Description of graphic: RI State Seal an anchor in gold behind a blue wheelchair logo. Just below is a blue banner with the state motto "Hope". All are in the center of a ring of 8 blue stars, in groups of 2 separated by the logos for Braille, hearing aids, low vision and amplified phone.

Governor's Commission on Disabilities
Legislation Committee
Monday May 9, 2011 3-4:30 PM

John O. Pastore Center, 41 Cherry Dale Court,
Cranston, RI 02920-3049
(voice) 401-462-0100 (fax) 462-0106 (tty) via RI Relay 711
(e-mail) disabilities@gcd.ri.gov
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meeting graphic	**Attendees:** Linda Ward (Chair.); William R. Inlow (Vice Chair.); Rebecca Boss; Sharon Brinkworth; Rosemary C. Carmody; Linda Deschenes; Kathleen Heren; Arthur M. Plitt; Gwendolyn Reeve; Msgr. Gerard O. Sabourin & Theresa Thoelke **Absentees:** Deborah Buffi; Ray Bandusky; Julie DeRosa; Sarah Everhart Skeels; Timothy Flynn; Elaina Goldstein; Roger Harris; Laura Jones; Jean Lawlor; Maureen Maigret; Kate McCarthy-Barnett; Paula Parker; Joseph Reppucci;
Guests:	Dawn Wardyga (RIPIN/Family Voices)
Staff:	Bob Cooper

	Agenda Topics	Moderator/Leader	Time
Clock graphic	**Call to Order and Acceptance of the Minutes**	**Linda Ward, Chairperson**	**3:00**
	Chair calls the meeting to order at 3:06 Introductions of Commissioners and guests		
voting check off graphic	MOTION: To accept the minutes of the previous meeting as presented AP/SB passed		

	Action Items:		
table graphic	Bills Tabled for More Information	Bob Cooper	3:05
	Purpose/Goal: To decide the impact of the bills on people with disabilities.		
	Discussion:		
	Tabled at the last meeting for more information from the Department of Elementary and Secondary Education 11 S 0433 AN ACT RELATING TO EDUCATION -- THE PAUL W. CROWLEY RHODE ISLAND STUDENT INVESTMENT INITIATIVE, Sen. Picard, Senate Education Cmte, Scheduled for hearing and/or consideration This act would provide that the annual state assessment program would include the results of alternate assessments for up to one percent (1%) of certain students from a school district who are identified as having severe cognitive disabilities and up to two percent (2%) of students from a school district who are identified as performing academically below grade level. This act would take effect upon passage. Information from the RI Department of Elementary and Secondary Education Dear Senator Gallo and Member of the Senate Education Committee:		

	Agenda Topics	Moderator/Leader	Time
	Ensuring that Rhode Island has a valid and reliable state assessment system is not only important to RIDE, but required by federal law. For the purposes of holding schools and districts accountable, states are required to develop general grade level assessment in which students will participate with or without accommodations. In addition, states are permitted to develop alternate assessments for students with significant cognitive disabilities. In order to meet these requirements, RIDE has developed the New England Common Assessment Program (NECAP) assessment, Rhode Island's general grade level assessment, and the Rhode Island Alternate Assessment (RIAA), Rhode Island's alternate assessment based on alternate achievement standards for students with the most significant cognitive disabilities. Students' proficient and advanced scores on alternate assessments based on alternate academic achievement standards are subject to a cap of 1.0 percent of all students assessed at the State and district levels. RIDE administers and reports the results of these assessments annually. Rhode Island has not developed an alternate assessment based on modified achievement standards (AA-MAS) but has benefitted from two federal grants that allowed us to research and understand the needs of this population of students. By federal definition, a modified academic achievement standard, (the 2%) is an expectation of performance that is challenging for eligible students, but may be less difficult than a grade-level academic achievement standard for typical students. Modified academic achievement standards must be aligned with a State's academic content standards *for the grade in which a student is enrolled*. This assessment must cover the same grade-level content as the general assessment. Given these parameters, our research concluded that a 2% test would not provide the relief from grade level expectations RIDE supports the idea of implementing an assessment for students identified as falling below grade level, but who are higher functioning than those students identified as having significant cognitive disabilities. Rhode Island has participated in two research students regarding the AA-MAS in an effort to identify the appropriate students for this assessment and identify strategies to improve accessibility for this population of students. What we found is that the population that would benefit most from an additional alternate assessment, those students performing just above those eligible for the RIAA, would not have improved accessibility through participation in an AA-MAS as it still requires the assessment of grade level content. In addition, RIDE is concerned that it does not have the funding to develop and implement an additional state assessment. Therefore, our focus has been to work with districts to develop curriculum and local assessments that will provide important data for teachers to support students in the classroom. However, we are developing a new assessment program in partnership with 25 states which will replace the NECAP, as a member of the PARCC consortium. It is the intention that through innovative new item types and increased use of technology in this assessment that greater accessibility will be provided for students to participate in the assessment system. This assessment program will be implemented in the 2014 school year. As such, we believe that we should continue our focus on the development of the new assessment program while building curriculum and assessment supports for local use. Please do not hesitate to contact me (222-8492), if you have any questions or concerns related to this topic.		

	Agenda Topics	Moderator/Leader	Time
	Sincerely, Mary Ann Snider, Chief Division of Educator Excellence and Instructional Effectiveness, RI Department of Elementary and Secondary Education. Reviewer Arthur Plitt recommends finding this act harmful.		

SECTION 1. Section 16-7.1-13 of the General Laws in Chapter 16-7.1 entitled "The Paul W. Crowley Rhode Island Student Investment Initiative" is hereby amended to read as follows:

16-7.1-13. State leadership in conducting annual assessments of student performance. -- Setting high standards for student performance must be paired with related assessments that will determine what progress the state is making toward bringing all children to high levels of achievement. A state assessment program shall be continued and expanded in core areas (mathematics, reading, writing and health). The program shall include performance standards and an annual report that disaggregates performance by race, poverty, native language and gender. The general assembly shall annually appropriate funds to support the programs, and the amount shall be recalculated annually. The commissioner of education shall implement the state assessment program, which shall include the results from an alternative test for up to one percent (1%) of those students from each school district who are identified as having the most severe cognitive disabilities, and also the results for up to two percent (2%) of those students from each school district whose academic performance is identified as falling below grade level, but who are higher functioning than those students identified as having severe cognitive disabilities.

SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To find harmful **11 S 0433 An Act Relating To Education -- The Paul W. Crowley Rhode Island Student Investment Initiative** AP/BI passed, Abstain GR, BB, LD
	Tabled at the last meeting for more information from the sponsor, to be invited to the May Legislation Committee Meeting. 11 H 5724 JOINT RESOLUTION CREATING A SPECIAL LEGISLATIVE COMMISSION TO STUDY THE FEASIBILITY OF ESTABLISHING A LOCATION AT A RHODE ISLAND COLLEGE FOR RHODE ISLAND VETERANS TO GO AND GET HELP WITH SCHOOL WORK AND/OR POST-TRAUMATIC SYNDROME DISORDERS , Rep. MacBeth, Passed and transferred to Senate Special Legislation and Veterans Affairs This resolution would create an eleven (11) member special legislative commission whose purpose would be to make a comprehensive study of all aspects of the feasibility or possibility of establishing a location at the University of Rhode Island, Rhode Island College or the Community College of Rhode Island for veterans to go and get help with school work and/or post-traumatic syndrome disorders, and who would report back to the General Assembly no later than February 1, 2012, and whose life would expire May 1, 2012. The Substitute adds one member who shall be a veterans' advocate from "Operation Vets" and changes the three higher education appointees from professors to staff members of the three public colleges.

RESOLVED**,** That a special legislative commission be and the same is hereby created consisting of twelve (12) members: three (3) of whom shall be from the House of Representatives, not more than two (2) from the same political party, to be appointed by the Speaker; three (3) of whom shall be from the Senate, not more than two (2) from the same political party, to be appointed by the Senate President; one of whom shall be a veteran

representative, to be appointed by the Speaker; three (3) of whom shall be staff members of public institutions of higher education, specifically one from each of the Rhode Island state colleges and universities--URI, RIC, and CCRI--to be appointed by the chairperson of the Rhode Island Board of Governors for Higher Education; one of whom shall be a veterans' advocate from "Operation Vets," to be appointed by the Speaker; and one of whom shall be a social worker to be appointed by the Senate President.

In lieu of any appointment of a member of the legislature to a permanent advisory commission, a legislative study commission, or any commission created by a general assembly resolution, the appointing authority may appoint a member of the general public to serve in lieu of a legislator, provided that the Majority Leader or the Minority Leader of the political party which is entitled to the appointment consents to the appointment of the member of the general public.

The purpose of said commission shall be to make a comprehensive study of all aspects of the feasibility or possibility of establishing a location at the University of Rhode Island, Rhode Island College or the Community College of Rhode Island for Rhode Island veterans to go and get help with school work and/or post traumatic syndrome disorders.

Forthwith upon passage of this resolution, the members of the commission shall meet at the call of the Speaker of the House and organize and shall select from among the legislators a chairperson. Vacancies in said commission shall be filled in like manner as the original appointment.

The membership of said commission shall receive no compensation for their services.

All departments, boards, commissions, and agencies of the state shall furnish such advice and information, documentary and otherwise, to said commission and its agents as is deemed necessary or desirable by the commission to facilitate the purposes of this resolution.

The Speaker of the House is hereby authorized and directed to provide suitable quarters for said commission; and be it further

RESOLVED, That the commission shall report its findings and recommendations to the General Assembly on or before February 1, 2012, and said commission shall expire on May 1, 2012.

☑ voting check off graphic	The Committee took no position on: **11 H 5724 Joint Resolution Creating A Special Legislative Commission To Study The Feasibility Of Establishing A Location At A Rhode Island College For Rhode Island Veterans To Go And Get Help With School Work And/Or Post-Traumatic Syndrome Disorders**

NEW new graphic	**Consideration of New Bills/Budget Articles**		**3:30**
	Purpose/Goal: To decide the impact of the bills on people with disabilities.		
	Discussion: Review of Medicaid & Health Care bills requested by Elaina Goldstein		
	11 H 5276 / S 770 An Act Relating To State Affairs And Government -- Patient-Centered Medical Home Act, Rep. Naughton, House Corporations Cmte. held for further study. This act would create the “Rhode Island All-Payer Patient-Centered Medical Home Act.” This act would take effect upon passage. Reviewer recommends Beneficial		

SECTION 1. Title 23 of the General Laws entitled "HEALTH AND SAFETY" is hereby amended by adding thereto the following chapter:

CHAPTER 17.26

RHODE ISLAND ALL-PAYER PATIENT-CENTERED MEDICAL HOME ACT OF 2011

23-17.26-1. Short title. -- This chapter shall be known and may be cited as the “Rhode Island All-Payer Patient-Centered Medical Home Act of 2011.”

23-17.26-2. Legislative purpose and intent. – (a) The general assembly recognizes patient-centered medical homes as a valuable medical care tool The patient-centered medical

1-9 home, (hereinafter referred to as "PCMH") is an approach to providing comprehensive primary
1-10 care for children, youth and adults. The patient-centered medical home is a health care setting that
1-11 facilitates partnerships between individual patients, and their personal physicians, physician
1-12 assistants and advanced practice nurses, and when appropriate, the patient's family. Care is
1-13 facilitated by registries, information technology, health information exchange and other means to
1-14 assure that patients get the indicated care when and where they need and want it in a culturally
1-15 and linguistically appropriate manner. The goals of the patient-centered medical home are
1-16 improved delivery of comprehensive primary care and focus on better outcomes for patients,
1-17 more efficient payment to physicians and other clinicians, and better value, accountability and
1-18 transparency to purchasers and consumers. The patient-centered medical home changes the
2-1 interaction between patients and physicians and other clinicians from a series of episodic office
2-2 visits to an ongoing two-way relationship. The patient-centered medical home helps medical care
2-3 providers work to keep patients healthy instead of just healing them when they are sick. In the
2-4 patient-centered medical home, patients are active participants in managing their health with a
2-5 shared goal of staying as healthy as possible. The "PCMH" has the following characteristics to:
2-6 (1) Emphasize, enhance, and encourage the use of primary care, and include the use of
2-7 primary care physicians, advanced practice nurses, and physician assistants as personal clinicians;
2-8 (2) Focus on delivering high quality, efficient and effective health care services;
2-9 (3) Encourage patient-centered care, including active participation by the patient and
2-10 family, or designated agent for health care decision-making, as appropriate in decision-making
2-11 and care plan development, and providing care that is appropriate to the patient's individual needs
2-12 and circumstances;
2-13 (4) Provide patients with a consistent, ongoing contact with a personal clinician or team
2-14 of clinical professionals to ensure continuous and appropriate care for the patient's condition;
2-15 (5) Enable and encourage utilization of a range of qualified health care professionals,
2-16 including dedicated care coordinators, in a manner that enables providers to practice to the fullest
2-17 extent of their license;
2-18 (6) Focus initially on patients who have, or are at risk of developing, chronic health
2-19 conditions;
2-20 (7) Incorporate measures of quality, resource use, cost of care, and patient experience;
2-21 (8) Ensure the use of health information technology and systemic follow-up, including
2-22 the use of patient registries; and
2-23 (9) Encourage the use of evidence-based health care, patient decision-making aids that
2-24 provide patients with information about treatment options and their associated benefits, risks,
2-25 costs, and comparative outcomes, and other clinical decision support tools.
2-26 **23-17.26-3. Definitions. --** As used in this chapter, the following terms shall have the
2-27 following meanings:
2-28 (1) "Director" means the director of the department of health.
2-29 (2) "Commissioner" means the health insurance commissioner.
2-30 (3) "Health insurer" means all entities licensed, or required to be licensed in this state that
2-31 offer health benefit plans in Rhode Island including, but not limited to, nonprofit hospital service
2-32 corporations and nonprofit medical service corporations established pursuant to chapter 27-19
2-33 and 27-20, and health maintenance organizations established pursuant to chapter 27-41 or as
2-34 defined in chapter 42-62, a fraternal benefit society or any other entity subject to state insurance
3-1 regulation that provides medical care on the basis of a periodic premium, paid directly or through
3-2 an association, trust or other intermediary, and issued, renewed, or delivered within or without the
3-3 state.
3-4 (4) "Health insurance plan" means any individual, general, blanket or group policy of
3-5 health, accident and sickness insurance issued by an insurer licensed to provide such insurance in
3-6 Rhode Island including, but not limited to, nonprofit hospital service corporations and nonprofit
3-7 medical service corporations established pursuant to chapters 27-19 and 27-20, and health
3-8 maintenance organizations established pursuant to chapter 27-41 or as defined in chapter 42-62.
3-9 The commissioner may by regulation define other health coverage as a health benefit plan for the
3-10 purposes of this chapter.

(5) “Personal clinician” means a physician, physician assistant, or an advanced practice nurse licensed by the department of health.

(6) “State health care program” means the medical assistance, RIte Care, and any other health insurance program provided through the office of health and human services (OHHS) and its component state agencies.

(7) “Patient-centered medical home” means a location that satisfies the characteristics described in section 23-17.26-3, fulfills the standards determined by the patient-centered medical home collaborative, and is designated as such by the commissioner.

(8) “Patient-centered medical home collaborative” means a community advisory council, incorporating participants in the existing Rhode Island patient-centered medical home pilot project, including, but not limited to, health insurers, physicians and other clinicians, employers, the state health care program, relevant state agencies, community health centers, hospitals, other providers, patients, and patient advocates which shall provide consultation and recommendations to the director of health and the health insurance commissioner on all matters relating to proposed regulations, development of standards, and development of payment mechanisms.

23-17.26-4. Promotion of patient-centered medical home--Payment restructuring. -- (a) Care coordination payments. The commissioner shall convene a patient-centered medical home collaborative consisting of the entities described in subdivision 23-17.26-2(8). The commissioner shall require participation in the collaborative by all of the health insurers described in subdivision 23-17.26-2(3). The commissioner shall direct the collaborative to develop, by July 1, 2012, a payment system that requires all health insurers to make per-person care coordination payments to patient-centered medical homes, designated by the commissioner, for providing care coordination services and directly managing on-site or employing care coordinators as part of all health insurance plans offered in Rhode Island. The collaborative shall provide guidance to the state health care program as to the appropriate payment system for the state health care program to the same patient-centered medical homes, and the state health care program must justify the reasons for any departure from this guidance to the collaborative. The commissioner shall rely upon the director and the patient-centered medical home collaborative to develop the standards for the patient-centered medical home to be used in the payment system based on national models where feasible. The care coordination payments under this section may be modified as the commissioner and the collaborative determine necessary, shall be consistent among insurers and patient-centered medical homes, and shall be in addition to any other incentive payments such as quality incentive payments. In developing the criteria for care coordination payments, the commissioner shall consider the feasibility of including the additional time and resources needed by patients with limited English-language skills, cultural differences, or other barriers to health care. The commissioner may direct a schedule for phasing in-care coordination fees.

(b) The care coordination payment system shall be in place through at least July 1, 2016. Its continuation beyond that point shall depend upon the results of the evaluation reports filed pursuant to section 23-17.26-6.

