimates of an increase in general revenues, and pursuant to sections 16-7.1-8, 16-7.1-9, 16-7.1-10, 16-7.1-11, 16-7.1-11.1, 16-7.1-12, 16-7.1-15, 16-7.1-16, 16-7.1-19, and 16-64-1.1.

(2) An amount equal to the statewide per pupil core instruction amount for the reference year as defined in 16-7-16 multiplied by the district resident average daily membership as defined in 16-7-22 multiplied by the district state share calculated pursuant to 16-7-20.9; and

(3) An amount in support of high need students based on the correlation between poverty and concentrations of such students. These funds shall be determined on a per pupil basis by the percentage of each district's resident children in grades pre-kindergarten through six eligible for USDA reimbursable meals relative to the total number of pre-kindergarten through grade six students as follows: Four thousand dollars ($4,000) for districts over seventy percent (70%); Three thousand dollars ($3,000) for districts between forty percent (40%) and seventy percent (70%); Two thousand dollars ($2,000) for districts between twenty percent (20%) and forty percent (40%); One thousand dollars ($1,000) for districts between ten percent (10%) and twenty percent (20%); and Five hundred dollars ($500) for districts ten percent and below. Total aid provided pursuant to this subsection is per pupil amount times the district resident average daily membership as determined pursuant to the provisions of section 16-7-22.

(b) The statewide per pupil core instruction amount shall be adjusted on an annual basis by the CPI-U, All Urban Consumers, for the northeast region when applying such index to the amount used for aid calculations in the preceding fiscal year results in a higher per pupil than actual. The per pupil amounts for the poverty concentration calculation contained in subsection (a) above shall be adjusted on an annual basis by the CPI-U, All Urban Consumers for the northeast region.

(c) The board of regents for elementary and secondary education shall annually determine the appropriation of education aid pursuant to this section based on a ratable reduction of the fully funded foundation aid calculated pursuant to subdivisions (a)(2) and (a)(3) of this section.

16-7-20.9. Determination of state's share. – For each district the state's share of the per pupil core instruction foundation amount shall be calculated by taking 1.0 minus fifty percent (50%) times one-half (1/2) of the district full value per pupil divided by the statewide full value per pupil plus one-half (1/2) of the district median family income divided by the statewide median family income as follows:

R = the calculated share ratio, as calculated via the following formula:

$R = 1.0 – 0.5((0.5 \times v/m / V/M) + 0.5 (i/I))$

v = full assessed valuation for the community as defined in subsection 16-7-21(1) and 16-7-21(2)

V = sum of all values of v for all communities

m = average daily membership of pupils in the community as defined in section 16-7-22

M = total average daily membership of the state

I = median family income of the community as determined by the American Community Survey (ACS) or the US Census, whichever is most current

I = median family income of the state as determined by the American Community Survey (ACS) or the US census, whichever is most current.

In no case shall R be less than twenty-five percent (25%); provided, however, that during the implementation period no district shall receive in any given fiscal year an increase greater than fifteen percent (15%) of the prior year's aid. In addition, no district shall receive an increase in aid in any given year if current aid for that district is greater than the total formula aid calculated pursuant to subdivisions 16-7-20.8(a)(2) and 17-7-20.8(a)(3).

16-7-20.10. State funded expenses. – In addition to the foundation aid provided pursuant to sections 16-7-20.8 and 16-7-20.9 the permanent foundation aid program will provide direct state funding for excess costs associated when an individual special education student shall be deemed to be "extraordinary." Excess costs are defined as exceeding five (5) times the current fiscal year's statewide per pupil foundation amount as determined pursuant to section 16-7-20.8 of this chapter.

11-28 **16-7-20.11. Formula adjustment. –** Annually, upon the effective date of the formula as
11-29 defined in section 16-7-20.8, the fiscal budget funding for the foundation aid program, including
11-30 increases in aid to districts and state assumption of costs, shall increase at an overall rate of not
11-31 less than three percent (3%), but not greater than six percent (6%) over the prior fiscal year, as
11-32 determined by the general assembly and subject to availability of funds.
11-33 SECTION 8. This act shall take effect upon passage.

