

		<p align="center"><b>Governor's Commission on Disabilities Legislation Committee Agenda Monday, February 4, 2013 3 - 4:30 PM</b></p> <p align="center">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) <a href="mailto:disabilities@gcd.ri.gov">disabilities@gcd.ri.gov</a> (website) <a href="http://www.disabilities.ri.gov">www.disabilities.ri.gov</a></p>
	<p><b>Attendees:</b> Linda Ward (Chair.); Bill Inlow (Vice Chair.); Sharon Brinkworth, Rosemary C. Carmody, Regina Connor, Joseph Cirillo, Timothy Flynn, Arthur M. Plitt, &amp; Meredith Sheehan</p> <p><b>Absent:</b> Michael Burk, Heather Daglieri, Julie DeRosa, Linda Deschenes, Sarah Everhart Skeels, Casey Gartland, Elaina Goldstein, Kathleen Heren, Paula Parker, Angelina Stabile, Msgr. Gerard O. Sabourin, &amp; Dawn Wardyga</p>	
<p><b>Staff:</b></p>	<p>Bob Cooper, Executive Secretary</p>	
 <p>Clock graphic</p>	<p><b>3:00 Call to Order and Acceptance of the Minutes, Linda Ward, Chair</b></p> <p>Chair calls the meeting to order at 3:06 PM Introductions of Commissioners and guests</p>	
 <p>voting check off graphic</p>	<p><b>MOTION:</b> To accept the minutes of the previous meeting as presented TF/RCo passed unanimously</p>	
<p><b>Action Items:</b></p>		
 <p>Insert graphic</p>	<p><b>3:05 Commission's Legislative Package, Bob Cooper, Executive Secretary</b></p> <p>Purpose/Goal: 1) To review the proposed bill Refocusing the State and Municipal Disability Pension Systems to become Reemployment Programs and 2) To receive an update on the status of the remainder of the Commission's Legislative Package.</p> <p align="center"><b>DRAFT BILL REFOCUSING THE STATE AND MUNICIPAL DISABILITY PENSION SYSTEMS TO BECOME REEMPLOYMENT PROGRAMS</b></p> <p>Discussion: The draft refocusing the pension systems bill was sent to the Governor and General Treasurer's offices for their review and comment. <i>The redrafted bill incorporating their comments will be sent out prior to the 2/4/13 meeting.</i></p>	

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SECTION 1. Sections 16-16-14, 16-16-16 and 16-16-19 of the General Laws in Chapter 16-16 entitled "Teachers' Retirement" are hereby amended to read as follows:

**§ 16-16-14. Retirement for ordinary disability.** - (a) Application for ordinary disability may be made by a teacher, his or her department head, or a person acting in the teacher's behalf, while in active service or on leave of absence for illness, provided that the teacher has had five (5) or more years of total service of which at least three (3) consecutive years shall have been as a teacher, and the teacher is not entitled to a regular service retirement allowance. A statement from a physician shall accompany the application stating that the teacher is physically or mentally incapacitated for the performance of <sup>(delete)</sup>duty<sup>(delete)</sup> <sup>(add)</sup>duties of the position with or without reasonable accommodation<sup>(add)</sup> and that he or she should be retired.

(b) A medical examination of the teacher shall be made by three (3) physicians engaged by the retirement board for this purpose, and should the medical examination show that the teacher is physically or mentally incapacitated for the performance of duty and ought to be retired, the physicians shall so report and certify to the retirement board and the retirement board, may retire the teacher for ordinary disability.

(c) The retirement board shall establish uniform eligibility requirements, standards, and criteria for ordinary disability which shall apply to all members who make application for retirement for ordinary disability.

1 <sup>(add)</sup> (d) The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
2 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

3 **§ 16-16-16. Retirement for accidental disability.** - (a) Medical examination of an active teacher for accidental  
4 disability, and investigation of all statements and certificates by him or her or in his or her behalf in connection with  
5 the accidental disability, shall be made upon the application of the head of the department in which the teacher is  
6 employed or upon application of the teacher, or of a person acting in his or her behalf, stating that the teacher is  
7 physically or mentally incapacitated for the performance of service as a natural and proximate result of an accident,  
8 while in the performance of duty, and certify the definite time, place, and conditions of the duty performed by the  
9 teacher resulting in the alleged disability, and that the alleged disability is not the result of willful negligence or  
10 misconduct on the part of the teacher, and is not the result of age or length of service, and that the teacher should is  
11 physically or mentally incapacitated for the performance of duties of the position with <sup>(add)</sup> with or without reasonable  
12 accommodation, <sup>(add)</sup> therefore, be retired.