(c) Examination of other payment reforms. By January 1, 2013, the commissioner shall direct the collaborative to consider additional payment reforms to be implemented to support patient-centered medical homes including, but not limited to, payment structures (to medical home or other providers) that:

(1) Rewards high-quality, low-cost providers;

(2) Creates enrollee incentives to receive care from high-quality, low-cost providers;

(3) Fosters collaboration among providers to reduce cost shifting from one part of the health continuum to another;

(4) Creates incentives that health care be provided in the least restrictive, most appropriate setting; and

(5) Creates provider and/or enrollee incentives to promote personal health behaviors that will prevent or control chronic disease including, but not limited to, tobacco cessation, weight control, physical activity.

23-17.26-5. Annual reports on implementation and administration. -- The director

4-31 and commissioner shall report annually to the general assembly on the implementation and
4-32 administration of the patient-centered medical home model.
4-33 **23-17.26-6. Evaluation reports. --** (a) The director and commissioner shall provide to
4-34 the general assembly comprehensive evaluations of the patient-centered medical home model
5-1 three (3) years and five (5) years after implementation. The evaluation must include:
5-2 (1) The number of enrollees in patient-centered medical homes in the collaborative, and
5-3 the health characteristics of their enrollees;
5-4 (2) The number and geographic distribution of patient-centered medical home providers
5-5 in the collaborative, and the number of primary care physicians per thousand population;
5-6 (3) The performance and quality of care of patient-centered medical homes in the
5-7 collaborative;
5-8 (4) The estimated impact of patient-centered medical homes on access to preventative
5-9 care;
5-10 (5) Patient-centered medical home payment arrangements, and costs related to
5-11 implementation and payment of care coordination fees;
5-12 (6) The estimated impact of patient-centered medical homes on health status and health
5-13 disparities; and
5-14 (7) Estimated savings from implementation of the patient-centered medical home model.
5-15 (b) Health insurers shall provide to the commissioner and director utilization, quality,
5-16 financial and other reports, specified by the commissioner and director, regarding the
5-17 implementation and impact of patient-centered medical homes.
5-18 **23-17.26-7. Alternative models. --** Nothing in this chapter shall preclude the
5-19 development of alternative medical or health care home projects by an insurer, the director, the
5-20 commissioner or other state agencies or preclude insurers, the director, the commissioner or other
5-21 state agencies from establishing alternative models and payment mechanisms for persons who are
5-22 enrolled in integrated Medicare and Medicaid programs, are enrolled in managed-care long-term
5-23 care programs, are dually eligible for Medicare and Medicaid, are in the waiting period for
5-24 Medicare, or who have other primary coverage.
5-25 **23-17.26-8. Regulations. --** The director of the department of health and the health
5-26 insurance commissioner shall develop rules and regulations to implement the provisions of this
5-27 chapter.
5-28 SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To find beneficial 11 H 5276 & S 0770 Acts Relating To State Affairs And Government -- Patient-Centered Medical Home Act KH/AP passed, Abstained LD
	11 H 5852 / S 0471 An Act Relating To Behavioral Healthcare, Developmental Disabilities And Hospitals - Licensing Of Facilities And Programs For People Who Are Mentally Ill And/Or Developmentally Disabled, Rep. Slater, House HEW Cmte & Sen. Miller, Senate HHS Cmte both held for further study. This act would amend the title of Chapter 40.1-24 "Licensing of Facilities and Programs for People who are Mentally Ill and/or Developmentally Disabled" and provide for a "deemed status" which provides for the granting of a license renewal upon a showing of accreditation by a national accreditation organization. This act would take effect upon passage. Reviewer recommends Beneficial if amended. Clarity on the definition of “deemed” seems necessary as well as inspections.

1-1 SECTION 1. The title of Chapter 40.1-24 of the General Laws entitled "Licensing of
1-2 Facilities and Programs for People who are Mentally Ill and/or Developmentally Disabled" is
1-3 hereby amended to read as follows:
1-4 ~~**CHAPTER 40.1-24**~~
1-5 ~~**LICENSING OF FACILITIES AND PROGRAMS FOR PEOPLE WHO ARE MENTALLY ILL**~~

~~AND/OOR DEVELOPMENTALLY DISABLED~~

CHAPTER 40.1-24

PERSONS WITH MENTAL ILLNESS, ADDICTION/SUBSTANCE ABUSE DISORDERS AND DEVELOPMENTAL DISABILITIES

SECTION 2. Section 40.1-24-1 of the General Laws in Chapter 40.1-24 entitled "Licensing of Facilities and Programs for People who are Mentally Ill and/or Developmentally Disabled" is hereby amended to read as follows:

40.1-24-1. Definitions. -- As used in this chapter:

(1) "Adult foster home" means a private family living arrangement which, through financial support from the parent deinstitutionalization subsidy aid program, provides housing and supervision to two (2) or more adults who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or otherwise eligible under section 40.1-1-10.1. Foster homes serving fewer than two (2) adults, foster home situations wherein the foster parents are natural or adoptive parent(s) or grandparents, and any facility licensed by the department of children, youth, and families shall be excluded for the purposes of this chapter.

(2) "Community residence" means any home or other living arrangement which is established, offered, maintained, conducted, managed, or operated by any person for a period of at least twenty-four (24) hours, where, on a twenty-four (24) hour basis, direct supervision is provided for the purpose of providing rehabilitative treatment, habilitation, psychological support, and/or social guidance for three (3) or more persons who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or cognitive disabilities such as brain injury. The facilities shall include, but not be limited to, group homes, halfway houses, and fully supervised apartment programs. Semi-independent living programs, foster care, and parent deinstitutionalization subsidy aid programs shall not be considered community residences for the purposes of this chapter.

(3) "Day treatment program" means any nonresidential facility which is established, offered, maintained, conducted, managed, or operated by any person for a period of less than twenty-four (24) hours to provide therapeutic intervention to persons who are alcoholic, drug abusers, mentally ill, or who are persons with developmental disabilities or cognitive disabilities such as brain injury. These shall include, but not be limited to, outpatient programs for persons who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or cognitive disabilities such as brain injury.

(4) "Deemed status" means acceptance by the department of accreditation by a national accreditation organization such as, but not limited, to the joint commission and the commission on the accreditation of rehabilitation facilities, as evidence sufficient for license renewal of compliance with rules and regulations for licensing of behavioral healthcare organizations promulgated in accordance with section 40.1-24-9.

(5) ~~(4)~~ "Department" means the department of ~~mental health, retardation, and hospitals~~ behavioral healthcare, developmental disabilities and hospitals.

(6) ~~(5)~~ "Facility" means any community residence, day treatment program, rehabilitation program, public or private, excluding hospitals or units within hospitals for persons who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or cognitive disabilities such as brain injury providing program services which do not constitute medical or custodial care, but do offer rehabilitation, habilitation, psychological support, and social guidance.

(7)~~(6)~~ "Habilitation program" means any nonresidential facility which is established, offered, maintained, conducted, managed, or operated by any person for a period of less than twenty-four (24) hours to provide training in basic daily living skills and developmental activities, prevocational skills and/or vocational training and placement, and follow up for people who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or cognitive disabilities such as brain injury. These shall include, but not be limited to, early intervention, adult development, work activities, sheltered workshops, advanced workshops, and job development and training programs. Sheltered workshops not exclusively for people who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or

cognitive disabilities such as brain injury shall be excluded for the purposes of this chapter.

(8)~~(7)~~ "Person" means any individual, governmental unit, corporation, company, association, or joint stock association and the legal successor thereof.

(9)~~(8)~~ "Program" means a planned service delivery system structured to provide specific components, which are responsive to the needs of those served.

(10)~~(9)~~ "Rehabilitation program" means any facility, which is established, offered, maintained, conducted, managed, or operated by any person to provide restorative therapy and/or training to persons who are mentally ill or who are persons with developmental disabilities or cognitive disabilities such as brain injury. These shall include, but not be limited to, community mental health centers. Sheltered workshops not exclusively for people who are alcoholic, drug abusers, mentally ill or who are persons with developmental disabilities or cognitive disabilities such as brain injury shall be excluded for the purposes of this chapter.

SECTION 3. Sections 40.1-24-6 and 40.1-24-11 of the General Laws in Chapter 40.1-24 entitled "Licensing of Facilities and Programs for People who are Mentally Ill and/or Developmentally Disabled" are hereby amended to read as follows:

40.1-24-6. Expiration and renewal of license. -- ~~A license, other than a provisional license, unless sooner suspended or revoked, shall expire by limitation two (2) years from the date of issuance and may be renewed after inspection, report, and approval by the department. The inspection shall be made any time prior to the date of expiration of the license. The report shall contain information in such form as the department shall prescribe by regulation.~~ A license, other than a provisional license, unless suspended or revoked, shall remain in full force and effect until renewed by approval of the department in accordance with procedures for renewal set forth in rules and regulations to be adopted by the department pursuant to section 40.1-24-9; such procedures must include a process by which a license shall be renewed on the basis of deemed status as defined in chapter 40.1-24-1.

40.1-24-11. Inspections and investigations -- Alterations or new construction. -- The department shall make or cause to be made such inspections and investigations that it deems necessary except that no such inspections or investigations shall be required by this title or by rules and regulations promulgated in accordance with section 40.1-24-9 for the renewal of any license pursuant to deemed status as defined in section 40.1-24-1. The department may prescribe by regulations that any licensee or applicant desiring to make a specified type of alteration or addition to its facilities or to construct new facilities shall, before commencing the alteration, addition, or new construction, submit plans and specifications thereto to the department for preliminary inspection and approval or recommendations with respect to compliance with the regulations and standards herein authorized. Necessary conference and consultations may be provided.

SECTION 4. All general and public laws affected by this chapter shall be revised, amended, consolidated or conformed by the law revision office. Whenever in general and public laws reference is made to "people who are mentally ill and/or developmentally disabled" the law revision director shall proceed according to the provisions set out in section 22-11-3.4 to change these references to "persons with mental illness, addiction/substance abuse disorders, and/or developmental disabilities."

SECTION 5. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To find beneficial 11 H 5852 / S 0471 Acts Relating To Behavioral Healthcare, Developmental Disabilities And Hospitals - Licensing Of Facilities And Programs For People Who Are Mentally Ill And/Or Developmentally Disabled RC/KH passed Abstained TT, LD
	11 H 5900 An Act Relating To Insurance – Medical, Rep. Ferri, House HEW Cmte held for further study This act would prohibit any Rhode Island health care entity or plan from imposing any cost-sharing requirements charging the insured for any services rendered by chiropractic

	physicians and psychologists that are greater than fifty percent (50%) of the agreed upon services reimbursement rate. This act would take effect upon passage Reviewer recommends Beneficial

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. Cost sharing for certain services. – (a) A health care entity or health plan operating in the state shall not impose any cost-sharing requirement, including co-payments and/or deductibles, charged to the insured for services rendered by an individual licensed under chapter 30 of title 5 of these general laws, entitled "Chiropractic physicians" or an individual licensed under chapter 44 of title 5 of these general laws, entitled "Psychologists", that is greater than fifty percent (50%) of the agreed upon reimbursement for services rendered by said licensed providers pursuant to this section.

(b) The office of the health insurance commissioner shall promulgate rules and regulations to enforce this section, including, but not limited to, any fees or sanctions imposed upon health plans for violation of this section.

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. Cost sharing for certain services. -- (a) A health care entity or health plan operating in the state shall not impose any cost-sharing requirement, including co-payments and/or deductibles, charged to the insured for services rendered by an individual licensed under chapter 30 of title 5 of these general laws, entitled "Chiropractic physicians" or an individual licensed under chapter 44 of title 5 of these general laws, entitled "Psychologists", that is greater than fifty percent (50%) of the agreed upon reimbursement for services rendered by said licensed providers pursuant to this section.

(b) The office of the health insurance commissioner shall promulgate rules and regulations to enforce this section, including, but not limited to, any fees or sanctions imposed upon health plans for violation of this section.

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

27-20-57. Cost sharing for certain services. -- (a) A health care entity or health plan operating in the state shall not impose any cost-sharing requirement, including co-payments and/or deductibles, charged to the insured for services rendered by an individual licensed under chapter 30 of title 5 of these general laws, entitled "Chiropractic physicians" or an individual licensed under chapter 44 of title 5 of these general laws, entitled "Psychologists", that is greater than fifty percent (50%) of the agreed upon reimbursement for services rendered by said licensed providers pursuant to this section.

(b) The office of the health insurance commissioner shall promulgate rules and regulations to enforce this section, including, but not limited to, any fees or sanctions imposed upon health plans for violation of this section.

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. Cost sharing for certain services. -- (a) A health care entity or health plan operating in the state shall not impose any cost-sharing requirement, including co-payments and/or deductibles, charged to the insured for services rendered by an individual licensed under chapter 30 of title 5 of these general laws, entitled "Chiropractic physicians" or an individual licensed under chapter 44 of title 5 of these general laws, entitled "Psychologists", that is greater than fifty percent (50%) of the agreed upon reimbursement for services rendered by said licensed providers pursuant to this section.

(b) The office of the health insurance commissioner shall promulgate rules and regulations to enforce this section, including, but not limited to, any fees or sanctions imposed upon health plans for violation of this section.

SECTION 5. This act shall take effect upon passage.

☑ voting check off graphic	The Committee took no position on 11 H 5900 An Act Relating To Insurance - Medical
	11 S 0460 / H 5798 An Act Relating To Insurance, Sen. Gallo, Senate Health & Human Services Cmte, & Rep. Handy, House HEW Cmte held for further study This act would require every insurance policy, contract or plan issued or renewed on or after January 1, 2012 to provide coverage for communication access services for the deaf or hard of-hearing. This act would take effect upon passage. Reviewer recommends Beneficial

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. Communication access services. – (a) 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, 2012, shall provide coverage for communication access services for the deaf and hard-of-hearing patients or identified clients.

(b) For the purposes of this section:

(1) “Communication Access Services” means any effective communication access services recognized by either the Rehabilitation Act of 1973 or the Americans with Disabilities Act to guarantee full communication access between the patients or identified clients who are deaf and hard-of-hearing and doctors or other health care professionals to ensure that each party understands their health needs and treatments. Examples of communication access services are interpreters for the deaf, Communication Access Real Time (CART) service, remote video interpreting service for the deaf, remote CART service, etc.

(c) This section shall not apply to equipment purchased as part of communication access accommodations. Examples are TTYs , videophones, assistive listening devices, etc.

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. Communication access services. – (a) 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, 2012, shall provide coverage for communication access services for the deaf and hard-of-hearing patients or identified clients.

(b) For the purposes of this section:

(1) “Communication Access Services” means any effective communication access services recognized by either the Rehabilitation Act of 1973 or the Americans with Disabilities Act to guarantee full communication access between the patients or identified clients who are deaf and hard-of-hearing and doctors or other health care professionals to ensure that each party understands their health needs and treatments. Examples of communication access services are interpreters for the deaf, Communication Access Real Time (CART) service, remote video interpreting service for the deaf, remote CART service, etc.

(c) This section shall not apply to equipment purchased as part of communication access accommodations. Examples are TTYs , videophones, assistive listening devices, etc.

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

27-20-57. Communication access services. -- (a) 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, 2012, shall provide coverage for communication access services for the deaf and hard-of-hearing patients or identified clients.

(b) For the purposes of this section:

(1) “Communication Access Services” means any effective communication access services recognized by either the Rehabilitation Act of 1973 or the Americans with Disabilities Act to guarantee full communication access between the patients or identified clients who are deaf and hard-of-hearing and doctors or other health care professionals to ensure that each party understands their health needs and treatments. Examples of communication access services are interpreters for the deaf, Communication Access Real Time (CART) service, remote video interpreting service for the deaf, remote CART service, etc.

(c) This section shall not apply to equipment purchased as part of communication access accommodations. Examples are TTYs , videophones, assistive listening devices, etc.

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. Communication access services. -- (a) 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, 2012, shall provide coverage for communication access services for the deaf and hard-of-hearing patients or identified clients.

(b) For the purposes of this section:

(1) “Communication Access Services” means any effective communication access services recognized by either the Rehabilitation Act of 1973 or the Americans with Disabilities Act to guarantee full communication access between the patients or identified clients who are deaf and hard-of-hearing and doctors or other health care professionals to ensure that each party understands their health needs and treatments. Examples of communication access services are interpreters for the deaf, Communication Access Real Time (CART) service, remote video interpreting service for the deaf, remote CART service, etc.

(c) This section shall not apply to equipment purchased as part of communication access accommodations. Examples are TTYs , videophones, assistive listening devices, etc.

SECTION 5. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To find beneficial 11 S 0460 / H 5798 Acts Relating To Insurance RC/KH passed, Abstained SB,LD,BB
	S 0474 An Act Relating To Insurance -- Nonprofit Dental Service Corporations, Senator Miller, Senate Health & Human Services Cmte., held for further study. H 5425 Sub A An Act Relating To Insurance -- Nonprofit Dental Service Corporations, House Passed Sub A on 5/3/11. These acts would require dental plans to give participating dentists thirty (30) days notice of any changes in coverage or payment for dental services. This act would take effect upon passage. Reviewer recommends Beneficial

S 474

SECTION 1. Chapter 27-20.1 of the General Laws entitled "Nonprofit Dental Service Corporations" is hereby amended by adding thereto the following section:

27-20.1-20. Plan change notices. -- Every entity providing a nonprofit dental service plan as defined in this chapter shall notify all dentists providing services under a group or individual policy, contract or health benefit plan for coverage of dental services, in writing, of any changes to its rules and regulations, guidelines, policies or procedures concerning coverage of or payment for dental services. Said notice of changes in terms shall be mailed to the participating dentists, postage prepaid, return receipt requested, showing the changes in redline format and shall be provided to the participating dentists no later than thirty (30) days before the effective date of said changes.