MOTION: To find beneficial 10 H 7123 **An Act Relating To Education–The Education Adequacy Act** LG/died for lack of a second

14 **10 H 7208 AN ACT RELATING TO EDUCATION – ESTABLISHMENT OF CHARTER PUBLIC SCHOOLS** Gablinske House Health, Education, & Welfare Scheduled for hearing and/or consideration This act would remove the limit of 20 charter schools and require at least one half of the total number of charter public schools in the state to be reserved for charter school applications that are designed to increase the educational opportunities for at-risk pupils. This act would take effect upon passage.

Reviewer's Comment:

Removing the limit of 20 charter schools could be beneficial. However, an artificial requirement to reserve 50 per cent of them for "at-risk" pupils is too restrictive. The definition of "at risk" could also be problematic – and branding children with labels is, I believe, counterproductive. Should be amended to remove the 50 per cent requirement.

Liberty Goodwin

Recommendation: ☐ beneficial ☑ beneficial if amended ☐ harmful unless amended ☐ harmful ☐ no position

1-1 SECTION 1. Section 16-77-8 of the General Laws in Chapter 16-77 entitled
1-2 "Establishment of Charter Public Schools" is hereby amended to read as follows:
1-3 **16-77-8. Oversight by commissioner. –** (a) Individuals or groups may complain to a
1-4 charter school's governing body concerning any claimed violation of the provisions of this
1-5 chapter by the school. If, after presenting their complaint to the governing body, the individuals
1-6 or groups believe their complaint has not been adequately addressed, they may submit their
1-7 complaint to the commissioner of elementary and secondary education who shall hear and decide
1-8 the issue pursuant to sections 16-39-1 and 16-39-2.
1-9 (b) Charter school approval for establishment or continuation shall be for up to a five (5)
1-10 year period. In either case, board of regents approval is required. However, the charter may be
1-11 revoked at any time if the school:
1-12 (1) Materially violates provisions contained in the charter;
1-13 (2) Fails to meet or pursue the educational objectives contained in the charter;
1-14 (3) Fails to comply with fiscal accountability procedures as specified in the charter; or
1-15 (4) Violates provisions of law that have not been granted variance by the board of
1-16 regents.
1-17 (c) After denying or prior to nonrenewing or revoking a charter, the department of
1-18 elementary and secondary education will hold a hearing on the issues in controversy under
1-19 section 16-39-1.
2-1 (d) ~~No more than twenty (20) charters, serving no more than four percent (4%) of the~~
2-2 ~~state's school age population, shall be granted.~~ At least ~~ten (10)~~ one-half of the ~~twenty (20) total~~
2-3 ~~charters~~ total number of charter public schools in the state shall be reserved for charter school
2-4 applications which are designed to increase the educational opportunities for at-risk pupils.
2-5 SECTION 2. This act shall take effect upon passage.

MOTION: To find beneficial if amend to remove the 50% "at risk youth"cap **10 H 7208 An Act Relating To Education – Establishment of Charter Public Schools** LG/died for lack of a second.

MOTION: The Committee will only consider education bills that have a direct and substancial link to children with disabilities. BI/GS, did not pass: Aye(4) BI, GR, GS,

& SB, Nay (6) TT, RB, SES, JB, LG & TF; abstained PP, & LD

15 **10 S 2015 AN ACT RELATING TO EDUCATION** Sen. Maselli Senate Finance Committee

This act would allow school districts that participate in the Northern Rhode Island Education Collaborative and do not have its own vocational technical program to send students to William E. Davies Vocational High School. This act would take effect upon passage.

Reviewer's Comment:

I believe some students with disabilities would benefit from access to vocational technical programs.