13 (b) The application shall be made within five (5) years of the alleged accident from which the injury has resulted in  
14 the teacher's present disability, and shall be accompanied by an accident report and a physician's report certifying to  
15 the disability; provided, that, if the teacher was able to return to his or her employment and subsequently reinjures or  
16 aggravates the same injury, the application shall be made within the later of five (5) years of the alleged accident or  
17 three (3) years of the reinjury or aggravation. The application may also state that the teacher is permanently and  
18 totally disabled <sup>(add)</sup> with or without reasonable accommodation <sup>(add)</sup> from any employment.

19 (c) If a medical examination conducted by three (3) physicians engaged by the retirement board, and any  
20 investigation that the retirement board may desire to make, shall show that the teacher is physically or mentally  
21 incapacitated for the performance of service as a natural and proximate result of an accident, while in the  
22 performance of duty, and that the disability is not the result of willful negligence or misconduct on the part of the  
23 teacher, and is not the result of age or length of service, and that the teacher has not attained the age of sixty-five  
24 (65) years, and that the teacher should be retired, the physicians who conducted the examination shall so certify to  
25 the retirement board stating the time, place, and conditions of service performed by the teacher resulting in the  
26 disability, and the retirement board may grant the teacher an accidental disability benefit.

27 (d) The retirement board shall establish uniform eligibility requirements, standards, and criteria for accidental  
28 disability which shall apply to all members who make application for accidental disability benefits.

29 <sup>(add)</sup> (e) The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
30 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

31 **§ 16-16-19. Reexamination of disability beneficiaries - Reduction of benefit - Reinstatement to active service.** - <sup>(add)</sup>

32 <sup>(add)</sup> (a) Once each year the retirement board may, and upon his or her application shall, require any disability  
33 beneficiary under the minimum age of service retirement to undergo a medical examination, the examination to be  
34 made at the place of residence of the beneficiary, or other place mutually agreed upon, by a physician or physicians  
35 engaged by the retirement board. If the examination indicates that the beneficiary is able to engage in a gainful  
36 occupation, his or her name shall be placed on appropriate lists of candidates prepared for appointment to positions  
37 in his or her department or agency for which he or she is stated to be qualified, of a salary grade not exceeding that  
38 from which he or she was last retired. Should the beneficiary be engaged in a gainful occupation <sup>(add)</sup> with or without  
39 reasonable accommodations, <sup>(add)</sup> or should he or she be offered service as a result of the placing of his or her name  
40 on a list of candidates, the retirement board shall adjust, and, from time to time readjust, the amount of his or her  
41 disability benefit to an amount which shall not exceed the rate of benefit upon which he or she was originally retired,  
42 and which, when added to the amount then earnable by him or her, shall not exceed his or her rate of annual  
43 compensation currently for the classification that the disability annuitant held prior to retirement. Should any disability  
44 beneficiary under the minimum age of service retirement refuse to submit to one medical examination in any year by  
45 a physician or physicians designated by the retirement board, his or her benefit shall be discontinued until his or her  
46 withdrawal of the refusal, and should his or her refusal continue for one year, all his or her rights in and to the benefit  
47 shall be revoked by the retirement board. A disability beneficiary, reinstated to active service, shall be reinstated as a  
48 member and participate in the rights of the retirement system, to the same extent as any other teacher.