SECTION 2. This act shall take effect upon passage.

H 5425 Sub A

SECTION 1. Chapter 27-20.1 of the General Laws entitled "Nonprofit Dental Service Corporations" is hereby amended by adding thereto the following section:

27-20.1-20. Plan change notices. -- Every entity providing a nonprofit dental service plan as defined in this chapter shall notify all dentists providing services under a group or individual policy, contract or health benefit plan for coverage of dental services, in writing, of any changes to its rules and regulations, guidelines, policies or procedures concerning coverage of or payment for dental services. Said notice of changes in terms shall be communicated to the participating dentists by the dental plan in the mail format chosen by the participating dentists, either U.S. mail or electronic mail format, showing the changes in redline format and shall be provided to the participating dentists no later than fifteen (15) days before the effective date of said changes.

SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	The Committee took no position on11 S 0474 An Act Relating To Insurance -- Nonprofit Dental Service Corporations & H 5425 Sub A An Act Relating To Insurance -- Nonprofit Dental Service Corporations
	Special Education Bills Recommended by Arthur Plitt
	11 H 6056 / S 0881 Acts Relating To Education - Children With Disabilities, Rep. Morrison, House Finance Cmte, referred to committee This act would provide a framework for the awarding of attorneys' fees associated with court proceedings governing the education of children with disabilities. This act would take effect upon passage. Reviewer recommends Beneficial if amended. These issues are already covered under existing law for attorney fees but the adding of expert witness fees are a reasonable addition to the cost of the case for a parent to make their case.

SECTION 1. Chapter 16-24 of the General Laws entitled "Children with Disabilities" is hereby amended by adding thereto the following section:

16-24-19. Costs to prevailing plaintiff in a special education matter in controversy. --

(a) Costs awarded to prevailing plaintiff.

(1) In any adjudicatory proceeding or court action in any matter governing the education of children with disabilities, the hearing officer or court of proper jurisdiction, shall require that a prevailing party, who is a parent of the child with a disability, be awarded reasonable attorney and expert witness fees, as part of the costs associated with bringing their action.

(2) In any action or proceeding brought in the court of proper jurisdiction, the court, in its discretion, may award reasonable attorneys' fees as part of the costs to a prevailing party who as a state or local education agency against the attorney of a parent, who files a complaint or subsequent cause of action that is frivolous, unreasonable, or without foundation, or against the attorney of a parent who continued to litigate after the litigation clearly became frivolous, unreasonable or without foundation.

(3) In any action or proceeding brought in the court of proper jurisdiction, the court, in its discretion, may award reasonable attorneys' fees as part of the costs to a prevailing party who is a state or local education agency against the attorney of a parent, or against the parent, if the parent's complaint or subsequent cause of action was presented for any improper purpose, such as to harass, to cause unnecessary delay, or to needlessly increase the cost of litigation.

(b) Determination of amount of attorney and expert fees. Awarded attorney and expert fees shall be based on rates prevailing in the community in which the action or proceeding arose for the kind and quality of services furnished. No bonus or multiplier may be used in calculating the fees awarded under this subsection.

(c) Prohibition of attorney and expert fees and related costs for certain services.

(1) Attorney and expert fees may not be awarded and related costs may not be reimbursed in any action or proceeding under this statute for services performed subsequent to the time of a

written offer of settlement to a parent if at any time more than ten (10) days before the proceeding begins;

(i) The offer is not accepted within ten (10) days; and

(ii) The court of proper jurisdiction or administrative hearing officer finds that the relief finally obtained by the parents is not more favorable to the parents than the offer of settlement.

(d) Exception to prohibition on attorney and expert fees and related costs. Notwithstanding subsection (c) of this section, an award of attorney and expert fees and related costs may be made to a parent who is the prevailing party and who was substantially justified in rejecting the settlement offer.

(e) Reduction of amount of attorney and/or expert fees. Except as provided in subsection (f) of this section, the administrative hearing officer or court of proper jurisdiction may reduce accordingly, the amount of the attorney and/or expert witness fees awarded, if the administrative hearing officer or court of proper jurisdiction finds that:

(1) The parent, during the course of the action or proceeding, unreasonably protracted the final resolution of the controversy;

(2) The amount of the attorney and/or expert fees otherwise authorized to be awarded unreasonably exceeds the hourly rate prevailing in the community for similar services by attorneys and/or expert witnesses of reasonably comparable skill reputation, and experience;

(3) The time spent and legal and expert witness services furnished were excessive considering the nature of the action or proceeding; or

(4) The attorney representing the parent did not provide to the school district the appropriate information in the due process complaint.

(f) Exception to reduction in amount of attorney and expert fees. The provisions of subsection (e) of this section do not apply in any action or proceeding if the administrative hearing officer or court of proper jurisdiction finds that the state or local agency unreasonably protracted the final resolution of the action or proceeding.

SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To find beneficial 11 H 6056 / S 0881 Acts Relating To Education - Children With Disabilities BI/AP passed Abstained LD, BR, RC

law graphic	Commission's Legislative Package		4:00
	Purpose/Goal: To review substitute and amended bills that the Commission/Legislation Committee has taken a position and determine whether to revise that position		
	Status of Commission Sponsored Bills		
	11 S 0301 Sub A An Act Relating To Human Services - Health Care Assistance For Working People With Disabilities		

SECTION 1. Sections 40-8.7-3, 40-8.7-7 and 40-8.7-9 of the General Laws in Chapter 40-8.7 entitled "Health Care Assistance for Working People With Disabilities" are hereby amended to read as follows:

40-8.7-3. Purpose. -- The purpose of the Medicaid buy-in program is to:

(1) Enable individuals with disabilities to enter and reenter the work force as soon as possible;

(2) Provide health care and ~~social~~ support services to individuals with disabilities that will enable those individuals to reduce their dependency on cash benefit programs;

(3) Allow individuals with disabilities the option to purchase Medicaid coverage that is necessary to enable such individuals to obtain and/or maintain employment; and

(4) Authorize the department of human services to amend the state plan for personal care services ~~limited to employment-related personal care services~~ for individuals with disabilities to continue their employment activity.

40-8.7-7. ~~Premiums~~ ~~and cost sharing~~ Premiums. -- (a) The department of human

services is authorized and directed to promulgate such rules, in consultation with the governor's commission on disabilities, to establish the monthly premium payments for employed individuals with disabilities who opt to participate directly in the Medicaid buy-in program. To participate in the Medicaid buy-in program, the employed individual with disabilities shall be required to make payment for coverage in accordance with a graduated monthly payment based on income or payment formula to be established by the department. ~~which shall count the individual's monthly unearned income in excess of the medically needy income limit [MNIL]and shall count a portion of their earned income on a sliding scale basis, in accordance with rules to be established by the department;~~

(b) The department is further authorized and directed to promulgate such rules to encourage businesses, especially small businesses to hire individuals with disabilities, and to allow employed individuals with disabilities who have access to employer-based health insurance and who are determined eligible by the department pursuant to this chapter, to determine the optimal health insurance coverage in consultation with the employer and the Medicaid agency. The department of human services shall require any individual who receives care through a Medicaid buy-in program established pursuant to this chapter on the effective date of the applicable regulations adopted in accordance with section 40-8.7-9 to enroll in an employer-based health insurance plan at the individual's eligibility redetermination date or at an earlier date determined by the department, provided that doing so meets the criteria established in the applicable sections of Title XIX, 42 U.S.C. section 1396 et seq., for obtaining federal matching funds and the department has determined that the individual's and/or the family's enrollment in the employer-based health insurance plan is cost-effective and has determined that the health insurance plan meets the criteria in subsection (d). The insurer shall accept the enrollment of the individual and/or the family in the employer-based health insurance plan without regard to any enrollment season restrictions.

40-8.7-9. Regulations and commencement of program. – (a) The department of human services shall promulgate the rules or regulations necessary to implement the provisions of this act by ~~January 1, 2005~~ September 30, 2011, and enrollment of individuals with disabilities in the Medicaid buy-in program shall commence on or before January 1, 2012 ~~January 1, 2006~~.

(b) The department shall report to the governor and the general assembly on or before March 31, 2013 and annually thereafter, with regard to the effectiveness of this act in achieving its purpose, which report shall include, but not be limited to:

(1) The number of applications for the Medicaid buy-in program established pursuant to this chapter, the number of beneficiaries approved who are new to Medicaid, the number of beneficiaries who were in another Medicaid eligibility category just prior to the Medicaid buy-in program established pursuant to this chapter, and of beneficiaries who have employer based health insurance coverage;

(2) Demographics including: age, sex, employment supports provided and primary disabling condition, as permissible under the Health Insurance Portability and Accountability Act of 1996 (HIPPA) privacy and security rules;

(3) Prior and current participation in other public programs including Medicare, Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), including the 1619(b) provision;

(4) Statistics regarding the number of beneficiaries employed and the average wage of those beneficiaries prior to and post Medicaid buy-in program established pursuant to this chapter eligibility;

(5) Statistics regarding the amounts of premiums collected;

(6) Medicaid claims data including pre-buy-in, while on the buy-in, and if disenrolled, after buy-in; and

(7) Findings and recommendations with regard to any improvements, amendments, or changes that should be considered to make the act more effective in achieving its purposes or which may be necessary in order to encourage more Medicaid beneficiaries to seek and retain employment.

SECTION 2. This act shall serve as a Joint Resolution required pursuant to Rhode Island

General Laws section 42-12.4-1, et seq.

WHEREAS, The General Assembly enacted Chapter 12.4 of Title 42 entitled "The Rhode Island Medicaid Reform Act of 2008"; and

WHEREAS, Rhode Island General Law section 42-12.4-7 provides that any change that requires implementation of a rule or regulation or modification of a rule or regulation in existence prior to the implementation of the global consumer choice section 1115 demonstration ("the demonstration") shall require prior approval of the general assembly; and further provides that any category II change or category III change as defined in the demonstration shall also require prior approval to the general assembly; and

WHEREAS, Rhode Island General Law section 42-7.2-5 states that the secretary of the office of health and human services is responsible for the "review and coordination of any Global Consumer Choice Compact Waiver requests and renewals as well as any initiatives and proposals requiring amendments to the Medicaid state plan or category I or II changes" as described in the demonstration with "the potential to affect the scope, amount, or duration of publicly-funded health care services, provider payments or reimbursements, or access to or the availability of benefits and services provided by Rhode Island general and public laws"; and

WHEREAS, In pursuit of a more cost-effective consumer choice system of care that is fiscally sound and sustainable, the Secretary requests that the following proposal to amend the demonstration be approved by the general assembly:

Modify the Medicaid buy-in program established pursuant to this chapter. The department of human services proposes refining the determination of eligibility and premiums of workers with disabilities enrolled in the Medicaid buy-in program; Now, therefore be it

RESOLVED, That the general assembly hereby approves the changes set forth in the proposal listed above to amend the demonstration; and be it further

RESOLVED, That the secretary of the office of health and human services is authorized to pursue and implement any such necessary waiver amendments, category II or category III changes, state plan amendments and/or changes to the applicable department's rules, regulations and procedures approved herein and as authorized by section 42-12.4-7.

SECTION 3. This act shall take effect on July 1, 2011.

Refocusing of the Disability Business Enterprise Program and Creation of a Habilitation Procurement Program

A. The Commission's Disability Business Enterprise Program will focus its (scarce) resources solely on small businesses owned and operated by persons with disabilities.
a. Purchasing will amend the state purchasing regulations to provide a percentage "credit" for comparing DBEs bid price to the "lowest responsible bidder" when awarding contracts.
b. It will transfer responsibility for rehabilitation facilities to the Department of Administration's Habilitation Procurement Program.
c. It will no longer assist for profit entities, whose workforce is at least 60% persons with disabilities (we have never been able to identify any).
d. The DBE Committee membership will no longer include three representatives of rehabilitation facilities. Its new membership will be:
i. The Chief Purchasing Officer (or designee);
ii. The Director of the Department of Behavioral Healthcare, Development Disabilities, and Hospitals(or designee); and
iii. The Director of the Department of Human Services (or designee);
iv. Three persons with a disability (appointed by the Commission Chairperson).
e. The Commission chairperson will designate one of the members to chair the DBE Committee. The DBE Committee will elect its vice chairperson.

B. The Department of Administration/Purchasing will be responsible for a new Habilitation Procurement Program.

	a. A newly created Habilitation Procurement Board will oversee this program. The 5 member board will consist of: i. The Chief Purchasing Officer (or designee); ii. The Director of the Department of Behavioral Healthcare, Development Disabilities, and Hospitals(or designee); iii. The Director of the Department of Human Services (or designee); iv. A person with a disability (appointed by the Governor); and v. A representative of the business community (appointed by the Governor). b. The board will: i. Identify goods and services that are available from habilitation facilities; ii. Help to ensure that the goods and services are provided at reasonable quality and delivery levels; iii. Make recommendations to the Chief Purchasing Officer (who is the Director of Administration) on: a. prices for goods and services, b. contract awards and c. a preferred procurement contract list of goods and services that habilitation facilities are able to provide at a fair market value (these would not be subject to competitive bidding); and iv. (4) Create advisory committees to assist it (research to determine fair market value, etc.) c. The current legal priority for awarding contracts to blind business enterprises (Coffee Plus prepared food service in state and federal buildings owned and rented facilities) and the "right of first refusal" for Correctional Industries will remain and not be affected by the preferred procurement contract lists of goods and services.
	11 S 0772 Sub A / H 5969 Acts Relating To Public Property And Works This act would create a vocational rehabilitation purchasing program to provide employment opportunities, and to enhance the independence of people with disabilities, by having departments of the state government as well as its political subdivisions purchase commodities and services from certified vocational rehabilitation programs. This act would take effect upon passage. The Substitute as Amended would create a habilitation procurement program to provide employment opportunities, and to enhance the independence of people with disabilities, by having departments of the state government as well as its political subdivisions purchase commodities and services from certified habilitation facilities. A five (5) member Habilitation Procurement Board would oversee the program and recommend to the chief purchasing officer: prices for goods and services; preferred procurement contract list of goods and services; and contract awards. It would not affect the existing blind business enterprise program or the prison industries program. This act would take effect upon passage.

SECTION 1. Title 37 of the General Laws entitled "PUBLIC PROPERTY AND WORKS" is hereby amended by adding thereto the following chapter:

CHAPTER 2.4

HABILITATION PROCUREMENT PROGRAM

37-2.4-1. Definitions. -- The words defined in this section have the meanings set forth below whenever they appear in this chapter, unless context in which they are used clearly requires a different meaning or a different definition as prescribed for a particular section, group of sections, or provision:

(1) "Board" means the habilitation procurement board created under this section;

(2) "Habilitation facility" means a program that is operated primarily for the purpose of the employment and training of persons with a disability by a government agency or a qualified

organization licensed by the State of Rhode Island providing vocational rehabilitation to support people with disabilities, and:

(i) Maintains an employment ratio of at least sixty percent (60%) of the program employees under the procurement contract in question have severe disabilities;

(ii) Complies with any applicable occupational health and safety standards prescribed by the United States department of labor or is a supported employment program approved by the State of Rhode Island office of rehabilitation services;

(iii) Has its principal place of business in Rhode Island;

(iv) Produces any goods provided under this section in Rhode Island; and

(v) The services provided, in accordance with the provisions of this chapter, are provided by individuals with the majority being domiciled residents of the State of Rhode Island.

(3) "Person with a disability" means any individual who has a severe physical or mental impairment which constitutes a substantial barrier to employment, as certified by the department of human services or the department of behavioral health care, developmental disabilities and hospitals.

37-2.4-2. Habilitation Procurement Board. -- (a) There is created the habilitation procurement board within the division of purchasing and general services of the department of administration. The board shall be composed of the following five (5) members:

(1) The chief purchasing officer as defined in subdivision 37-2-7(3) or his/her designee;

(2) The director of the department of behavioral healthcare, developmental disabilities and hospitals created under title 40.1 or his/her designee;

(3) The director of the department of human services created under title 40 or his/her designee;

(4) A person with a disability who shall be appointed to a three (3) year term by the governor with the advice and consent of the senate;

(5) A representative of the private business community who shall be appointed to a three (3) year term by the governor with the advice and consent of the senate;

(b) The board shall meet, as needed, to facilitate the procurement of goods and services from habilitation facilities by a public procurement unit under this chapter by:

(1) Identifying goods and services that are available from habilitation facilities according to the requirements under subsections 37-2.4-4(a),(b) and (c);

(2) Helping to ensure that the goods and services are provided at reasonable quality and delivery levels;

(3) Recommending to the chief purchasing officer prices in accordance with subdivision 37-2.4-4(a)(3) for goods and services that are identified in subdivision (b)(1) of this section;

(4) Developing, maintaining, and recommending to the chief purchasing officer a preferred procurement contract list of goods and services identified and priced under subdivisions (b)(1) and (2) of this section;

(5) Reviewing bids received by a habilitation facility and making a recommendation of contract award to the chief purchasing officer, the awarding authority that will issue the final purchase order and renew specified contracts for set contract times, without competitive bidding, for the purchase of goods and services as provided for in section 37-2.4-4; and

(6) Collecting and reporting program data.