Liberty Goodwin

Recommendation: ☑ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful ☐ no position

SECTION 1. Chapter 16-3 of the General Laws entitled "Establishment of Regional School Districts" is hereby amended by adding thereto the following section:

16-3-7.3. Transfer of Northern Rhode Island Educational Collaborative School Districts. – Any school district that participates in the Northern Rhode Island Educational Collaborative, with the exception of communities that currently have their own vocational technical programs, shall be eligible to send its students to William E. Davies Vocational High School. Enrollment shall be limited to no more than five tenths of one percent (.5%) in excess of the 2008-2009 vocational technical program enrollment as a percentage of the high school enrollment for the respective school district. No enrollment date shall be before July 1, 2011.

SECTION 2. This act shall take effect upon passage.

MOTION: To find beneficial **10 S 2015 An Act Relating To Education** LG/ died for lack of a second.

MOTION To tabled **10 S 2015 An Act Relating To Education** for more information from RI Department of Elementary & Secondary Education GR/JP passed, Nay BI, SB

16 **10 H 7178 AN ACT RELATING TO EDUCATION - - MANDATES** Rep. DaSilva House Finance Committee

This act would require that educational mandates be fully funded or else unenforceable. No rule, regulation or policy adopted by state departments, agencies or quasi-state departments or agencies which requires any new expenditure of money or increased expenditure of money by a city or town shall take effect unless full and adequate funding, as determined by public hearing, is included as a portion of the language of the mandate document. This act would take effect upon passage.

17 **10 H 7236 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT – MANDATE RELIEF PROGRAM ACT** Rep. Serpa House Finance Committee

This act would relieve the Towns of Coventry and West Warwick and the City of Warwick from unfunded state mandates for a period of five (5) years. This act would take effect upon passage.

18 **10 H 7372 AN ACT RELATING TO EDUCATION – SCHOOL COMMITTEES AND SUPERINTENDENTS** Rep. Segal House Finance Committee

This act would provide that no new state mandate would be issued without adequate funding by and from the state. This act would take effect upon passage.

19 **10 S 2006 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT – THE 2010 TOWN OF COVENTRY MANDATE RELIEF PROGRAM ACT** Sen. Blais Senate Finance Committee

This act would relieve the Town of Coventry from unfunded state mandates for a period of four years. This act would take effect upon passage.

20 **10 S 2024 SENATE RESOLUTION SUPPORTING A MORATORIUM ON ALL UNFUNDED MANDATES** Sen. Raptakis Senate Constitutional and Regulatory Issues Committee

RESOLVED, That this Senate of the State of Rhode Island and Providence Plantations hereby supports a moratorium on all unfunded mandates and further requests that the Town of Coventry be granted the right to work toward meeting state mandates through whatever local policy currently exists or may be established at the local level.

21	**10 H 7336 & S 2197 ACTS RELATING TO STATE AFFAIRS AND GOVERNMENT – MANDATE RELIEF** Rep. Azzinaro, House Finance Committee and Sen. Algiere Senate Finance Committee This act would relieve the Town of Westerly from unfunded state mandates. This act would take effect upon passage.
	Reviewers' Comments: These bills with blanket bans of "unfunded mandates" could kill all sorts of important and needed programs and actions. Liberty Goodwin Recommendation: ☐ beneficial ☐ beneficial if amended ☐ harmful unless amended ☑ harmful ☐ no position

10 H 7178 AN ACT RELATING TO EDUCATION - - MANDATES

SECTION 1. Title 16 of the General Laws entitled "EDUCATION" is hereby amended by adding thereto the following chapter:

CHAPTER 91

STATE EDUCATIONAL MANDATES

16-91-1. Mandate defined. – For the purpose of this chapter, "an educational mandate" shall mean any requirement or dictate enacted by the general assembly or promulgated by a regulator of a state agency addressed to any school district.

16-91-2. Future mandates. – (a) No educational mandate shall be enacted or promulgated after the effective date of this chapter, unless the body enacting or promulgating the same shall first, after public hearing, determine the cost of the proposed mandate to each of the school districts of the state. No rule, regulation or policy adopted by state departments, agencies or quasi-state departments or agencies which requires any new expenditure of money or increased expenditure of money by a city or town shall take effect unless full and adequate funding, as determined by public hearing, is included as a portion of the language of the mandate document.