49 <sup>(add)</sup> (b) The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
50 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

51 SECTION 2. Chapter 16-16 entitled "Teachers' Retirement" is hereby amended by adding the following section:

52 <sup>(add)</sup> **§16-16-44. Reinstatement of disabled teacher.** - (a) A teacher who absent as a result of the ordinary or  
53 accidental disability shall be reinstated by the teacher's employer to the teacher's former position of employment  
54 upon written demand for reinstatement, if the position exists and is available and the teacher is not disabled from  
55 performing the duties of the position with reasonable accommodation made by the employer in the manner in which  
56 the work is to be performed. A teacher's former position is "available" even if that position has been filled by a  
57 replacement while the teacher was absent as a result of the ordinary or accidental disability. If the former position is  
58 not available, the teacher shall be reinstated in any other existing position that is vacant and suitable. A certificate by  
59 the treating physician that the physician approves the teacher's return to the teacher's regular employment or other  
60 suitable employment shall be prima facie evidence that the teacher is able to perform the duties.

1 (b) The right of reinstatement shall be subject to the provisions for seniority rights and other employment restrictions  
2 contained in a valid collective bargaining agreement between the employer and a representative of the employer's  
3 employees, and nothing shall exempt any employer from or excuse full compliance with any applicable provisions of  
4 the Americans with Disabilities Act, 42 U.S.C. § 12101 et seq., and chapter 87 of title 42<sup>(add)</sup>.

5 SECTION 3. Sections 28-31-5 and 28-31-6 of the General Laws in Chapter 28-31 entitled "Workers' Compensation  
6 - State and Municipal Employees" is hereby amended to read as follows:

7 **§ 28-31-5. Payment of benefits for state employees.** - (a) The expenses incurred for and in behalf of the state under  
8 the provisions of §§ 28-31-3, 28-33-5, 28-33-12, 28-33-16, 28-33-17, 28-33-18, 28-33-19, 28-33-34, 28-33-35, 28-33-  
9 36, 28-33-37, and 28-33-39 and for benefits similar to the benefits provided for employees of employers other than  
10 the state under the provisions of § 28-37-8 as determined by a prior agreement or settled as provided by § 28-31-4 or  
11 by the department's preliminary determination or decree of the workers' compensation court, shall be paid out of any  
12 money in the state treasury not otherwise appropriated and the state controller shall draw his or her order or orders  
13 upon the general treasurer for the payment of the claim in accordance with the provisions of the agreement,  
14 preliminary determination, or decree upon receipt by the controller of a copy of the agreement or preliminary  
15 determination certified by the director or of a copy of the decree certified by the administrator of the workers'  
16 compensation court.

17 (b) Payments for continuing total incapacity until the employee's total incapacity has ended or until his or her death  
18 similar to the payments which are provided for employees of employers other than the state by § 28-37-8 shall in the  
19 case of an employee of the state be paid out of any money in the state treasury not otherwise appropriated.

20 (c) Benefits similar to the provisions of § 28-37-8 shall be paid to employees of the state whose final payment  
21 attaining the maximum limit for compensation for total incapacity as provided by § 28-33-17 is paid subsequent to  
22 January 1, 1969 and who continue to be totally incapacitated for work due to an injury sustained while employed by  
23 the state.

24 (d) The provisions of this section are subject to the provisions of § 28-33-18.2<sup>(add)</sup> suitable alternative employment,  
25 and section 28-33-47, reinstatement of injured worker.<sup>(add)</sup>

26 **§ 28-31-6. Payment of benefits for municipal employees - Action for collection.** - (a) The expenses incurred for and  
27 in behalf of any town or city under the provisions of §§ 28-31-3 and 28-33-5 - 28-33-11, and the amount of  
28 compensation due an employee of a town or city as determined by an agreement with or paid by that town or city, or  
29 by the department's preliminary determination or decree of the workers' compensation court, shall be paid by the  
30 treasurer of that town or city out of any money of the town or city in its hands.

31 (2) The payment shall be made by the treasurer upon receipt by him or her of a certificate of those expenses  
32 satisfactory to him or her, or of a certified copy of the agreement, preliminary determination, or decree under which  
33 the compensation is to be paid; provided, that he or she shall not make any payment until the payment has been  
34 approved by the auditor of the city or town if there is any such officer, and if there is not any such officer, then  
35 payment shall first be approved by the mayor of the city or the president of the town council of the town.

36 (3) If more than one payment of money is made or required by any agreement, preliminary determination, or  
37 decree, the payments shall be made in the manner provided in this section as they become due.