(c) The provisions of subsection 37-2.4-2(b) and subdivision 37-2.4-4(1) are an exception to the procurement provisions under this chapter.

(d) If two (2) or more certified habilitation facilities bid on the solicitation of services, the purchasing agent, as defined in subdivision 37-2-7(19), of the state agency shall award a contract to one of the certified habilitation facility based on a competitive price determination.

(e) The board is authorized to create advisory committees to assist it in the performance of the board's responsibilities.

37-2.4-4. Purchasing. -- (a) This section shall not apply with respect to the procurement of any commodity which is available for procurement from an entity established pursuant to chapter 13-7 ("Prisoner Made Goods") or chapter 40-9 ("Services for People who are Blind or

3-13 Visually Impaired") of the general laws and as provided under subsection (e) of this section and
3-14 notwithstanding any provision in this chapter or the general or public laws to the contrary, any
3-15 state agency shall purchase goods and services produced by a habilitation facility using the
3-16 preferred procurement contract list approved pursuant to subdivision 37-2.4-2(b)(3) providing
3-17 that:
3-18 (1) The goods or services offered for sale by a habilitation facility reasonably conform to
3-19 the needs and specifications of the public procurement unit;
3-20 (2) The habilitation facility can supply the goods or services within a reasonable time;
3-21 and
3-22 (3) The price of the goods or services is reasonably competitive with the cost of
3-23 procuring the goods or services from another source.
3-24 (b) If there is no price agreement in place that a state agency plans to use, a price can be
3-25 negotiated between the habilitation facility that can meet the specifications of the board. The
3-26 board will make a recommendation to the director of administration.
3-27 (c) Existing multi-year contracts can continue through their term. New multi-year
3-28 requirements for services must follow the process for purchasing from the habilitation facility.
3-29 (d) Each habilitation facility:
3-30 (1) May submit a price for a product or service to the board at any time and not
3-31 necessarily in response to a request for bids; and
3-32 (2) Shall certify on any bid it submits to the board or to a public procurement unit under
3-33 this section that is claiming a preference under this section.
3-34 (e) During a fiscal year, the requirement for a public procurement unit to purchase goods
4-1 and services produced by a habilitation facility under the preferred procurement list under
4-2 subsections 37-2.4-4(a), (b) and (c) does not apply if the division of purchasing and general
4-3 services determines that the total amount of procurement contracts with habilitation facilities has
4-4 reached three million dollars ($3,000,000) for that fiscal year. The total amount of procurement
4-5 contracts can be changed with a recommendation by the board and approval from the director of
4-6 administration.
4-7 (f) Any state agency that has awarded a solicitation for goods and services to a certified
4-8 habilitation facility shall, before the expiration of the term of the contract, renegotiate a fair and
4-9 reasonable price for the services with the certified habilitation facility that has performed the
4-10 services for the state agency. The state agency is not permitted to solicit new bids for the product
4-11 or service unless one of the following occurs:
4-12 (1) The certified habilitation facility no longer wishes to perform the services for the state
4-13 agency;
4-14 (2) The state agency decides to perform the services internally and hires employees who
4-15 will be employees of the state to perform the services;
4-16 (3) The state agency no longer needs the service that was provided by the habilitation
4-17 facility;
4-18 (4) The habilitation facility has not met the requirements for the services offered; or
4-19 (5) The habilitation facility and the state agency are unable to agree to fair and reasonable
4-20 terms of a new contract for the habilitation facility's services during the negotiation process.
4-21 (g) Any state agency that has awarded a solicitation for services to a certified habilitation
4-22 facility shall report to the board regarding the progress of the solicitation once a year.
4-23 SECTION 2. This act shall take effect upon passage.

	11 S 0352 Sub A / H 5330 Acts Relating To Public Property And Works - Disability Business Enterprises This act would authorize the disability business enterprise committee to determine the fair market price of commodities and services which are contained on the procurement list and which are offered for sale to the government by any certified rehabilitation facility or small disadvantaged businesses owned and controlled by persons with disabilities. This act would also require the department of administration to issue regulations for awarding contracts to small disadvantaged businesses owned and controlled by persons with

	disabilities in the procurement of goods, services, construction projects, or contracts funded in whole or in part by state funds on or before September 30, 2011. The Amendment requires the regulations to take effect on or before January 1, 2012. The Substitute

Laws in Chapter 37-2.2 entitled "Disability Business Enterprises" are hereby amended to read as follows:

37-2.2-1. Short title and purpose. – This chapter shall be known as the "Disability Business Enterprises Act." The purpose of this chapter is to carry out the state's policy of supporting the fullest possible participation of small disadvantaged businesses owned and controlled by persons with disabilities ~~or where sixty percent (60%) of the work hours or direct labor is performed by employees who are persons with disabilities, or non-profit rehabilitation facilities~~ in state funded and state directed public construction, public projects, and in state purchases of goods and services. This includes assisting disadvantaged disability businesses ~~and non-profit rehabilitation facilities~~ throughout the life of contracts in which they participate.

37-2.2-2. Definitions. -- As used in this chapter, the following words and phrases shall have the following meanings unless the context shall indicate another or different meaning or intent:

(1) "Persons with disabilities" or "person with a disability" shall mean any individual who has a physical or mental impairment which constitutes a substantial barrier to employment as certified by the department of human services or the department of ~~mental health, retardation~~ behavioral healthcare, developmental disabilities, and hospitals.

~~(2) "Products" shall mean any goods or merchandise provided by persons with disabilities if not less than sixty percent (60%) of the work hours or direct labor required for the products are performed by persons with disabilities.~~

~~(3) "Rehabilitation facility" or "rehabilitation facilities" shall mean a facility which is operated for the primary purpose of providing vocational rehabilitation services to and gainful employment for persons with disabilities. The rehabilitation services, listed below, may be provided directly or by the facility's parent corporation. The facility must provide singly or in combination one or more of the following services for persons with disabilities:~~

~~(i) Comprehensive rehabilitation services which shall include under one management: medical, psychological, social, and vocational services;~~

~~(ii) Testing, fitting, or training in the use of prosthetic and orthotic services;~~

~~(iii) Pre-vocational evaluation or recreational therapy;~~

~~(iv) Physical and occupational therapy;~~

~~(v) Speech and hearing services;~~

~~(vi) Psychological and social services;~~

~~(vii) Evaluation;~~

~~(viii) Personal and work adjustment;~~

~~(ix) Vocational training in combination with other rehabilitation services;~~

~~(x) Evaluation or control of special disabilities; and~~

~~(xi) Transitional or long-term employment for persons who have severe disabilities and cannot be readily absorbed into the competitive labor market.~~

~~(4) Services" shall mean any services provided by persons with disabilities if not less than sixty percent (60%) of the work hours or direct labor required for the services are performed by persons with disabilities.~~

~~(5)~~ (2)"Small disadvantaged businesses owned and controlled by persons with disabilities " shall mean small business concern, which is at least fifty-one percent (51%) owned by one or more person(s) with disabilities or, in the case of a publicly owned business, at least fifty-one percent (51%) of the stock of which is owned by one or more disabled person, whose management and daily business operations are controlled by one or more person(s) with disabilities, and have fifty or fewer employees.

~~(6)~~ (3)"A physical or mental impairment" shall mean any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine; or any mental psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

~~(7) "Vocational rehabilitation services" shall mean any goods and services including diagnostic and related services necessary to render a person with a disability fit to engage in a gainful occupation and services to the families of persons with disabilities when those services will contribute substantially to the rehabilitation of those individuals.~~

~~(8) Direct labor" shall mean and include all work required for preparation, processing, and packing of a commodity, or work directly relating to the performance of a service, but not supervision, administration, inspection or shipping.~~

~~37-2.2-3. Preference for products and services produced by persons with disabilities.~~

~~(a) Whenever any products made, manufactured by, or services provided by nonprofit rehabilitation facilities, or in profit making facilities where sixty percent (60%) of the work hours or direct labor is performed by employees who are disabled, meet the requirements of any department, institution, or agency supported, in whole or in part, by the state as to quantity, quality, and price, those products shall have preference over products or services from other providers.~~

~~(b) All departments, institutions, and agencies supported, in whole or in part, by the state shall purchase articles made or manufactured and services provided by persons with disabilities. Any political subdivision of the state may purchase those articles and services directly from those agencies. If any government entity intends to procure any commodity or service on the procurement list, that entity shall, in accordance with rules and regulations of the disability business enterprise committee, procure such commodity or service, at the price established by the committee, from any certified rehabilitation facility or small disadvantaged businesses owned and controlled by persons with disabilities, if the commodity or service is available within the period required by that government entity, except that this section shall not apply with respect to the procurement of any commodity which is available for procurement from an industry established pursuant to chapter 13-7 ("Prisoner Made Goods") or chapter 40-9 ("Services for People who are Blind or Visually Impaired") of the general laws.~~

~~(c) A procurement list describing the styles, designs, sizes, and varieties of articles made by persons with disabilities and describing all available services and subcontract work which can be provided by those persons shall be prepared by the governor's commission on disabilities', disability business enterprise committee in cooperation with the state office of rehabilitation services. The governor's commission on disabilities shall cooperate with various facilities for persons with disabilities by submitting necessary information concerning the products and services to the state purchasing agent.~~

37-2.2-3.1. Policy and applicability. -- It is the policy of the state of Rhode Island that small disadvantaged disability businesses shall have the maximum opportunity to participate in the performance of procurements and projects as outlined in this chapter. This chapter shall apply to any and all state purchasing, including, but not limited to, the procurement of goods and services, construction projects, or contracts funded in whole or in part by state funds, or funds which, in accordance with a federal grant or otherwise, the state expends or administers or in which the state is a signatory to the construction contract.

The director of administration, in consultation with the governor's commission on disabilities, is authorized and directed to establish rules and ~~regulations~~ regulation formulas for awarding contracts to small disadvantaged businesses owned and controlled by persons with disabilities in the procurement of goods, services, construction projects, or contracts funded in whole or in part by state funds, in accordance with section 37-2-9(b)(14) on or before January 1, 2012.

37-2.2-4. Disability business enterprise committee -- Membership -- Duties. -- (a) There is hereby established within the governor's commission on disabilities a committee, consisting of ~~nine (9)~~ seven **(7)** persons, to be known as the disability business enterprise committee.

(b) The committee, shall consist of the director of the department of human services or his or her designee; the director of the department of ~~mental health, retardation~~ behavioral healthcare, developmental disabilities, and hospitals or his or her designee; the director of the economic development corporation or his or her designee; the ~~state~~ chief purchasing officer ~~agent~~ or his or her designee; and ~~two (2)~~ three (3) persons with disabilities ~~and three (3) representatives of~~

~~rehabilitation facilities in the state of Rhode Island~~ appointed by the chairperson of the governor's commission on disabilities. All members of the committee shall serve without compensation. Of the number appointed originally under this chapter, one-third (1/3) shall be appointed for a term of one year; one-third (1/3) shall be appointed for a term of two (2) years; and one-third (1/3) shall be appointed for a term of three (3) years. Thereafter, vacancies created by expiration of terms shall be filled with appointments for terms of three (3) years. Members whose terms expire may be reappointed to succeed themselves. The chairperson of the governor's commission on disabilities or his or her designee shall serve as chairperson of the committee. The members of the committee shall elect a vice chairperson and other officers as are necessary from amongst themselves annually.

(c) The governor's commission on disabilities shall promulgate such rules and regulations, in accordance with the Administrative Procedures Act, chapter 35 of title 42, as are necessary and proper to ensure responsible management, operation, oversight of the committee, and ensure that all facilities, ~~both nonprofit and profit-making~~, referred to in sections 37-2.2-3 and 37-2.2-3.1 meet all applicable government regulations and standards, including those of the United States department of labor, the state department of human services, and the chief purchasing officer with regard to developing a program which involves small disadvantaged businesses as contractors, section 37-2-9(b)(14).

(d) The committee shall establish a procedure to certify small disadvantaged disability businesses ~~and rehabilitation facilities~~ that qualify under their regulation for a preference under section 37-2.2-3 or 37-2.2-3.1 and submit a list of the certified small disadvantaged disability businesses ~~and rehabilitation facilities~~ and the products and services provided by them to the chief purchasing officer at least once a year. The chief purchasing officer shall utilize that procurement list in the program which involves small disadvantaged businesses as contractors established by section 37-2-9(b)(14).

~~(e) The committee shall determine the fair market price of commodities and services which are contained on the procurement list and which are offered for sale to the government by any certified rehabilitation facility or small disadvantaged businesses owned and controlled by persons with disabilities. The committee shall also revise from time to time in accordance with changing market conditions its price determinations with respect to such commodities and services. The committee may make rules and regulations regarding: (1) Specifications for commodities and services on the procurement list; (2) The time of their delivery; and (3) Such other matters as may be necessary to carry out the purposes herein.~~

SECTION 2. This act shall take effect on July 1, 2011.

Status of GCD's Legislative Package List on 5/6/2011

Commission Supports

Passed the Senate and Transferred

House Municipal Government Committee

11 S 0207 AN ACT RELATING TO MOTOR AND OTHER VEHICLES - PARKING FACILITIES AND PRIVILEGES

Sen. Algiere Requested by the Governor's Commission on Disabilities

Sent Senate Letter 3/1/2011Senate Testimony 3/31/2011

Recommend Passage

House Calendar

5/11/2011 # 001

11 H 5284 AN ACT RELATING TO HEALTH AND SAFETY - STATE BUILDING CODE

Rep. McCauley Requested by the Governor's Commission on Disabilities

Sent House Letter 3/22/2011 House Testimony 3/23/2011

Notes: Sent to H. HEW on 3/1/11. Bill transferred to H. Corp. J.C. testified on 3/23.

Senate Calendar

5/11/2011 # 005

11 S 0268 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - STATE COORDINATING COMMITTEE ON

DISABILITY RIGHTS

Sen. Cote Requested by the Governor's Commission on Disabilities

Sent Senate Letter 3/1/2011 Senate Testimony 3/9/2011

Senate Desk

11 S 0206 AN ACT RELATING TO HEALTH AND SAFETY - STATE BUILDING CODE

Sen. Fogarty Requested by the Governor's Commission on Disabilities

Sent Senate Letter 3/1/2011 Senate Testimony 3/31/2011

Notes: JC testified to S. Muni on 3/31/2011

Scheduled for hearing and/or consideration

House Finance Committee

5/11/2011 @ 1 in rm 35

11 H 5479 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - RHODE ISLAND HOUSING AND MORTGAGE FINANCE CORPORATION

Rep. Kennedy Requested by the Governor's Commission on Disabilities

Sent House Letter3/2/2011

11 H 5789 AN ACT RELATING TO PUBLIC UTILITIES AND CARRIERS - TRANSPORTATION FUND

Rep. O'Grady

Sent House Letter4/6/2011

Notes: Executive Committee voted to change position on 4/4/11. Original letter sent to H. Finance on 3/22/11. Revised lettersent to H. Finance on 4/7/11.

5/12/2011 @ 1 in rm 35

11 H 5613 AN ACT RELATING TO CRIMINAL OFFENSES -- ADULT CRISIS INTERVENTION AND PROTECTIVE SERVICES

Rep. Naughton Requested by the Governor's Commission on Disabilities

Sent House Letter3/4/2011

Held for Further Study, Continued, or Heard

House Judiciary Committee

11 H 5665 AN ACT RELATING TO HEALTH AND SAFETY -- CRIMINAL BACKGROUND CHECKS

Rep. Marcello Requested by the Governor's Commission on Disabilities

Sent House Letter 3/22/2011 House Testimony 3/23/2011

Notes: B.C. Testified on 3/23, spoke to AG's Office, Working on sub A with DDC, PARI, ACLU

House Municipal Government Committee

11 H 5300 AN ACT RELATING TO MOTOR AND OTHER VEHICLES - PARKING FACILITIES AND PRIVILEGES

Rep. Jacquard Requested by Governor's Commission on Disabilities

Sent House Letter 3/3/2011 House Testimony 3/3/2011

Notes: BI testified to H Muni on 3/3/11

11 S 0148 AN ACT RELATING TO PUBLIC UTILITIES AND CARRIERS - TRANSPORTATION FUND

Sen. DiPalma

Sent Senate Letter 4/6/2011 Senate Testimony 4/7/2011

Notes: Executive Cmte voted on 4/4/2011 to change position. Original letter sent to S. Finance on 3/22/2011. Revised testimony presented to S. Finance on 4/7/11.