(b) The lack of full and adequate funding as a provision of an educational mandate shall be an absolute defense against any legal action filed by any party for the purpose of enforcing the provisions of the mandate.

SECTION 2. This act shall take effect upon passage.

10 H 7236 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT – MANDATE RELIEF PROGRAM ACT

SECTION 1. Effective upon the passage of this act and until December 31, 2014, the Towns of Coventry and West Warwick and the City of Warwick are relieved from the operation of any statute or regulation imposing upon any department or instrumentality of said Towns of Coventry and West Warwick and said City of Warwick any requirements or mandated action the full cost of which is not also paid by the state.

SECTION 2. Upon the implementation of any program change permitted under section 1 hereof, the chairpersons of the Coventry, West Warwick and Warwick school committees shall provide to the department of education, and the departments of administration of the Towns of Coventry and West Warwick and City of Warwick shall provide to the office of municipal affairs (administration/planning), certification that any such program changes have no adverse effect on public health or safety.

SECTION 3. This act shall take effect upon passage.

10 H 7372 AN ACT RELATING TO EDUCATION – SCHOOL COMMITTEES AND SUPERINTENDENTS

SECTION 1. Section 16-2-11 of the General Laws in Chapter 16-2 entitled "School Committees and Superintendents" is hereby amended to read as follows:

16-2-11. General powers and duties of superintendent. – (a) The superintendent of schools employed in accordance with the provisions of this chapter shall, under the direction of the school committee, have the care and supervision of the public schools and shall be the chief administrative agent of the school committee. The superintendent shall have any duties as are defined in this section and in this title and any other duties as may be determined by the school

committee, and shall perform any other duties as may be vested in him or her by law. In addition to the care and supervision of public schools and the appointment of employees of the district, it shall be the duty of the superintendent:

(1) To implement policies established by the school committee.

(2) To recommend educational plans, policies, and programs to meet the needs of the district.

(3) To recommend policies governing curriculum, courses of instruction, textbooks, and transportation of students.

(4) To comply with provisions of federal and state law and local charter provisions and ordinances.

(5) To have administrative responsibility for the school system.

(6) To oversee the care, control, and management of school facilities and equipment.

(7) To appoint all school department personnel with the consent of the school committee.

(8) To administer the personnel function of the school department consistent with personnel standards, policies, and the table of organization established by the school committee.

(9) To provide for the evaluation of department personnel.

(10) To prepare a school budget for consideration by the school committee.

(11) To authorize purchases consistent with the adopted school budget, policies and directives of the school committee, and applicable municipal policies, ordinances, and charter provisions.

(12) To be responsible for keeping the records of the school system.

(13) To report to the school committee on a regular basis the financial condition of the school system.

(14) To be responsible for discipline in the school system.

(15) To evaluate all schools within the school system and to report to the school committee the conformity with regulations of the board of regents and the policies, programs, and directives of the school committee.

(16) To report to the school committee on the operation of the school system, including an annual report on the district's progress.

(b) Nothing in this section shall be deemed to limit or interfere with the rights of teachers and other school employees to collectively bargain pursuant to chapters 9.3 and 9.4 of title 28, or to allow any school superintendent to abrogate any agreement reached by collective bargaining.

(c) If at any time during the fiscal year the superintendent of schools determines, or is notified by the city or town chief charter officer or treasurer, that the estimated school expenses may exceed all revenue appropriated by the state or city or town or otherwise for public schools in the city or town, the superintendent of schools shall recommend to the school committee and shall, in order to provide for continuous regular public school operations consistent with the requirements of section 16-2-2 without regard to financial conditions, subsequently report to the city or town treasurer and chief charter officer what action will be taken to prevent an excess of expenditures, encumbrances, and accruals over revenues for public schools in the city or town.