38 (4) If any expenses or compensation required to be paid by a town or city under the provisions of chapters 29 - 38 of  
39 this title or any installment of them is not paid within twenty (20) days after the certificate or certified copy is filed with  
40 the treasurer of the town or city, the expenses or compensation may be collected in the manner in which a judgment  
41 against a town or city may be collected under the provisions of §§ 45-15-5 - 45-15-7.

42 (b) The provisions of this section are subject to the provisions of § 28-33-18.2<sup>(add)</sup> suitable alternative employment,  
43 and section 28-33-47, reinstatement of injured worker.<sup>(add)</sup>

44 SECTION 4. Chapter 28-31 entitled "Workers' Compensation - State and Municipal Employees" is hereby amended  
45 by adding the following section:

46 **§ 28-31-16. Reinstatement of disabled employee.** - (a) A employee who has sustained a compensable injury  
47 shall be reinstated by the employee's employer to the employee's former position of employment upon written  
48 demand for reinstatement, if the position exists and is available and the employee is not disabled from performing the  
49 duties of the position with reasonable accommodation made by the employer in the manner in which the work is to be  
50 performed. A employee's former position is "available" even if that position has been filled by a replacement while the  
51 employee was absent as a result of the ordinary or accidental disability. If the former position is not available, the  
52 employee shall be reinstated in any other existing position that is vacant and suitable. A certificate by the treating  
53 physician that the physician approves the employee's return to the employee's regular employment or other suitable  
54 employment shall be prima facie evidence that the employee is able to perform the duties.

55 (b) The right of reinstatement shall be subject to the provisions for seniority rights and other employment restrictions  
56 contained in a valid collective bargaining agreement between the employer and a representative of the employer's  
57 employees, and nothing shall exempt any employer from or excuse full compliance with any applicable provisions of  
58 the Americans with Disabilities Act, 42 U.S.C. § 12101 et seq., and chapter 87 of title 42.<sup>(add)</sup>

59 SECTION 5. Section 36-4-39 of the General Laws in Chapter 36-4 entitled "Merit System" are hereby amended to  
60 read as follows:

1 § 36-4-39. Retirement or transfer to light duty. - <sup>(add)</sup> (a) <sup>(add)</sup> When an employee has become physically or mentally  
2 incapable of or unfit for the efficient performance of the duties of his or her position <sup>(add)</sup> with or without reasonable  
3 accommodation <sup>(add)</sup> by reason of infirmities due to advanced age or other disability, it shall be the duty of the  
4 appointing authority to transfer the employee to less arduous duties or to order his or her retirement. The appeal  
5 procedure established for dismissals shall apply to retirements ordered under authority of this section.

6 <sup>(add)</sup> (b) The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
7 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

8 SECTION 6. Chapter 36-4 entitled "Merit System" is hereby amended by adding the following section:

9 <sup>(add)</sup> § 36-4-66. Reinstatement of disabled employee. - (a) An employee who absent as a result of the ordinary or  
10 accidental disability shall be reinstated by the employee's employer to the employee's former position of employment  
11 upon written demand for reinstatement, if the position exists and is available and the employee is not disabled from  
12 performing the duties of the position with reasonable accommodation made by the employer in the manner in which  
13 the work is to be performed. A employee's former position is "available" even if that position has been filled by a  
14 replacement while the employee was absent as a result of the ordinary or accidental disability. If the former position is  
15 not available, the employee shall be reinstated in any other existing position that is vacant and suitable. A certificate  
16 by the treating physician that the physician approves the employee's return to the employee's regular employment or  
17 other suitable employment shall be prima facie evidence that the employee is able to perform the duties.