Senate Health and Human Services Committee

11 S 0304 AN ACT RELATING TO CRIMINAL OFFENSES -- ADULT CRISIS INTERVENTION AND PROTECTIVE SERVICES Sen. McCaffrey Requested by the Governor's Commission on Disabilities

Sent Senate Letter 3/1/2011 Senate Testimony 4/13/2011

Senate Judiciary Committee

11 S 0693 AN ACT RELATING TO HEALTH AND SAFETY -- CRIMINAL BACKGROUND CHECKS

Sen. Goodwin Requested by the Governor's Commission on Disabilities

Sent Senate Letter 3/22/2011 Senate Testimony 3/24/2011

Notes: BC testified on 3/24. AG wants to incorporate **11 S 0693** into their overhaul of the entire system. Working on sub A with DDC, PARI, ACLU

Referred to Committee

House Finance Committee

11 H 5913 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- RHODE ISLAND HOUSING RESOURCES

ACT OF 1998
Rep. Slater
Sent House Letter 3/22/2011

Senate Finance Committee

11 S 0356 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - RHODE ISLAND HOUSING AND MORTGAGE FINANCE CORPORATION
Sen. Tassoni Requested by the Governor's Commission on Disabilities
Senate Letter 3/1/2011

11 S 0571 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- RHODE ISLAND HOUSING RESOURCES ACT OF 1998
Sen. Pichardo
Sent Senate Letter 3/22/2011

Commission Supports as amended

Recommend Passage

Senate Calendar

5/11/2011 # 006

11 S 0301 Sub A AN ACT RELATING TO HUMAN SERVICES - HEALTH CARE ASSISTANCE FOR WORKING PEOPLE WITH DISABILITIES
Sen. Felag By Governors Commission on Disabilities
Sent Senate Letter 4/6/2011 Senate Testimony 4/13/2011
Notes:BC spoke with Sen. Felag on 4/7. Met with Paul Choquette, Leo Canuel & TF on 4/8 on sub A. On 4/11 Leg. Cmte voted to recommend the Commission support H 5588 if amended to include the global waiver authorization language in S 301/H 5618. Committee asked the Commission to withdraw support from S 301 & H 5618. On 4/15/11 met with DHS-Medicaid, PARI director and GCD Chair and drafted sub A/3. Commission voted on 4/18/11 to support if amended to properly place "in consultation with GCD" regarding regulations. On 4/19/11 talked to DHS-Medicaid, they agreed to move placement and reinsert "sliding scale" premiums.

11 S 0772 Sub A as Amended AN ACT RELATING TO PUBLIC PROPERTY AND WORKS
Sen. Perry Requested by the Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals
Sent Senate Letter 4/12/2011 Senate Testimony 4/13/2011
Notes: Senate Policy Office 4/13/11 meeting with DOA, ORS, BHDDH compromise on S 772 and S 352 As Amended. On 4/18/11 the Commission voted to support if amended to the Policy Office compromise S 052/ H 5330, S 0772/H 5969.

Commission Supports if amended

Recommitted

Senate Corporations Committee

11 S 0352 As Amended AN ACT RELATING TO PUBLIC PROPERTY AND WORKS - DISABILITY BUSINESS ENTERPRISES
Sen. Lanzi Requested by the Governor's Commission on Disabilities
Sent Senate Letter 3/1/2011 Senate Testimony3/24/2011
Notes: Leg. Cmte. voted to accept the DoA request for a 3 month delay in issuing the regulations. Senate Policy Office 4/13/11 meeting with DOA, ORS, BHDDH compromise on S 772 and S 352 As Amended. On 4/18/11 the Commission voted to support if amended to the Policy Office compromise S 052/ H 5330, S 0772/H 5969.

Scheduled for hearing and/or consideration

House Finance Committee

5/12/2011 @ 1 in rm 35

11 H 5618 AN ACT RELATING TO HUMAN SERVICES - HEALTH CARE ASSISTANCE FOR WORKING PEOPLE WITH DISABILITIES
Rep. Naughton Requested by the Governor's Commission on Disabilities
Sent House Letter3/4/2011
Notes: On 4/11 Leg. Cmte voted to recommend the Commission support H 5588 if amended to include the global waiver authorization language in S 301/H 5618. Committee asked the Commission to withdraw support from S 301 & H 5618. On 4/15/11 met with DHS-Medicaid, PARI director and GCD Chair and drafted sub A/3. Commission voted on 4/18/11 to support if amended to properly place "in consultation with GCD" regarding regulations. On 4/19/11 talked to DHS-Medicaid, they agreed to move placement and reinsert "sliding scale" premiums.

Held for Further Study, Continued, or Heard

House Finance Committee

11 H 5330 AN ACT RELATING TO PUBLIC PROPERTY AND WORKS - DISABILITY BUSINESS ENTERPRISES

Rep. Walsh Requested by the Governor's Commission on Disabilities

Sent House Letter3/1/2011 House Testimony 3/2/2011

Notes: TT testified to Ho Fin on 3/2. Sent Reps. Walsh & Naughton draft sub A to replace MHRH with BHDDH 3-3-11. Senate Policy Office 4/13/11 meeting with DOA, ORS, BHDDH compromise on S 772 and S 352 As Amended. On 4/18/11 the Commission voted to support if amended to the Policy Office compromise S 052/ H 5330, S 0772/H 5969.

11 H 5894 Art. 10 Governor's Amendment AN ARTICLE RELATING TO THE DEPARTMENT OF EDUCATION

Rep. Melo Requested by the Governor

Sent House Letter 4/5/2011Sent Senate Letter4/5/2011Senate Testimony 4/5/2011

Notes: Executive Committee voted 4/4/11.

11 H 5894 Art. 11 AN ARTICLE RELATING TO THE CHILDREN'S HEALTH ACCOUNT Rep. Melo Requested by the Governor

Sent House Letter4/5/2011Sent Senate Letter4/5/2011 Senate Testimony 4/5/2011

Notes: Executive Committee voted 4/4/11.

11 H 5894 Art. 22 AN ARTICLE RELATING TO REGISTRATION FEES Rep. Melo Requested by the Governor

Sent House Letter 4/5/2011Sent Senate Letter 4/5/2011

Notes: Executive Committee voted on 4/4/11.

11 H 5894 Art. 31 AN ARTICLE RELATING TO HUMAN SERVICES--ABUSED AND NEGLECTED CHILDREN

Rep. Melo Requested by the Governor

Sent House Letter 4/6/2011Sent Senate Letter 4/5/2011 Senate Testimony 4/7/2011

Notes: Executive Committee voted on 4/4/11.

Referred to Committee

House Finance Committee

11 H 5969 AN ACT RELATING TO PUBLIC PROPERTY AND WORKS

Rep. Keable Requested by the Department of Behavioral Healthcare, Development Disabilities, and Hospitals

Sent House Letter4/12/2011

Notes: Senate Policy Office 4/13/11 meeting with DOA, ORS, BHDDH compromise on S 772 and S 352 As Amended. On 4/18/11 the Commission voted to support if amended to the Policy Office compromise S 052/ H 5330, S 0772/H 5969.

Commission Opposes

Held for Further Study, Continued, or Heard

House Finance Committee

11 H 5894 Art. 16 Governor's Amendment AN ARTICLE RELATING TO THE MEDICAID REFORM ACT

Rep. Melo Requested by the Governor

Sent House Letter4/5/2011Sent Senate Letter4/5/2011 House Testimony Senate Testimony 4/5/2011

Notes: Executive Committee voted on 4/4/11 to oppose unless amended. GCD voted on 4/18/11 to oppose.

11 H 5894 Art. 28 AN ARTICLE RELATING TO THE RHODE ISLAND VETERANS' HOME

Rep. Melo Requested by the Governor

Sent House Letter4/5/2011Sent Senate Letter4/5/2011 House Testimony Senate Testimony 4/7/2011

Notes: Executive Committee voted on 4/4/11.

Scheduled for hearing and/or consideration

Senate Education Committee

5/5/2011

11 S 0432 AN ACT RELATING TO EDUCATION - BOARD OF REGENTS

Sen. Algiere

Sent Senate Letter 5/4/2011 Senate Testimony 5/4/2011

Notes: Reviewer finds this act harmful. On 4/11/11 the Legislation Committee recommended the Commission oppose.

Commission Opposes unless amended

Held for Further Study, Continued, or Heard

House Finance Committee

11 H 5894 Art. 27 Governor's Amendment AN ARTICLE RELATING TO PHARMACEUTICAL ASSISTANCE TO THE ELDERLY

Rep. Melo Requested by the Governor

Sent House Letter 4/5/2011 Sent Senate Letter4/5/2011 Senate Testimony 4/7/2011
Notes: Executive Committee voted on 4/4/11.

Legislation Committee finds these bills Beneficial

Resolution Adopted

House Resolution 2011 # 171 Effective Date: 3 /30/2011

11 H 5402 HOUSE RESOLUTION REINSTATING THE LIFE AND EXTENDING THE REPORTING AND EXPIRATION DATES FOR THE SPECIAL LEGISLATIVE COMMISSION TO STUDY AND ESTABLISH AN OLMSTEAD DECISION TASK FORCE IN THE STATE OF RHODE ISLAND Rep. Naughton

Sent House Letter3/22/2011

Passed and Transferred

House Labor Committee

11 S 0236 As Amended AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES Sen. Ciccone

Sent Senate Letter 3/16/2011

House Municipal Government Committee

11 S 0539 Sub A as Amended AN ACT RELATING TO HUMAN SERVICES - SUPPORT OF HOMELESS Sen. DeVall

Sent Senate Letter 4/12/2011

Notes: Reviewer finds this act beneficial, Although an EO has been signed by the Gov. The Comm. and the Homeless Coalition are in favor of passing legislation. On 4/11/11 the Legislation Committee recommended Commission support. On 4/18/11 Commission took no action.

Recommend Passage

Senate Calendar

5/11/2011 # 002

11 S 0060 Sub A AN ACT RELATING TO HEALTH AND SAFETY -- WOMEN'S CARDIOVASCULAR SCREENING AND RISK REDUCTION PILOT PROGRAM Sen. Crowley

Sent Senate Letter 3/15/2011

Scheduled for hearing and/or consideration

House Finance Committee

5/11/2011 @ Rise in rm 35

11 H 5324 AN ACT RELATING TO PUBLIC UTILITIES AND CARRIERS - PUBLIC UTILITIES COMMISSION

Rep. Naughton

Sent House Letter3/22/2011

11 H 5393 AN ACT RELATING TO PUBLIC UTILITIES AND CARRIERS - PUBLIC UTILITIES COMMISSION

Rep. Naughton

Sent House Letter3/22/2011

Senate Judiciary Committee

5/12/2011 @ Rise in rm 313

11 S 0666 AN ACT RELATING TO CRIMINAL OFFENSES – CHILDREN Sen. Metts

Sent Senate Letter 4/12/2011

Notes: On 4/11/11 the Legislation Cmte. Recommended the Commission to support. On 4/18/11 Commission took no action.

Held for Further Study, Continued, or Heard

House Health, Education, & Welfare Committee

11 H 5173 AN ACT RELATING TO HEALTH AND SAFETY -- WOMEN'S CARDIOVASCULAR SCREENING AND RISK REDUCTION PILOT PROGRAM Rep. Naughton

Sent House Letter 3/15/2011

11 H 5275 AN ACT RELATING TO INSURANCE -- AUTISM SPECTRUM DISORDERS Rep. Palumbo

Sent House Letter 3/1/2011

11 H 5440 AN ACT RELATING TO EDUCATION - SCHOOL AND YOUTH PROGRAMS CONCUSSION ACT

Rep. Gallison Sent House Letter 3/15/2011

11 H 5441 AN ACT RELATING TO BUSINESSES AND PROFESSIONS – NURSES Rep. Bennett

Sent House Letter 3/22/2011

11 H 5799 AN ACT RELATING TO BUSINESSES AND PROFESSIONS - INTERPRETERS FOR THE DEAF

Rep. Handy Sent House Letter 3/22/2011

House Judiciary Committee

11 H 5089 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - STATE POLICE Rep. Ajello
Sent House Letter 3/1/2011
11 H 5294 AN ACT RELATING TO EDUCATION -- CRIMINAL RECORDS BACKGROUND CHECKS Rep. Nunes
Sent House Letter3/15/2011
11 H 5357 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR VEHICLE OFFENSES Rep. Menard
Sent House Letter3/22/2011
11 H 5361 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR VEHICLE OFFENSES Rep. Menard
Sent House Letter3/22/2011
11 H 5444 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- CHILD RESTRAINTS Rep. Mattiello
Sent House Letter3/22/2011
11 H 5449 AN ACT RELATING TO MOTOR AND OTHER VEHICLES - SAFETY BELT USE Rep. Williams
Sent House Letter3/22/2011
11 H 5455 AN ACT RELATING TO EDUCATION - CERTIFICATION OF PERSONNEL Rep. Keable
Sent House Letter3/15/2011
11 H 5506 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR VEHICLE OFFENSES Rep. Walsh
Sent House Letter3/22/2011
11 H 5519 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- HABITUAL OFFENDERS Rep. Marcello
Sent House Letter3/22/2011

House Labor Committee

11 H 5222 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES Rep. Carnevale
Sent House Letter3/15/2011

Senate Education Committee

11 S 0291 AN ACT RELATING TO EDUCATION - SCHOOL AND YOUTH PROGRAMS CONCUSSION ACT
Sen. Felag Sent Senate Letter 3/15/2011

Senate Health and Human Services Committee

11 S 0107 AN ACT RELATING TO INSURANCE -- AUTISM SPECTRUM DISORDERS Sen. O`Neill E
Sent Senate Letter 3/1/2011 **Notes:**BC spoke to sponsor on 4/7, a sub A has been ordered.
11 S 0302 AN ACT RELATING TO BUSINESSES AND PROFESSIONS - INTERPRETERS FOR THE DEAF
Sen. Walaska Sent Senate Letter 3/22/2011

Senate Judiciary Committee

11 S 0022 AN ACT RELATING TO MOTOR AND OTHER VEHICLES - SAFETY BELT USE Sen. Tassoni
Sent Senate Letter 3/22/2011
11 S 0241 AN ACT RELATING MOTOR AND OTHER VEHICLES -- MOTOR VEHICLE OFFENSES Sen. Sosnowski
Sent Senate Letter 3/22/2011
11 S 0665 AN ACT RELATING TO EDUCATION -- CRIMINAL RECORDS BACKGROUND CHECKS Sen. Pinga
Sent Senate Letter 3/22/2011

Referred to Committee

Senate Education Committee

11 S 0439 AN ACT RELATING TO EDUCATION - RECOVERY HIGH SCHOOLS Sen. Tassoni
Sent Senate Letter 4/12/2011**Notes:** Reviewer finds this act harmful

Senate Finance Committee

11 S 0613 AN ACT RELATING TO HUMAN SERVICES - MEDICAL ASSISTANCE Sen. Metts
Sent Senate Letter 4/12/2011 **Notes:**Reviewer finds this act beneficial "Long time coming"

Senate Health and Human Services Committee

11 S 0267 AN ACT RELATING TO HEALTH AND SAFETY - RIGHTS OF NURSING HOME PATIENTS Sen. Lanzi
Sent Senate Letter 4/12/2011

Senate Judiciary Committee

11 S 0121 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- STATE POLICE Sen. Miller
Sent Senate Letter 3/1/2011
11 S 0225 AN ACT RELATING TO PROPERTY -- RHODE ISLAND FAIR HOUSING PRACTICES ACT Sen. Metts
Sent Senate Letter 3/1/2011

Legislation Committee finds these bills Beneficial if amended

Passed and Transferred

House Health, Education, & Welfare Committee

11 S 0677 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- CORRECTIONS DEPARTMENT

Sen. McCaffrey Requested by the Department of Corrections

Sent Senate Letter 3/22/2011

Scheduled for hearing and/or consideration

House Finance Committee

5/11/2011 @ 1 in rm 35

11 H 5628 AN ACT RELATING TO HUMAN SERVICES Rep. Naughton Requested by the Attorney General

Sent House Letter 4/12/2011 **Notes:** AG wants to incorporate the Commission's BCI bill 11 S 0693 into their overhaul of the entire system. Working on sub A with DDC, PARI, ACLU.

5/12/2011 @ 1 in rm 35

11 H 5588 AN ACT RELATING TO HUMAN SERVICES -- HEALTH CARE ASSISTANCE FOR WORKING PEOPLE WITH DISABILITIES Rep. Naughton

Sent House Letter3/22/2011 **Notes:**On 4/11 Leg. Cmte voted to recommend the Commission support the bill if amended to include the global waiver authorization language in S 301/H 5618. Committee asked the Commission to withdraw support from S 301 & H 5618. Commission rejected the Leg Cmte's recommendation on 4/18.