(d) The oversight of the provision of educational and related services to students in public schools in the State of Rhode Island is the responsibility and duty of the city and town school committees and superintendents. Certain statutory provisions of the Rhode Island general laws, rules and regulations promulgated by the Rhode Island board of regents, and provisions of the basic education program for Rhode Island public schools of the Rhode Island board of regents, however, create mandates requiring that cities and towns use the funds allocated and available to them in a particular manner. Henceforth, and effective with the date of implementation, it is hereby provided, that no new state mandate shall issue without the provision of adequate and commensurate funding by and from the state to insure that the city or town is able to pay for such mandate.

SECTION 2. This act shall take effect upon passage.

10 S 2006 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT – THE 2010 TOWN OF COVENTRY MANDATE RELIEF PROGRAM ACT

SECTION 1. Effective until four (4) years after the passage of this act, the Town of Coventry is relieved from the operation of any law, rule or regulation imposing upon any

department or instrumentality of said Town of Coventry any requirement or mandated action the full cost of which is not also paid by the state.

SECTION 2. Upon the implementation of any program change permitted under Section 1 hereof, the chairman of the Coventry School Committee shall provide to the department of education, and the department of administration of the Town of Coventry shall provide to the office of municipal affairs (administration/planning), a certification that such program change has no adverse effect on health or safety.

SECTION 3. This act shall take effect upon passage.

10 S 2024 SENATE RESOLUTION SUPPORTING A MORATORIUM ON ALL UNFUNDED MANDATES

WHEREAS, The national economy has resulted in revenue deficits in states throughout the country, including the State of Rhode Island; and

WHEREAS, Unemployment has risen to over 10 percent nationally and over 13 percent in the State of Rhode Island; and

WHEREAS, The challenged economy has placed an additional burden on taxpayers to meet rising costs and debt interest, with wages that have been lost, reduced, or that have failed to keep pace with the cost of living; and

WHEREAS, The deficit in revenues in the state has resulted in a decrease in state aid to cities and towns, thereby placing an additional financial burden on local taxpayers; and

WHEREAS, Local governments in the state are struggling to provide essential services to their citizens; and

WHEREAS, Over the last several decades, the State of Rhode Island has issued certain mandates to cities and towns, through the general laws and regulations, which place the burden of cost on local communities; and

WHEREAS, A number of these unfunded mandates have resulted in costs to local communities that have not been reimbursed by the state; and

WHEREAS, The Department of Administration reviewed the FY2006 expenses submitted by ten municipalities in Rhode Island and approved over $1.129 million of expenses that were eligible for reimbursement in 2009 but were unable to be reimbursed due to the economy; and

WHEREAS, Some mandates have diminished in impact and importance over time, while other mandates require a specific costly response which may have a more cost-effective alternative proposed by a local community; and

WHEREAS, Cities and towns in the state have begun to collaborate on shared services and other mechanisms to maintain the delivery of services to their citizens in more cost-effective ways; and

WHEREAS, Cities and towns are most familiar with efficient means of meeting state mandates; now, therefore be it

RESOLVED, That this Senate of the State of Rhode Island and Providence Plantations hereby supports a moratorium on all unfunded mandates and further requests that the Town of Coventry be granted the right to work toward meeting state mandates through whatever local policy currently exists or may be established at the local level; and be it further

RESOLVED, That the Secretary of State be and he hereby is authorized and directed to transmit duly certified copies of this resolution to the President of the Coventry Town Council and the Chairperson of the Coventry School Committee.

10 H 7336 & S 2197 ACTS RELATING TO STATE AFFAIRS AND GOVERNMENT – MANDATE RELIEF

SECTION 1. Effective upon the passage of this act, the Town of Westerly is relieved from the operation of any statute or regulation imposing upon any department or instrumentality of said Town of Westerly any requirements or mandated action the full cost of which is not also paid by the state.

SECTION 2. Upon the implementation of any program change permitted under section 1 hereof, the chairperson of the Westerly school committee shall provide to the department of education, and the department of administration of the Town of Westerly shall provide to the

office of municipal affairs (administration/planning), certification that any such program changes have no adverse effect on public health or safety.