18 (b) The right of reinstatement shall be subject to the provisions for seniority rights and other employment restrictions  
19 contained in a valid collective bargaining agreement between the employer and a representative of the employer's  
20 employees, and nothing shall exempt any employer from or excuse full compliance with any applicable provisions of  
21 the Americans with Disabilities Act, 42 U.S.C. § 12101 et seq., and chapter 87 of title 42. <sup>(add)</sup>

22 SECTION 7. Sections 36-10-12, 36-10-14 and 36-10-17 of the General Laws in Chapter 36-10 entitled "Retirement  
23 System-Contributions and Benefits" are hereby amended to read as follows:

24 § 36-10-12. Retirement for ordinary disability. - (a) Application for ordinary disability may be made by a member, his  
25 or her department head, or a person acting in the member's behalf, while in active service or on leave of absence for  
26 illness, provided that the member has had five (5) or more years of total service of which at least three (3)  
27 consecutive years shall have been as an employee of the state or as a teacher as defined in chapter 16 of title 16 and  
28 the member is not entitled to a regular service retirement allowance. A statement from a physician shall accompany  
29 the application stating that the member is physically or mentally incapacitated for the performance of <sup>(delete)</sup> duty <sup>(delete)</sup>  
30 <sup>(add)</sup> duties of the position with or without reasonable accommodations <sup>(add)</sup> and that he or she should be retired.

31 (b) A medical examination of the member shall be made by three (3) physicians engaged by the retirement board  
32 for this purpose, and should the medical examination show that the member is physically or mentally incapacitated  
33 for the performance of duty and ought to be retired, the physicians shall so report and certify to the retirement board,  
34 and the retirement board may retire the member for ordinary disability.

35 (c) The retirement board shall establish uniform eligibility requirement standards and criteria for ordinary disability  
36 which shall apply to all members who make application for retirement for ordinary disability.

37 (d) <sup>(add)</sup> The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
38 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

39 § 36-10-14. Retirement for accidental disability. - (a) Medical examination of an active member for accidental  
40 disability and investigation of all statements and certificates by him or her or in his or her behalf in connection  
41 therewith shall be made upon the application of the head of the department in which the member is employed or upon  
42 application of the member, or of a person acting in his or her behalf, stating that the member is physically or mentally  
43 incapacitated for the performance of service as a natural and proximate result of an accident while in the performance  
44 of duty, and certify the definite time, place, and conditions of the duty performed by the member resulting in the  
45 alleged disability, and that the alleged disability is not the result of willful negligence or misconduct on the part of the  
46 member, and is not the result of age or length of service, and that the member <sup>(add)</sup> is mentally or physically  
47 incapacitated for the performance of duties of the position with or without reasonable accommodation and <sup>(add)</sup> should,  
48 therefore, be retired.

49 (b) The application shall be made within five (5) years of the alleged accident from which the injury has resulted in  
50 the members present disability and shall be accompanied by an accident report and a physicians report certifying to  
51 the disability; provided that if the member was able to return to his or her employment and subsequently reinjures or  
52 aggravates the same injury, the application shall be made within the later of five (5) years of the alleged accident or  
53 three (3) years of the reinjury or aggravation. The application may also state the member is permanently and totally  
54 disabled from any employment <sup>(add)</sup> with or without reasonable accommodation. <sup>(add)</sup>

55 (c) If a medical examination conducted by three (3) physicians engaged by the retirement board and such  
56 investigation as the retirement board may desire to make shall show that the member is physically or mentally  
57 incapacitated for the performance of service as a natural and proximate result of an accident, while in the  
58 performance of duty, and that the disability is not the result of willful negligence or misconduct on the part of the  
59 member, and is not the result of age or length of service, and that the member has not attained the age of sixty-five  
60 (65), and that the member should be retired, the physicians who conducted the examination shall so certify to the

1 retirement board stating the time, place, and conditions of service performed by the member resulting in the disability  
2 and the retirement board may grant the member an accidental disability benefit.

3 (d) The retirement board shall establish uniform eligibility requirements, standards, and criteria for accidental  
4 disability which shall apply to all members who make application for accidental disability benefits.

5 (e) <sup>(add)</sup>The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
6 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

7 **§ 36-10-17. Reexamination of disability beneficiaries - Reduction of benefit - Reinstatement to active service. -**