Held for Further Study, Continued, or Heard

House Health, Education, & Welfare Committee

11 H 5499 AN ACT RELATING TO HEALTH AND SAFETY -- PROHIBITION OF CHILDREN'S BOTTLES CONTAINING BISPHENOL A Rep. Kennedy

Sent House Letter4/12/2011

11 H 5626 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- CORRECTIONS DEPARTMENT

Rep. Lally Requested by the Department of Corrections

Sent House Letter3/15/2011

House Judiciary Committee

11 H 5757 AN ACT RELATING TO CRIMINALS - CORRECTIONAL INSTITUTIONS - MEDICAL PAROLE

Rep. Bennett Requested by the Department of Corrections

Sent House Letter4/12/2011

House Labor Committee

11 H 5041 AN ACT RELATING TO LABOR AND LABOR RELATIONS - EMPLOYMENT SECURITY - RETURN TO WORK ACT Rep. McNamara

Sent House Letter4/12/2011

Senate Health and Human Services Committee

11 S 0202 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - LONG-TERM CARE OMBUDSPERSON ACT OF 1995 Sen. Perry

Sent Senate Letter 3/1/2011Senate Testimony 3/9/2011

Senate Judiciary Committee

11 S 0828 AN ACT RELATING TO HUMAN SERVICES Sen. McCaffrey Requested by the Attorney General

Sent Senate Letter 5/3/2011 Senate Testimony 5/3/2011 **Notes:** BC Testified on 5/3 in S. Judiciary. AG wants to incorporate the Commission's BCI bill 11 S 0693 into their overhaul of the entire system. Working on sub A with DDC, PARI, ACLU

Senate Labor Committee

11 S 0131 AN ACT RELATING TO LABOR AND LABOR RELATIONS - EMPLOYMENT SECURITY - RETURN TO WORK ACT Sen. Tassoni

Sent Senate Letter 4/12/2011

Referred to Committee

House Judiciary Committee

11 S 0638 AN ACT RELATING TO CRIMINALS - CORRECTIONAL INSTITUTIONS - MEDICAL PAROLE

Sen. McCaffrey Requested by the Department of Corrections

Sent Senate Letter 4/12/2011

Senate Finance Committee

11 S 0609 AN ACT RELATING TO HUMAN SERVICES - THE RHODE ISLAND WORKS PROGRAM Sen. Pichardo

Sent Senate Letter 3/22/2011

Withdrawn by sponsor

House Finance Committee

11 H 5326 AN ACT RELATING TO HUMAN SERVICES - THE RHODE ISLAND WORKS PROGRAM
Rep. Cimini
Sent House Letter 3/22/2011

House Health, Education, & Welfare Committee

11 H 5278 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - LONG-TERM CARE OMBUDSPERSON ACT OF 1995 Rep. Coderre E
Sent House Letter 3/2/2011 **Notes:** Letter sent to H. Corp on 3/1/11 and after transfer to House HEW on 3/2/11

Legislation Committee finds these bills Harmful

Recommend Passage

Senate Calendar

5/11/2011 # 004

11 S 0203 AN ACT RELATING TO HEALTH AND SAFETY - DETERMINATION OF NEED FOR NEW HEALTH CARE EQUIPMENT AND NEW INSTITUTIONAL HEALTH SERVICES Sen. Perry
Sent Senate Letter 3/22/2011

11 S 0400 Sub A AN ACT RELATING TO ELECTIONS - VOTER IDENTIFICATION Sen. Metts Requested by the Secretary of State
Sent Senate Letter 3/22/2011

Held for Further Study, Continued, or Heard

House Finance Committee

11 H 5057 AN ACT RELATING TO TOWNS AND CITIES -- STATE AID Rep. Edwards
Sent House Letter 4/12/2011

10 H 5157 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR FUEL TAX Rep. Phillips
Sent House Letter 3/1/2011

House Health, Education, & Welfare Committee

11 H 5632 AN ACT RELATING TO HEALTH AND SAFETY - DETERMINATION OF NEED FOR NEW HEALTH CARE EQUIPMENT AND NEW INSTITUTIONAL HEALTH SERVICES Rep. McNamara
Sent House Letter 3/22/2011

House Judiciary Committee

11 H 5450 AN ACT RELATING TO ELECTIONS - VOTER IDENTIFICATION Rep. Baldelli-Hunt
Sent House Letter 3/22/2011

11 H 5680 AN ACT RELATING TO ELECTIONS - VOTER IDENTIFICATION Rep. Brien Requested by the Secretary of State
Sent House Letter 3/22/2011

11 H 5749 AN ACT RELATING TO ALCOHOLIC BEVERAGES Rep. Malik
Sent House Letter 3/22/2011

11 H 5809 AN ACT RELATING TO PUBLIC RECORDS - ACCESS TO PUBLIC RECORDS Rep. Marcello
Sent House Letter 3/22/2011

House Municipal Government Committee

11 H 5374 AN ACT RELATING TO TOWNS AND CITIES -- STATE AID Rep. Chippendale
Sent House Letter 4/12/2011

Postponed by sponsor

House Labor Committee

11 H 5544 AN ACT RELATING TO LABOR AND LABOR RELATIONS -- WORKERS' COMPENSATION -- GENERAL PROVISIONS Rep. Silva
Sent House Letter 3/22/2011

Referred to Committee

Senate Education Committee

11 S 0522 AN ACT RELATING TO EDUCATION - HEALTH AND SAFETY OF PUPILS Sen. Metts
Sent Senate Letter 4/12/2011

Senate Finance Committee

11 S 0053 AN ACT RELATING TO MOTOR AND OTHER VEHICLES -- MOTOR FUEL TAX Sen. Felag
Sent Senate Letter 3/1/2011

Scheduled for hearing and/or consideration

House Finance Committee

	5/11/2011 @ Rise in rm 35 11 H 5158 AN ACT RELATING TO TAXATION - CIGARETTE TAX Rep. Phillips Sent House Letter 4/12/2011 Withdrawn by sponsor House Judiciary Committee 11 H 5525 AN ACT RELATING TO ELECTIONS - VOTER IDENTIFICATION Rep. Costa Sent House Letter 3/22/2011
	The 2 bills the Legislation Committee found harmful that are moving towards passage. Are either of these bills so harmful that the Commission should be asked to oppose?
	11 S 0203 An Act Relating To Health And Safety - Determination Of Need For New Health Care Equipment And New Institutional Health Services Sen. Perry This act would add home nursing care providers, home care providers and hospice provider to the definition of "health care facility" for the purpose of the Health Care Certificate of Need Act of Rhode Island. This act would take effect upon passage.

SECTION 1. Section 23-15-2 of the General Laws in Chapter 23-15 entitled "Determination of Need for New Health Care Equipment and New Institutional Health Services" is hereby amended to read as follows:

23-15-2. Definitions. -- As used in this chapter:

(1) "Affected person" means and includes the person whose proposal is being reviewed, or the applicant, health care facilities located within the state which provide institutional health services, the state medical society, the state osteopathic society, those voluntary nonprofit area-wide planning agencies that may be established in the state, the state budget office, the office of health insurance commissioner, any hospital or medical service corporation organized under the laws of the state, the statewide health coordinating council, contiguous health systems agencies, and those members of the public who are to be served by the proposed new institutional health services or new health care equipment.

(2) "Cost impact analysis" means a written analysis of the effect that a proposal to offer or develop new institutional health services or new health care equipment, if approved, will have on health care costs and shall include any detail that may be prescribed by the state agency in rules and regulations.

(3) "Director" means the director of the Rhode Island state department of health.

(4) (i) "Health care facility" means any institutional health service provider, facility or institution, place, building, agency, or portion of them, whether a partnership or corporation, whether public or private, whether organized for profit or not, used, operated, or engaged in providing health care services, which are limited to hospitals, nursing facilities, <u>home nursing care provider, home care provider, hospice provider,</u> inpatient rehabilitation centers (including drug and/or alcohol abuse treatment centers), certain facilities providing surgical treatment to patients not requiring hospitalization (surgi-centers, multi-practice physician ambulatory surgery centers and multi-practice podiatry ambulatory surgery centers) and facilities providing inpatient hospice care. Single-practice physician or podiatry ambulatory surgery centers (as defined in subdivisions 23-17-2(13) and 23-17-2(14), respectively) are exempt from the requirements of chapter 15 of this title; provided, however, that such exemption shall not apply if a single-practice physician or podiatry ambulatory surgery center is established by a medical practice group (as defined in section 5-37-1) within two (2) years following the formation of such medical practice group, when such medical practice group is formed by the merger or consolidation of two (2) or more medical practice groups or the acquisition of one medical practice group by another medical practice group. The term "health care facility" does not include Christian Science institutions (also known as Christian Science nursing facilities) listed and certified by the Commission for Accreditation of Christian Science Nursing Organizations/Facilities, Inc.

(ii) Any provider of hospice care who provides hospice care without charge shall be exempt from the provisions of this chapter.

(5) "Health care provider" means a person who is a direct provider of health care services (including but not limited to physicians, dentists, nurses, podiatrists, physician assistants, or nurse practitioners) in that the person's primary current activity is the provision of health care services for persons.

(6) "Health services" means organized program components for preventive, assessment, maintenance, diagnostic, treatment, and rehabilitative services provided in a health care facility.

(7) "Health services council" means the advisory body to the Rhode Island state department of health established in accordance with chapter 17 of this title, appointed and empowered as provided to serve as the advisory body to the state agency in its review functions under this chapter.

(8) "Institutional health services" means health services provided in or through health care facilities and includes the entities in or through which the services are provided.

(9) "New health care equipment" means any single piece of medical equipment (and any components which constitute operational components of the piece of medical equipment) proposed to be utilized in conjunction with the provision of services to patients or the public, the capital costs of which would exceed one million dollars ($1,000,000); provided, however, that the state agency shall exempt from review any application which proposes one for one equipment replacement as defined in regulation.

(10) "New institutional health services" means and includes:

(i) Construction, development, or other establishment of a new health care facility.

(ii) Any expenditure except acquisitions of an existing health care facility which will not result in a change in the services or bed capacity of the health care facility by or on behalf of an existing health care facility in excess of two million dollars ($2,000,000) which is a capital expenditure including expenditures for predevelopment activities.

(iii) Where a person makes an acquisition by or on behalf of a health care facility or health maintenance organization under lease or comparable arrangement or through donation, which would have required review if the acquisition had been by purchase, the acquisition shall be deemed a capital expenditure subject to review.

(iv) Any capital expenditure which results in the addition of a health service or which changes the bed capacity of a health care facility with respect to which the expenditure is made, except that the state agency may exempt from review by rules and regulations promulgated for this chapter any bed reclassifications made to licensed nursing facilities and annual increases in licensed bed capacities of nursing facilities that do not exceed the greater of ten (10) beds or ten percent (10%) of facility licensed bed capacity and for which the related capital expenditure does not exceed two million dollars ($2,000,000).

(v) Any health service proposed to be offered to patients or the public by a health care facility which was not offered on a regular basis in or through the facility within the twelve (12) month period prior to the time the service would be offered, and which increases operating expenses by more than seven hundred and fifty thousand dollars ($750,000), except that the state agency may exempt from review by rules and regulations promulgated for this chapter any health service involving reclassification of bed capacity made to licensed nursing facilities.

(vi) Any new or expanded tertiary or specialty care service, regardless of capital expense or operating expense, as defined by and listed in regulation, the list not to exceed a total of twelve (12) categories of services at any one time and shall include full body magnetic resonance imaging and computerized axial tomography; provided, however, that the state agency shall exempt from review any application which proposes one for one equipment replacement as defined by and listed in regulation. Acquisition of full body magnetic resonance imaging and computerized axial tomography shall not require a certificate of need review and approval by the state agency if satisfactory evidence is provided to the state agency that it was acquired for under one million dollars ($1,000,000) on or before January 1, 2010 and was in operation on or before July 1, 2010.

(11) "Person" means any individual, trust or estate, partnership, corporation (including associations, joint stock companies, and insurance companies), state or political subdivision, or instrumentality of a state.

4-7 (12) "Predevelopment activities" means expenditures for architectural designs, plans,
4-8 working drawings and specifications, site acquisition, professional consultations, preliminary
4-9 plans, studies, and surveys made in preparation for the offering of a new institutional health
4-10 service.
4-11 (13) "State agency" means the Rhode Island state department of health.
4-12 (14) "To develop" means to undertake those activities which, on their completion, will
4-13 result in the offering of a new institutional health service or new health care equipment or the
4-14 incurring of a financial obligation, in relation to the offering of that service.
4-15 (15) "To offer" means to hold oneself out as capable of providing, or as having the
4-16 means for the provision of, specified health services or health care equipment.
4-17 SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To ask the Commission to oppose **11 S 0203 An Act Relating To Health And Safety - Determination Of Need For New Health Care Equipment And New Institutional Health Services** BI/AP Yea BO, & SB. Nay AP RC, KH, Abstain everyone else. Motion failed
	11 S 0400 Sub A An Act Relating To Elections - Voter Identification This act would provide that any person claiming to be a registered and eligible voter who desires to vote at a primary election, special election or general election shall provide proof of identity. In the event such person fails to provide the required proof of identity, this act would provide that the person may vote a provisional ballot upon completing a provisional ballot voter's certificate and affirmation and the local board shall determine the validity of the provisional ballot. This act would take effect upon passage. The Substitute replaces as one of the voter Photo ID documents a "Debit or credit card" with a "Government issued medical card". It replaces one of the 2012 voter non-photo ID documents a "Medicare card" with a "Government issued medical card". It also replaces the "provisional ballot voter's certificate and affirmation" with "provisional ballot voter's application" that will allow the voter without the proper voter ID document to cast a provisional ballot that will be held pending verification of the voter's signature. **The Legislation Committee originally found this bill harmful**

1-1 SECTION 1. Section 17-19-24 of the General Laws in Chapter 17-19 entitled "Conduct
1-2 of Election and Voting Equipment, and Supplies" is hereby amended to read as follows:
1-3 **17-19-24. Procedure for voting. --** (a) Each person desiring to vote shall provide proof
1-4 of identification as required by section 17-19-24.2 and state his or her name and residence,
1-5 including that person's street address, if he or she has any, to the pair of bi-partisan supervisors,
1-6 who shall then announce the name and residence in a loud and distinct voice, clear and audible.
1-7 (b) A bipartisan pair shall locate the voter's name on the certified voting list for the
1-8 voting district. Upon finding the voter's name on the certified voting list for the district, the voter
1-9 shall sign their name on the line next to their printed name on the certified voter list, and the
1-10 bipartisan pair shall initial the certified voter list in the place provided next to the voter's signature
1-11 entered on the certified list of voters. The bipartisan pair shall also make a proper notation on the
1-12 certified voter list that the applicant has voted in the election. If the bipartisan pair cannot locate
1-13 the voter's name on the certified voting list for the voting district the bipartisan pair shall direct
1-14 the voter to the clerk who shall review the certified list for the city or town and determine if the
1-15 voter is registered to vote and in which voting district they are eligible to vote. The bipartisan pair
1-16 of supervisors shall provide the voter with the appropriate computer ballot and security sleeve.
1-17 The warden shall direct the voter to the voting booth which the voter shall use, and unless the
1-18 voter needs instruction or assistance as provided in this chapter, the voter shall cast his or her
1-19 vote, and if he or she desires place the voted computer ballot in a security sleeve, and shall
2-1 proceed to the optical scan precinct count unit and shall personally place his or her voted ballot
2-2 into the designated ballot slot on the unit, and after doing so, shall leave the enclosure at once. No

voter shall remain within the voting booth longer than ten (10) minutes, and if the voter refuses to leave after the lapse of ten (10) minutes, the voter shall be removed from the voting booth by order of the warden. Except for the election officials and the election inspector, not more than two (2) voters in excess of the number of voting booths shall be permitted within the enclosed space at any time.

(c) The optical scan precinct count unit shall be programmed to return a ballot to the voter if the voter has cast votes for more persons than which he or she is entitled to cast. The warden, by reading the message given on the optical scan precinct count unit, must advise the voter of the fact that the ballot has been over-voted. The voter will be instructed by the warden to remove his or her own ballot from the optical scan precinct count unit ballot slot. The warden will then ask the voter to surrender the ballot as void and receive a new ballot. If the voter agrees, the voter will make additional marks on the ballot so as not to identify the actual votes intended by the voter for the ballot. The ballot will be marked void by the warden and deposited in the receptacle for void ballots provided at the polling place. If the voter insists on casting the over-voted ballot, he or she will be advised that all races, other than the over-voted race, will be counted by the optical scan precinct count unit, and if he or she still insists, the warden will manually override the appropriate control on the unit and allow for the ballot to be entered and counted for all races other than the over-voted race.

(d) In the event a voter incorrectly marks a ballot by indicating his or her choices other than in the spaces provided for them, the ballot will be returned to the voter. The warden, by reading the message given on the optical scan precinct count unit, must advise the voter of the fact that the ballot has been marked incorrectly. The voter will be instructed by the warden to remove his or her own ballot from the optical scan precinct unit ballot slot. The warden will then advise the voter to surrender the ballot as void and receive a new ballot. If the voter agrees, the voter will make additional marks on the ballot so as not to identify the actual votes intended by the voter for the ballot. The ballot will be marked void by the warden and deposited in the receptacle for void ballots provided at the polling place. The warden will then provide for the instruction of the voter on the correct manner of marking his or her vote and the voter will be issued a new ballot. If the voter insists on casting the incorrectly marked ballot, the warden will manually override the appropriate control on the optical scan precinct count unit and allow for the ballot to be accepted.

SECTION 2. Chapter 17-19 of the General Laws entitled "Conduct of Election and Voting Equipment, and Supplies" is hereby amended by adding thereto the following sections:

17-19-24.2. Voter Identification. – (a) Beginning on January 1, 2012, any person claiming to be a registered and eligible voter who desires to vote at a primary election, special election or general election shall provide proof of identity. For purposes of this section, proof of identity shall include:

(1) A valid and current document showing a photograph of the person to whom the document was issued, including without limitation:

(i) Rhode Island driver's license;

(ii) Rhode Island voter identification card;

(iii) United States passport;

(iv) Identification card issued by a United States educational institution;

(v) United States military identification card;

(vi) Identification card issued by the United States or the State of Rhode Island;

(vii) Government issued medical card.