SECTION 3. This act shall take effect upon passage.

MOTION: To find harmful: **10 H 7178 An Act Relating to Education - - Mandates;** LG/ failed for lack of a second

MOTION: To find harmful **10 H 7372 An Act Relating to Education – School Committees and Superintendents;** LG/failed for lack of a second

22 **10 H 7313 AN ACT RELATING TO EDUCATION -- RESIDENCE OF CHILDREN FOR SCHOOL PURPOSES** Rep. Lima House Health, Education, & Welfare Committee

This act would permit a child in a residential placement to remain in his/her original school system should the child be moved to another residential placement located in a different city or town. This act would take effect upon passage.

Reviewer's Comments:

Arthur Plitt

Recommendation: ☐ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

SECTION 1. Section 16-64-1.3 of the General Laws in Chapter 16-64 entitled "Residence of Children for School Purposes" is hereby amended to read as follows:

16-64-1.3. Educational responsibility for children in group homes and other residential placements. -- (a) The city or town in which a foster home, group home, or other residential facility that does not include the delivery of educational services is located shall be responsible for the free appropriate public education of any child residing in those placements, including all procedural safeguards, evaluation, and instruction in accordance with regulations under chapter 24 of this title, for any period during which a child is residing in the city or town. The city or town shall coordinate its efforts with any other city or town to which a child moves when exiting the city or town responsible under this subsection. In the event that a child is moved to another foster home, group home or other residential facility located in a different city or town during a school year, that child shall be entitled to remain in the school system located in the former city or town for the remainder of the school year provided that transportation be provided either by the current foster parent, group home or residential facility. A child is also entitled to remain in the original school system during the subsequent school years provided that there is space available, the school system agrees to educate the child, and transportation is provided by the current resident placement of the child.

(b) The city or town responsible for payment under section 16-64-1.1(c) for payment of a city or town's per pupil special education cost to DCYF for a child placed in a residential facility, group home, or other residential facility that includes the delivery of educational services shall be responsible for the free, appropriate public education, including all procedural safeguards, evaluation and instruction in accordance with regulations under chapter 24 of this title.

SECTION 2. This act shall take effect upon passage.

MOTION: To take no position **10 H 7313 An Act Relating to Education -- Residence of Children for School Purposes** BI/GR passed; LG Nay

Transportation

23 **10 H 7279 AN ACT RELATING TO MOTOR AND OTHER VEHICLES – PARKING FACILITIES AND PRIVILEGES** Rep. Baldelli –Hunt House Judiciary Committee

This act would require that when a handicapped tag is issued that it contain a photograph of the person to whom it was issued. This act would take effect upon passage.

Reviewer's Comments:

Linda Ward

Recommendation: ☐ beneficial ☐ beneficial if amended ☐ harmful unless amended ☐ harmful

SECTION 1. Section 31-28-7 of the General Laws in Chapter 31-28 entitled "Parking

Facilities and Privileges" is hereby amended to read as follows:

31-28-7. Motor vehicle plates for persons with disabilities – Entitlement -- Designated parking spaces – Violations. – (a) Persons, as defined in subsection (h) of this section, upon application and proof of permanent or long-term disability to the division of motor vehicles, shall be issued one motor vehicle disability parking privilege placard or in the case of a motorcycle, one motor vehicle sticker, of blue which shall be imprinted with the white international symbol of access, certificate number, the words "Rhode Island Disability Parking Permit" and shall bear the expiration date and a photograph of the person to whom it is issued upon its face. A placard or motorcycle sticker issued to a person whose disability is temporary shall be substantially similar to that issued to a person with a permanent or long term disability. The temporary placard, however, shall be a red placard with a white international symbol of access, certificate number, the words "Rhode Island Disability Parking Permit" and shall bear the expiration dates and a photograph of the person to whom it is issued upon its face. Persons issued a placard or motorcycle sticker pursuant to this section shall be entitled to the immunities of sections 31-28-4 and 31-28-6. The placard shall conform to the Uniform Parking System for Disabled Drivers standard issued by the United States Department of Transportation. If an application for a placard or motorcycle sticker is denied, the division of motor vehicles shall promptly notify the applicant in writing, stating the specific reason(s) for the denial, and advising the applicant of the procedures for requesting a hearing to appeal the denial. Prior to the appeal hearing, the applicant shall be provided with any and all documents relied upon by the division in denying the application. If an application contains a physician certification that the applicant is sufficiently disabled to require a placard or motorcycle sticker, and the division has not provided specific reasons in its denial letter to the applicant, the hearing officer shall summarily order that a placard or motorcycle sticker be provided to the applicant. At all other hearings of application denials where a physician certification has been provided, the division shall bear the burden of proof that the individual is not entitled to a placard or motorcycle sticker pursuant to this chapter.