(2) A valid and current document without a photograph of the person to whom the document was issued, including without limitation:

(i) Birth certificate;

(ii) Social security card;

(iii) Government issued medical card.

(b) From and after January 1, 2014, any person claiming to be a registered and eligible voter who desires to vote at a primary election, special election or general election shall provide proof of identity listed in subdivisions (a)(1).

(c) No later than January 1, 2012, Rhode Island voter identification cards will be issued upon request, and at no expense to the voters, at locations and in accordance with procedures established by rules and regulations promulgated by the secretary of state. The purpose of this section is to provide voter identification cards to those voters who do not possess the identification listed in subdivision (a)(1).

(d) If the person claiming to be a registered and eligible voter is unable to provide proof of identity as required in subdivision (1) and (2) above, the person claiming to be a registered voter shall be allowed to vote a provisional ballot pursuant to section 17-19-24.2 upon completing a provisional ballot voter's certificate and affirmation. The local board shall determine the validity of the provisional ballot pursuant to section 17-19-24.3.

17-19-24.3. Provisional Ballot Procedures. – (a) At all elections, a person claiming to be a registered and eligible voter, but who has failed to provide proof of identity pursuant to section 17-19-24.2 shall be allowed to vote a provisional ballot upon executing a provisional ballot voter's application. All provisional ballots, together with a provisional ballot voter's application, shall be placed in an envelope in the form prescribed by the state board and deposited in a ballot box.

(b) The local board shall examine each provisional ballot application to determine if the signature matches the signature on the voter's registration. If the local board determines that the signatures match, the provisional ballot shall count. If the local board determines that the signatures do not match, the provisional ballot shall not count and the ballot shall remain in the envelope containing the provisional ballot application and the envelope shall be marked "Rejected as Illegal".

SECTION 3. This act shall take effect upon passage.

☑ voting check off graphic	The Committee made no change in its finding of Harmful **11 S 0400 Sub A An Act Relating To Elections - Voter Identification**
	Consideration of Bills that have been Amended
	11 S 0060 Sub A An Act Relating To Health And Safety -- Women's Cardiovascular Screening And Risk Reduction Pilot Program Sen. Crowley This act would establish a women's cardiovascular screening and risk reduction pilot program of screening and lifestyle intervention pilot program in Rhode Island's six (6) core cities for low income, underinsured and uninsured women between forty (40) and sixty-four (64) years of age, inclusive, at risk for heart disease, diabetes and stroke, namely Pawtucket, Providence, Woonsocket, Newport, West Warwick and Central Falls. The pilot program shall expire July 1, 2014. Sixty thousand dollars ($60,000) each year. The Substitute would not appropriate $60,000 annual instead the Women's Cardiovascular screening and risk reduction pilot program shall be subject to appropriations each year. This act would take effect upon passage. **The Legislation Committee found this bill Beneficial**

WHEREAS, Heart disease, stroke and other forms of cardiovascular disease are the number one cause of death for women each year; and

WHEREAS, Cardiovascular disease kills more women annually than the next five (5) leading causes of death combined, which includes all forms of cancer; and

WHEREAS, Despite the statistics, many patients and health care providers alike tend to think of heart disease as a disease that primarily afflicts men; and

WHEREAS, In February 2004, the American Heart Association began the vigorous "Go Red for Women" public awareness campaign and a survey conducted in 2007 by the American Heart Association found that forty-three percent (43%) of women are still not aware that heart disease is the leading cause of death among women; and

WHEREAS, The WISEWOMEN program, administered by the Centers for Disease Control and Prevention, provides low-income, underinsured, or uninsured women between forty

(40) and sixty-four (64) years of age with chronic disease risk factor screening, lifestyle intervention, and referral services in an effort to prevent cardiovascular disease and promote healthy lifestyles; and

WHEREAS, WISEWOMEN programs provide standard preventive services, including blood pressure and cholesterol testing and lifestyle programs targeting poor nutrition, physical inactivity, and smoking; and

WHEREAS, Rhode Island is currently not participating in the WISEWOMEN program due to lack of federal funding; and

WHEREAS, The best chance for women in this state to reduce their mortality rates due to cardiovascular disease is through education and prevention.

SECTION 1. Title 23 of the General Laws entitled "HEALTH AND SAFETY" is hereby amended by adding thereto the following chapter:

CHAPTER 86

WOMEN'S CARDIOVASCULAR SCREENING AND RISK REDUCTION PILOT PROGRAM

23-86-1. Women's cardiovascular screening and risk reduction pilot program. – (a) The department of health (hereinafter, "the department") shall develop a cardiovascular disease screening and lifestyle intervention pilot program at one site in one of Rhode Island's six (6) core cities for low-income, underinsured and uninsured women between forty (40) and sixty-four (64) years of age, inclusive, at risk for heart disease, diabetes and stroke, namely Pawtucket, Providence, Woonsocket, Newport, West Warwick or Central Falls.

(b) The department shall develop the program based on the federal WISEWOMEN program administered by the Centers for Disease Control and Prevention. The pilot program shall employ specified measures to gauge the impact and outcome of the program. These measures may include the number of women served, the number who receive lifestyle interventions, the number of follow-up visits per woman, an evaluation of the use of progress markers to reduce risk factors, and a research and evaluation component.

(c) The department shall prepare an annual report and submit it to the legislature by January 31 of each year summarizing the scope and reach of the pilot program. The final report shall include a fiscal analysis and a recommendation outlining the benefits and costs of expanding the pilot program throughout the state after the program has been in existence for three (3) years. The pilot program shall expire July 1, 2014.

(d) Implementation of the Women's Cardiovascular screening and risk reduction pilot program shall be subject to appropriation.

SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	The Committee made no change in its finding of Beneficial **11 S 0060 Sub A An Act Relating To Health And Safety -- Women's Cardiovascular Screening And Risk Reduction Pilot Program**
	11 S 0236 As Amended An Act Relating To State Affairs And Government -- Department Of Children, Youth, And Families This act would require the department of children, youth, and families to apply to the bureau of criminal identification, the state police, or local police department for a national and state criminal records check of any applicant for employment. The director will promulgate rules to determine what items of information would disqualify an applicant for employment. This act would take effect upon passage. The Amended bill requires applicants to pay for the criminal records check, the department of children, youth and families will pay for the records check of current state employees. It has also been added that if any individual required to undergo a background check had one previously conducted within six months time, they could use that background check provided that they have the department who conducted the check forward the results to the Department of Children, Youth and Families.

	The Legislation Committee originally found this bill beneficial

SECTION 1. Chapter 40-13.2 of the General Laws entitled "Certification of Child Care and Youth Serving Agency Workers" is hereby amended by adding thereto the following section:

40-13.2-5.2. Criminal records check—Employees of the department of children, youth and families. – (a) Any person seeking employment with the department of children, youth and families shall apply to the bureau of criminal identification (BCI), department of attorney general, state police, or local police department where the applicant resides, for a national and state criminal records check. The check shall confirm to the applicable federal standards including the taking of fingerprints to identify the applicant. The director shall determine by rule those items of information appearing on a criminal records check which constitute disqualifying information because the information would indicate that employment could endanger the health or welfare of a child or children and would be inconsistent with the purpose and intent of the department of children, youth and families.

(b) The department of attorney general, the state police or the local police department shall forward the results of the nationwide and state criminal record checks, including the nature of any criminal record, on the individual to the individual and to the department of children, youth and families. Upon the discovery of any disqualifying information with respect to an applicant, the department of children, youth and families shall inform the applicant of the disqualifying information.

(c) The cost of criminal record checks required by this section for individuals who are not currently employed by the State of Rhode Island shall be the responsibility of the applicant. The cost of criminal records checks required by this section for individuals who are currently employed by the State of Rhode Island shall be the responsibility of the department of children, youth and families.

(d) Any individual required to submit to a criminal background check, state and/or federal, under subsection (a) above who has submitted to a criminal background check conducted within the previous six (6) months in accordance with section 14-1-34 and/or section 15-7-11 and/or sections 40-13.2-2, 40-13.2-4, 40-13.2-5, and/or section 40-13.2-9, shall be exempt from an additional check but shall request the department of attorney general, the state police or the local police department which conducted the check forward the results, including the nature of the criminal record, to the department of children, youth and families.

SECTION 2. This act shall take effect upon passage.

☑ voting check off graphic	The Committee made no change in its finding of Beneficial 11 S 0236 As Amended An Act Relating To State Affairs And Government -- Department Of Children, Youth, And Families
	Consideration of Draft Amendments
	11 S 0828 / 11 H 5628 Acts Relating To Human Services

SECTION 1. Chapter 40-8.1 of the General Laws entitled "Personal Care Attendant Program" is amended to read as follows:

CHAPTER 40-8.1
PERSONAL CARE ATTENDANT PROGRAM

40-8.1-1. Authority to establish program -- Administration. -- The department of human services is hereby authorized to establish a participant directed personal care attendant program for those with severe physical disabilities, to provide personal attendant care to those disabled individuals who meet certain eligibility criteria hereinafter stated. The department of human services shall be responsible for the administration of the program but may contract with other state agencies or nonprofit organizations in connection with the program.

40-8.1-2. Services provided. -- Services that may be provided eligible persons if not available from other sources include:

(1) Any appropriate vocational rehabilitation service, as well as other services that will enhance the ability of individuals with disabilities to live independently and function within the family and community;

(2) Personal care attendant services;

(3) Advocacy services;

(4) Peer counseling;

(5) Housing; and

(6) Transportation.

40-8.1-3. Eligibility for services. -- Services available under this chapter may be provided to any person who meets the following criteria:

(1) Has made application therefor to the director of the department of human services in a manner prescribed by the director;

(2) Has a severe physical disability that caused the person to be unduly dependent, the disability to be certified by the ~~division of vocational~~ office of rehabilitation services; and

(3) Has not sufficient income or resources to meet the cost of home care services, a determination of insufficiency to be made by the division of vocational rehabilitation.

40-8.1-4. When services may be provided. -- Personal care attendant services may be provided when:

(1) The requirements of section 40-8.1-3 are met; and

(2) An attendant is available to provide the care needed.

40-8.1-5. Appropriations. -- There is hereby appropriated to the department of human services funds adequate to implement an independent living program including a participant directed personal care attendant program in the amount of ninety-five thousand dollars ($95,000) for fiscal year ending June 30, 1980. Additional funds shall be made available on a yearly basis to maintain the program.

40-8.1-6 Definitions. - As used in this chapter:

(1) "Administrator" shall mean a state agency or nonprofit organization under contract with the department to administer a personal attendant services program;

(2) "Consumer" shall mean an individual who receive self directed personal attendant care service, whether a participant in services provided pursuant to § 40-8.1-2; or receiving personal care attendant services through medicaid, a third party payor or paid for by the individual and/or her/his family;

(3)"Department" shall mean the department of human services;

(4) "Employer" shall mean the consumer unless the personal care attendant is employed by a third party, in such cases the third party is the employer;

(5) "Participant" means an individual approved by the department to receive self directed personal attendant care services;

(6) "Personal care attendant" means an individual with appropriate training who provides personal care services to a consumer in the consumer's residence; and

(7) "Personal care attendant services" means assistance with activities of daily living, housekeeping, personal laundry and companionship provided to an individual in his or her residence, which are intended to enable that individual to remain safely and comfortably in their residence. Personal care attendant services does not include services provided by entities required to be licensed under Rhode Island general laws, including, but not limited to: education facilities, title16; health care facilities, chapter 23-17; assisted living residences, chapter 23-17.4; nursing service agencies, chapter 23-17.7.1; and/or behavioral healthcare, developmental disabilities and hospitals facilities, chapter 40.1-25.1.

40-8.1-7 Rights of Consumers.- The department shall develop rights to be distributed to the consumer within the five (5) calendar days of the initiation of services to the consumer and thereafter, on an annual basis. These rights include:

(1) Consumer's right to be free from verbal, physical and psychological abuse and to be treated with dignity;

(2) Consumer's right to temporarily or permanently suspend, terminate, or add the provision of any services stated in the service plan;

(3) Consumer's right to have property treated with respect;

(4) Consumer's right to voice grievances regarding services furnished or regarding the lack of respect for property by anyone who is furnishing personal care attendant services and that the consumer must not be subject to discrimination or reprisal for doing so;

(5) A statement that it is not within the scope of the personal care attendant services to manage the medical and health conditions of the consumers;

(6) The charges for services provided by the personal care attendant services; and

(7) The procedure and contact information to call to file a complaint with the department.

40-8.1-8. Complaint Process.- An department shall investigate complaints made by a consumer or the consumer's family or personal representative regarding services that are or have failed to be furnished, regarding lack of respect for the consumer's property by the personal care attendant, and shall document the existence of the complaint and the resolution of the complaint in accordance with department's requirements.

40-8.1-9. Registration. On or after January 1, 2012, every personal care attendant being employed as a personal care attendant or offering services as a personal care attendant must obtain a certificate of registration

issued by the department within their initial ninety(90) days of employment as a personal care attendant. Every personal care attendant, prior to being issued a certificate of registration by the department, shall successfully complete the training program as required by §40.8.1-12 unless otherwise exempt from the requirements. All applicants not otherwise exempted are required to complete the process of training within a period of ninety(90) days from the date of initiation of training. Failure to successfully complete this process within ninety(90) days requires that the applicant successfully repeat the training program. All personal care attendants shall be registered with and qualified by the department. The department shall keep a register in which are entered the names of all persons to whom certificates of registration are issued under this chapter and the register shall be open to public inspection

40-8.1-10. Renewal of certificate of registration. – Every holder of a personal care attendant certificate of registration shall register biennially by making application to the department on forms provided by the department. The renewals shall be granted as a matter of course on the successful completion of continuing education requirements as required by §40.8.1-12 , unless the agency finds that the applicant has acted or failed to act in a manner under the circumstances that would constitute grounds for suspension or revocation of a certificate of registration.

40-8.1-11. Grandparent clause. – After October 30, 2011, and at any time prior to January 31, 2012, the department shall issue a personal care attendant certificate of registration to any applicant who shall present satisfactory evidence that he or she has the been employed as a personal care attendant in Rhode Island, for a period of at least three hundred (300) hours. Thereafter, in order to qualify for a certificate of registration after the initial "grandparent" window, the eligible personal care attendant shall be required to successfully complete the continuing education requirements as required by §40.8.1-12.

40-8.1-12. Personal Care Attendant Training. – The department or each personal attendant care services administrator shall be responsible for ensuring all personal care attendants have completed four (4) hours of initial training on personal attendant care responsibilities and practices and two (2) hours of continued education biennially thereafter, as prescribed by the personal attendant care services administrator. {individual consumer needs training}

40-8.1-13. Criminal records review. - (a) Any person seeking employment, whether compensated or not, as a personal care attendant is required to have a certificate of registration from the department and shall undergo a criminal background check to be initiated prior to employment or within one week of employment. All personal care attendants hired prior to December 1, 2011 shall be exempted from the requirements of this section[1].

(b) The personal care attendant shall apply to the bureau of criminal identification of the department of attorney general, state police or local police department for a national criminal records check that shall be supported by fingerprints run through the National Crime Information Center ("NCIC") Interstate Identification Index ("III"). Upon the discover of any disqualifying information as defined in section 40-8.1-15, the bureau of criminal identification of the department of attorney general, state police or the local police department shall inform the applicant, in writing, of the nature of the disqualifying information; and, without disclosing the nature of the disqualifying information, will notify the employer, in writing, that disqualifying information has been discovered.

(c) An employee against whom disqualifying information has been found may request that a copy of the criminal background report be sent to the employer who shall make a judgment regarding the continued employment of the employee.

(d) In those situations in which no disqualifying information has been found, the bureau of criminal identification of the department of attorney general, state police or the local police shall inform the applicant and the employer, in writing, of this fact.

(e) The third party employer shall maintain on file, subject to inspection by the department, evidence that criminal records checks have been initiated on all employees seeking employment and the results of the checks. Failure to maintain that evidence shall be grounds to revoke the license or registration of the employer.

40-8.1-14. Prior criminal records checks.- If an applicant for employment has undergone a national criminal records check within eighteen (18) months of an application for employment, then an employer may request from the bureau of criminal identification of the department of attorney general, state police or the local police a letter indicating if any disqualifying information was discovered. The bureau of criminal identification shall respond without disclosing the nature of the disqualifying information. The letter may be maintained on file to satisfy the requirements of this chapter.