(b) A placard issued pursuant to this section shall be portable and used only when the person is being transported. The placard is to be hung from the rear view mirror so as to be seen through the front or rear windshield of the motor vehicle. A placard may be issued to a person with a disability who does not own a motor vehicle, to be used only when he or she is being transported. A motorcycle sticker issued pursuant to this section shall not be portable and shall be affixed to the rear plate of the motorcycle.

(c) (1) The certificate of entitlement to the placard or motorcycle sticker shall be renewed every three (3) years for individuals with a long-term disability, as defined in subsection (d) of this section, and the renewal application shall require a physician's certification that the condition has not changed since the previous approval, and three (3) years for individuals with a permanent disability as defined in subsection (h) of this section, in accordance with a schedule prepared by the division of motor vehicles that uses the last name of an individual to determine the month of renewal. If an application or subsequent renewal is accompanied by a physician's certification that the applicant's condition is a chronic, permanent impairment and that application is approved, then any subsequent renewal shall be authorized upon receipt of a notarized affidavit from the applicant or applicant's, guardian or legal representative or a certificate from the applicant's physician that his or her condition has not changed since the previous approval.

(2) The certificate of entitlement to the placard or motorcycle sticker shall be covered with plastic or similar material. The applicant shall, upon timely renewal, receive a sticker bearing the expiration date of the certificate of entitlement to be affixed across the expiration date of the disability parking privilege placard or in the case of a motorcycle the applicant shall receive a new motorcycle sticker. The division of motor vehicles shall establish rules and regulations allowing for the renewal of the certificates of entitlement by mail.

(3) Whenever the division of motor vehicles proposes to suspend, revoke or fail to renew the certificate of entitlement for noncompliance with the requirements of this section or for violation of subsection (h) of this section, the individual shall first be entitled to a hearing before the division of motor vehicles to contest the proposed action. At the hearing, the division of motor vehicles shall bear the burden of proof that the individual is not entitled to the placard or motorcycle sticker pursuant to this chapter. There shall be no renewal fee charged for the placards

or motorcycle sticker. The division of motor vehicles shall be authorized to issue a temporary disability parking privilege placard or motorcycle sticker immediately upon receipt of an application for individuals with a temporary impairment, as defined in subsection (h) of this section. A temporary placard or motorcycle sticker shall be valid for sixty (60) days from the date of issuance. Temporary placards or motorcycle stickers may be renewed for a period of one year or less, as determined by the medical advisory board upon application if the disability persists. The division of motor vehicles shall subsequently review the applications in accordance with the procedures currently in effect as to applications from persons whose disability is long term. Any issuance which, after subsequent review, shall be found to be inappropriate shall be revoked and notice of the revocation shall be sent to the applicant.

(d) A person, other than a person with a disability, who for his or her own purposes uses the parking privilege placard, shall be fined five hundred dollars ($500) for each violation. A person issued a special placard who uses the placard after expiration, or who shall allow unauthorized use of the disability parking placard or sticker, may be subject to immediate revocation of the use of the placard by the division of motor vehicles, and subject to a fine of five hundred dollars ($500).

(e) Disability parking spaces shall be designated and identified by the posting of signs above ground level incorporating the international symbol of access of white on blue, and the words “Handicapped Parking”, “Disability Parking,” “Disabled Parking,” or “Reserved Parking” at each space, at both ends of a row or series of adjacent disability parking spaces, or at the entrance to a parking lot restricted to only disability parking.

(f) A person, other than a person issued a special placard or motorcycle sticker pursuant to this section, who parks a vehicle in a parking space designated for persons with disabilities, shall be fined: (1) one hundred dollars ($100) for a first violation, (2) one hundred seventy-five dollars ($175) for a second violation, and (3) three hundred twenty-five dollars ($325) for a third or subsequent violation. The vehicle may be subject to towing at the owner’s expense. Provided further, that it shall not be unlawful for a person to park a vehicle in a space designated for person with disabilities if that person is transporting a person who has been issued a special placard and is properly displaying the placard on the vehicle.

(g) Enforcement of the parking provisions of this section shall be enforced by the local or state authorities on public or private property when the location of the parking spaces is within the purview of the State Building Code, chapter 27.3 of title 23.

(h) Definitions. – For the purpose of this section:

(1) “Disabled” or “disability” means a permanent or long-term impairment which prevents or impedes walking, which shall include but not be limited to: (i) an impairment which prevents walking and requires use of a wheelchair; (ii) an impairment which involuntarily causes difficulty or insecurity in walking or climbing stairs with or without the need to use braces, crutches, canes or artificial support; (iii) an impairment caused by amputation, arthritis, blindness (including legally blind), or orthopedic condition; (iv) an impairment in respiratory, circulatory, or neurological health which limits the person’s walking capability; or (v) disabled veteran, pursuant to section 31-6-8 after certification of eligibility from the Veterans’ Administration or other satisfactory documentation of eligibility is presented. Persons with disabilities may be capable of working or may be presently working.

(2) “Long-term disability” means an impairment which is potentially reversible or may improve with appropriate medical treatment. At the time of application and or renewal, the impairment should not be expected to improve prior to the expiration of the certification, to a point where the individual does not meet the provisions of subdivision (1) of this subsection.

(3) “Permanent disability” means an impairment which is non-reversible.

(4) “Temporary impairment” means an impairment which is expected to improve to a point where the individual does not meet the provisions of subdivision (1) of this subsection, within two (2) years of the application.

(i) The department of revenue shall inform each licensed driver of the certificate procedures and parking restrictions of this section and sections 31-28-4 and 31-28-6, and a facsimile of the portable placards and motorcycle stickers issued under this section shall be sent to the enforcing authority of each state, and each enforcing authority shall be informed of the

parking restrictions of this section and sections 31-28-4 and 31-28-6. Recipients of disability parking privilege placards shall also receive instructions on their use and the penalties for misuse, when the placard is initially issued.

(j) Any person who makes, manufactures, offers for sale or knowingly uses a counterfeit parking privilege placard shall be fined up to five hundred dollars ($500) and/or forty (40) hours of community restitution.

SECTION 2. This act shall take effect upon passage.

MOTION: To find beneficial if amended to authorize the utilize other state gov photo and add a privacy sleeve **10 H 7279 An Act Relating to Motor and Other Vehicles – Parking Facilities and Privileges** BI/GR passed, Nay LG,		
Announcements and Scheduling of Meetings	**Chairperson**	**5 min.**
The Legislation Committee meets the 2nd Monday 3 – 4:30 PM: 04/12; 05/10; 06/14; 07/12; 08/30*; 09/20; 11/08; and 12/13. The Committee also conducts public forums on the concerns of people with disabilities annually during the week of July 26th – 30th celebrating the anniversary of the signing of the Americans with Disabilities Act (ADA) on July 26, 1990.		
Next meeting will be a special meeting on:	Monday March 15th	Starting at: 1 PM
Adjournment:	Chairperson adjourned the meeting at 5:05 PM	
Resource persons:	Bob Cooper, Committee Staff	
Observer	Anthony Robinson, House of Representatives	