40-8.1-15. Disqualifying information.- (a) Information produced by a criminal records review pertaining to conviction, for the following crimes shall result in a letter to the employee and employer disqualifying the applicant

[1] 23-17-34 from the Licensing of Health Care Facilities Act

130 from the employment: murder, voluntary manslaughter, involuntary manslaughter, first degree sexual assault,
131 second degree sexual assault, third degree sexual assault, assault on persons sixty (60) years of age or older,
132 assault with intent to commit specified felonies(murder, robbery, rape, burglary, [or the abominable and
133 detestable crime against nature), felony assault, patient abuse, neglect or mistreatment of patients, first degree
134 arson, robbery, felony drug offenses, larceny, or felony banking law violations {add financial & identify theft}.
135 (b) Information produced by a criminal records review pertaining to convictions for crimes other than those listed in
136 subsection (a) of this section shall entitle, but not obligate the employer to decline to hire the applicant. An
137 employee against whom conviction information related to this subsection has been found may request that a copy
138 of the criminal background report be sent to the employer who shall make a determination regarding the continued
139 employment of the employee.
140 (c) For purposes of this section "conviction" means, in addition to judgments of conviction entered by a court
141 subsequent to a finding of guilty or a plea of guilty, those instances where the defendant has entered a plea of
142 nolo contendere and has received a sentence of probation and those instances where a defendant has entered
143 into a deferred sentence agreement with the attorney general.
144 **40-8.1-16. Denial, suspension, or revocation of a certificate of registration.-** The department, after notice and
145 opportunity for a hearing to the applicant or registrant, is authorized to deny, suspend, or revoke a certificate of
146 registration in any case in which it finds that there has been failure to comply with the requirements established
147 under and pursuant to this chapter. The notice shall be effected by registered or certified mail or by personal
148 service, setting forth the particular reasons for the proposed action and fixing a date not less than thirty (30) days
149 from the date of the mailing or service, at which time the applicant or registrant shall be given an opportunity for a
150 prompt and fair hearing. On the basis of the hearing, or upon the failure of the applicant or registrant to appear,
151 the department shall make a determination specifying its findings of fact and conclusion of law. A copy of the
152 determination shall be sent by registered or certified mail or served personally upon the applicant or registrant.
153 The decision denying, suspending, or revoking the a certificate of registration or application shall become final
154 thirty (30) days after it is so mailed or served, unless the applicant or registrant, within the thirty (30) day period,
155 appeals the decision pursuant to section 42-35-15. The procedure governing hearings authorized by this section
156 shall be in accordance with sections 42-35-9 and 42-35-13 as stipulated in subsection 42-34-14(a). A full and
157 complete record shall be kept of all proceedings, and all testimony shall be reported but need not be transcribed
158 unless the decision is appealed pursuant to section 42-35-15. A copy or copies of the transcript may be obtained
159 by an interested party on payment of the cost of preparing the copy or copies. Witnesses may be subpoenaed by
160 either party.
161 **40-8.1-17. Judicial review of certificate of registration action. -** Any person who has exhausted all administrative
162 remedies available to him or her within the department, and who is aggrieved by a final decision of the
163 department, is entitled to judicial review in accordance with the provisions of sections 42-35-15 and 42-35-16.
164 **40-8.1-18. Immunity from liability.-** No employer who disqualifies an individual from employment or continued
165 employment within thirty (30) days of receipt of a letter containing disqualifying information as defined in section
166 40-8.1-15 or of a criminal background report relating to that information shall be liable for civil damages or subject
167 to any claim, cause of action, or proceeding of any nature as a result of the disqualification.
168 **40-8.1-19. Inspections and Investigations.-** The department may conduct any such investigation and inspection
169 as it deems necessary to assess compliance with this chapter and the rules and regulations promulgated thereto.
170 Wherever possible and practical, on-site reviews shall be scheduled, in an effort so as to reduce the number of
171 visits and the disruption to the personal care attendant services. Investigations and inspections may when the
172 consumer gives consent include the direct observation of the provision of personal care attendant services in the
173 consumer's home. Personal care attendants registered under the chapter shall make available to the department
174 all books, records, policies and procedures, or any other materials requested during the course of an investigation
175 or inspection. Refusal to make such materials available to the department shall be grounds for certificate of
176 registration revocation, or the imposition of any other penalty provided in the chapter.
177 **40-8.1-19. Rules and regulations.–**Not later than ninety (90) days after the effective date of this chapter, the
178 department of human services shall promulgate regulations governing the manner in which it shall consider
179 applications for and renewals of certificates of registration.
180 **40-8.1-20. Penalties for violations.** - It shall be a misdemeanor punishable by a fine of not more than five
181 hundred dollars ($500) and/or by imprisonment for not more than one year for any person to:
182 (1) Obtain his or her certification or registration by means of fraud, misrepresentation, or concealment of
183 material facts;
184 (2) Practice as a personal care attendant under cover of any certification or registration illegally or fraudulently
185 obtained or unlawfully issued;

(3) Practice as a personal care attendant during the time his or her certification or registration issued under the provisions of this chapter shall be suspended or revoked; or

(4) Otherwise violate any of the provisions of this chapter.

40-8.1-22. Severability.- If any provision of this chapter or the application of any provision of this chapter to any person or circumstance shall be held invalid, the invalidity shall not affect the provisions or application of this chapter which can be given effect without the invalid provisions or application, and to this end the provisions of this chapter are declared severable.

SECTION 2. Sections 23-17-34 and 23-17-35 of the General Laws in Chapter 23-17 entitled "Licensing of Health Care Facilities" are hereby amended to read as follows:

23-17-34. Criminal records review -- Nursing facilities -- Home nursing care providers and home care providers. -- (a) Any person seeking employment in a nursing facility, a home nursing care provider, or a home care provider which is or is required to be licensed, registered or certified with the department of health if that employment involves ~~routine~~ direct contact with a patient or resident ~~without the presence of other employees,~~ shall undergo a criminal background check to be initiated prior to or within ~~one week of~~ employment. All employees hired prior to the enactment of this section shall be exempted from the requirements of this section.

(b) The director of the department of health may by rule identify those positions requiring criminal background checks. The identified employee, through the employer, shall apply to the bureau of criminal identification of the department of attorney general, state police or local police department for a ~~statewide~~ national criminal records check that shall be supported by fingerprints run through National Crime Information Center ("NCIC") Interstate Identification Index ("III"). ~~Fingerprinting shall not be required.~~ Upon the discovery of any disqualifying information as defined in section 23-17-37 and in accordance with the rule promulgated by the director of health, the bureau of criminal identification of the department of attorney general, state police or the local police department will inform the applicant, in writing, of the nature of the disqualifying information; and, without disclosing the nature of the disqualifying information, will notify the employer, in writing, that disqualifying information has been discovered.

(c) An employee against whom disqualifying information has been found may request that a copy of the criminal background report be sent to the employer who shall make a judgment regarding the continued employment of the employee.

(d) In those situations in which no disqualifying information has been found, the bureau of criminal identification of the department of attorney general, state police or the local police shall inform the applicant and the employer, in writing, of this fact.

(e) The employer shall maintain on file, subject to inspection by the department of health, evidence that criminal records checks have been initiated on all employees seeking employment after October 1, 1991, and the results of the checks. Failure to maintain that evidence would be grounds to revoke the license or registration of the employer.

~~(f) It shall be the responsibility of the bureau of criminal identification of the state police or the local police department to conduct the criminal records check to the applicant for employment without charge to either the employee or the employer.~~

23-17-35. Prior criminal records checks. -- If an applicant for employment has undergone a ~~statewide~~ national criminal records check within eighteen (18) months of an application for employment, then an employer may request from the bureau of criminal identification of the department of attorney general, state police or the local police a letter indicating if any disqualifying information was discovered. The bureau of criminal identification will respond without disclosing the nature of the disqualifying information. The letter may be maintained on file to satisfy the requirements of this chapter.

SECTION 3. Sections 23-17.4-27 and 23-17.4-28 of the General Laws in Chapter 23-17.4 entitled "Assisted Living Residence Licensing Act" are hereby amended to read as follows:

23-17.4-27. Criminal records review. -- (a) Any person seeking employment, whether compensated or not, in any assisted living residence licensed under this act and having ~~routine~~ direct contact with a resident or having access to a resident's belongings or funds shall undergo a criminal background check to be ~~processed~~ initiated prior to ~~or within one week of~~ employment. All employees hired prior to the enactment of this section shall be exempted from the requirements of this section.

(b) The director of the department of health may by rule identify those positions requiring criminal background checks. The employee, through the employer, shall apply to the bureau of criminal identification of the department of attorney general, state police or local police department for a ~~statewide~~ national criminal records check that shall be supported by fingerprints run through National Crime Information Center ("NCIC") Interstate Identification Index ("III"). ~~Fingerprinting shall not be required.~~ Upon the discovery of any disqualifying information as defined in section 23-17.4-30 and in accordance with the rule promulgated by the director of health, the bureau of criminal identification of the department of attorney general, state police or the local police department will inform the

243 applicant in writing of the nature of the disqualifying information; and, without disclosing the nature of the
244 disqualifying information, will notify the employer in writing that disqualifying information has been discovered.
245 (c) An employee against whom disqualifying information has been found may request that a copy of the
246 criminal background report be sent to the employer. The administrator shall make a judgment regarding the
247 continued employment of the employee.
248 (d) In those situations in which no disqualifying information has been found, the bureau of criminal
249 identification (BCI) of the department of attorney general, state police or the local police shall inform the applicant
250 and the employer in writing of this fact.
251 (e) The employer shall maintain on file, subject to inspection by the department of health, evidence that
252 criminal records checks have been initiated on all employees seeking employment after October 1, 1991, and the
253 results of the checks. Failure to maintain that evidence would be grounds to revoke the license or registration of
254 the employer.
255 ~~(f) It shall be the responsibility of the bureau of criminal identification (BCI) of the state police or the local police~~
256 ~~department to conduct the criminal records check to the applicant for employment without charge to either the~~
257 ~~employee or employer.~~
258 **23-17.4-28. Prior criminal records checks.** -- If an applicant for employment has undergone a ~~statewide~~
259 national criminal records check within eighteen (18) months of an application for employment, then an employer
260 may request from the bureau of criminal identification of the department of attorney general, state police or the
261 local police a letter indicating if any disqualifying information was discovered. The bureau of criminal identification
262 will respond without disclosing the nature of the disqualifying information. The letter may be maintained on file to
263 satisfy the requirements of this chapter.
264 SECTION 4. Sections 23-17.7.1-17 and 23-17.7.1-18 of the General Laws in Chapter 23- 17.7.1 entitled
265 "Licensing of Nursing Service Agencies" are hereby amended to read as follows:
266 **23-17.7.1-17. Criminal records review.** -- (a) Any person seeking employment, whether compensated or not, in
267 a facility which is or is required to be licensed or registered with the department of health if that employment
268 involves ~~routine~~ direct contact with a patient or resident ~~without the presence of other employees~~, shall undergo a
269 criminal background check, which shall to be initiated prior to, or within one week of, employment. All employees
270 hired prior to the enactment of this section shall be exempted from the requirements of this section.
271 (b) The director of the department of health may, by rule, identify those positions requiring criminal background
272 checks. The employee, through the employer, shall apply to the bureau of criminal identification of the department
273 of attorney general, state police or local police department for a ~~statewide~~ national criminal records check that
274 shall be supported by fingerprints run through the National Crime Information Center ("NCIC") Interstate
275 Identification Index ("III"). ~~Fingerprinting shall not be required.~~ Upon the discovery of any disqualifying information
276 as defined in section 23-17.7.1-20 and in accordance with the rule promulgated by the director of the department
277 of health, the bureau of criminal identification of the department of attorney general, state police or the local police
278 department will inform the applicant, in writing, of the nature of the disqualifying information; and, without
279 disclosing the nature of the disqualifying information, will notify the employer, in writing, that disqualifying
280 information has been discovered.
281 (c) An employee against whom disqualifying information under section 23-17.7.1-20(b) has been found may
282 request that a copy of the criminal background report be sent to the employer
283 who shall make a judgment regarding the continued employment of the employee.
284 (d) In those situations in which no disqualifying information has been found, the bureau of criminal
285 identification of the department of attorney general, state police or the local police shall inform the applicant and
286 the employer, in writing, of this fact.
287 (e) The employer shall maintain on file, subject to inspection by the department of health, evidence that
288 criminal records checks have been initiated on all employees. Failure to maintain that evidence would be grounds
289 to revoke the license or registration of the employer.
290 ~~(f) It shall be the responsibility of the bureau of criminal identification of the state police or the local police~~
291 ~~department to conduct the criminal records check to the applicant for employment without charge to either the~~
292 ~~employee or the employer.~~
293 **23-17.7.1-18. Prior criminal records checks.** -- If an applicant for employment has undergone a statewide
294 national criminal records check within eighteen (18) months of an application for employment, then an employer
295 may request from the bureau of criminal identification of the department of attorney general, state police or the
296 local police a letter indicating if any disqualifying information was discovered. The bureau of criminal identification
297 will respond without disclosing the nature of the disqualifying information. The letter may be maintained on file to
298 satisfy the requirements of this chapter.

SECTION 5. Section 23-17.24-2 of the General Laws in Chapter 23-17.24 entitled "The Adult Supportive Care Residence Act" is hereby amended to read as follows:

23-17.24-2. Licensure requirements. -- (a) No person shall operate an adult supportive care home without first obtaining a license from the Rhode Island department of health.

(b) The director is authorized to promulgate regulations for the departmental licensure of adult supportive care homes including, but not limited to, minimum requirements for managers, staffing, staff training, assessments, service plan development, services to include food service and housekeeping/laundry, physical and environment standards for the home, resident rights, resident records, resident capacity for self-preservation, residency agreement/contracts and quality assurance.

(c) The department may adopt regulations for special care requirements beyond the personal assistance required in subdivision 23-17.23-1(5) for adult supportive care homes serving persons with dementia and/or behavioral health diagnoses.

(d) Nationwide criminal ~~Criminal~~ background checks of persons seeking employment at adult supportive care homes shall be conducted in accordance with the standards and procedures contained in sections 23-17.4-27, 23-17.4-28 and 23-17.4-30.

(e) An adult supportive care home shall provide a qualified on-duty staff person over the age of eighteen (18) on the premises at all times that any supportive care residents are on the premises of the home.

SECTION 6. Section 42-9-8.1 of the General Laws in Chapter 42-9 entitled "Department of Attorney General" is hereby amended to read as follows:

42-9-8.1. Office of investigation -- Powers and duties of investigators. -

(1) Establishment. - There is hereby established within the department of attorney general an office of investigation.

(2) Scope and purpose. - The scope and purpose of the office of investigation shall be:

(a) To assist special assistant and assistant attorneys general in carrying out investigations relating to grand jury investigations, pre-trial preparation and other litigation efforts;

(b) To coordinate their efforts in investigating criminal activity with existing federal, state and local law enforcement resources; and

(c) To initiate criminal investigations for violations of the law at the direction of the attorney general.

(3) Composition and powers. - The office of investigation shall consist of a chief, ~~and not more than five (5)~~ field investigators, to be designated by the attorney general, and support personnel. The chief and the field investigators shall have the following powers:

(a) The power to arrest independently or in conjunction with local, state or federal law enforcement agencies;

(b) The power to, with the written authorization by the attorney general or his or her designated deputy, apply for and execute search warrants; and

(c) The power to serve civil and criminal process.

(4) Qualifications. - No person shall be appointed as chief of the office of investigation or as a field investigator in the office unless he or she has successfully completed the basic course of instruction for police officers at the Providence police training academy, the Rhode Island municipal police training academy, or the Rhode Island state police training academy, and has at least three (3) years of active law enforcement experience, or has served as a member of the United States Marshal's Service or as a special agent of the Federal Bureau of Investigation, a criminal law enforcement agency of the United States Department of Justice, the United States Department of State, the United States Department of the Treasury or the United States Postal Inspection Service and has at least three (3) years of active law enforcement experience, or has been certified as a police officer by the duly-constituted state commission on police officer standards and training of another state, and has at least three (3) years of active law enforcement experience.

(5) Appointment background check. - The attorney general shall appoint the chief, field investigators, and the support personnel of the office of investigation. Prior to the appointment of any individuals, a background examination shall be conducted utilizing federal, state and local law enforcement agencies, bureau of criminal identification, national crime information center, and any and all relevant records existing within the federal and state court systems.

(6) Standards. - The office shall adopt and implement such standards as may be applicable to its scope and purpose as promulgated by the commission for the accreditation of law enforcement agencies.

SECTION 7. This act shall take effect upon passage.

☑ voting check off graphic	MOTION: To urge the Attorney General's Office to support the GCD Staff's draft Substitute for 11 S 0828 / 11 H 5628 Acts Relating To Human Services,

	as revised to require PCA training on the individual needs of the consumer, and expand the categories of crimes to include financial and identify theft. AP/KH passed, Abstain TT,LD,BB		
meeting graphic	**Public Forums**		**4:10**
	Purpose/Goal: To assign responsibility for securing locations and hosts for the forums.		
	Discussion: Volunteers to secure locations: LW - Barrington (& follow-up with Looking Upwards for Middletown), LD - Cumberland, AP - Pawtucket, RC - Providence, LD - Cumberland, and LJ (Dawn W) - South County. Ask LR on Warwick. Need to get out sponsorship requests now,		
Announcer graphic	**Announcements**	**Linda Ward**	**4:20**
	None		
calendar graphic	**Agenda and Scheduling the Next Meeting**	**Linda Ward**	4:25
	Items to be placed on the next meeting's agenda:		
	Next meeting will be on: June 13th 3 - 4:30 PM		
alarm clock graphic	**Adjournment**	**Linda Ward**	**4:30**
☑ voting check off graphic	Meeting Adjourn at 4:54		