8 <sup>(add)</sup>(a) <sup>(add)</sup> Once each year the retirement board may, and upon his or her application shall, require any disability  
9 beneficiary under the minimum age of service retirement to undergo a medical examination. The examination to be  
10 made at the place of residence of the beneficiary or other place mutually agreed upon by a physician or physicians  
11 engaged by the retirement board. If the examination indicates that the beneficiary is able to engage in a gainful  
12 occupation <sup>(add)</sup>with or without reasonable accommodation, <sup>(add)</sup> his or her name shall be placed on such appropriate  
13 lists of candidates as are prepared for appointment to positions in his or her department or agency for which he or  
14 she is stated to be qualified and for a salary grade not exceeding that from which he or she was last retired. Should  
15 the beneficiary be engaged in a gainful occupation or should he or she be offered service as a result of the placing of  
16 his or her name on a list of candidates, the retirement board shall adjust and from time to time readjust, the amount of  
17 his or her disability benefit to an amount which shall not exceed the rate of benefit upon which he or she was  
18 originally retired, and which, when added to the amount then earnable by him or her, shall not exceed his or her rate  
19 of annual compensation currently for the classification that the disability annuitant held prior to retirement. Should any  
20 disability beneficiary under the minimum age of service retirement refuse to submit to one medical examination in any  
21 year by a physician or physicians designated by the retirement board, his or her benefit shall be discontinued until his  
22 or her withdrawal of the refusal and should his or her refusal continue for one year, all his or her rights in and to  
23 disability benefit shall be revoked by the retirement board. A disability beneficiary, reinstated to active service, shall  
24 be reinstated as a member and participate in the rights of the retirement system to the same extent as any other  
25 member.

26 (b) <sup>(add)</sup>The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
27 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

28 SECTION 8. Chapter 36-10 entitled "Retirement System-Contributions and Benefits" is hereby amended by adding  
29 the following section:

30 <sup>(add)</sup>**§ 36-10-41. Reinstatement of disabled member. -** (a) A member who absent as a result of the ordinary or  
31 accidental disability shall be reinstated by the member's employer to the member's former position of employment  
32 upon written demand for reinstatement, if the position exists and is available and the member is not disabled from  
33 performing the duties of the position with reasonable accommodation made by the employer in the manner in which  
34 the work is to be performed. A member's former position is "available" even if that position has been filled by a  
35 replacement while the member was absent as a result of the ordinary or accidental disability. If the former position is  
36 not available, the member shall be reinstated in any other existing position that is vacant and suitable. A certificate by  
37 the treating physician that the physician approves the member's return to the member's regular employment or other  
38 suitable employment shall be prima facie evidence that the member is able to perform the duties.

39 (b) The right of reinstatement shall be subject to the provisions for seniority rights and other employment restrictions  
40 contained in a valid collective bargaining agreement between the employer and a representative of the employer's  
41 employees, and nothing shall exempt any employer from or excuse full compliance with any applicable provisions of  
42 the Americans with Disabilities Act, 42 U.S.C. § 12101 et seq., and chapter 87 of title 42. <sup>(add)</sup>

43 SECTION 9. Sections 45-21-19, 45-21-21 and 45-21-23 of the General Laws in Chapter 45-21 entitled "Retirement  
44 of Municipal Employees" are hereby amended to read as follows:

45 **§ 45-21-19. Retirement for ordinary disability. -** (a) Any member who has had five (5) or more years of total service,  
46 may, upon the member's own application or upon application of the employer, or some person acting in the member's  
47 behalf, while in active service or on leave of absence for illness, apply for ordinary disability retirement; provided, that  
48 the member is not entitled to a regular service retirement allowance and; provided, that the member has at least three  
49 (3) consecutive years of service as an employee of a participating municipality within the five (5) years needed to be  
50 eligible under this section.

51 (b) A statement from a physician shall accompany the application stating that the member is physically or mentally  
52 incapacitated for the performance of <sup>(delete)</sup> ~~duty~~ <sup>(delete)</sup> ~~duty~~ <sup>(add)</sup> duties of the position with or without reasonable  
53 accommodation <sup>(add)</sup> and that the member ought to be retired.

54 (c) A medical examination of the member shall be made by three (3) physicians engaged by the retirement board  
55 for this purpose, and should the medical examination show that the member is physically or mentally incapacitated  
56 for the performance of duty and ought to be retired, the physicians shall so report and certify to the retirement board  
57 and the retirement board may retire the member for ordinary disability.

58 (d) The retirement board shall establish uniform eligibility requirement standards and criteria for ordinary disability  
59 which apply to all members who make application for retirement for ordinary disability.

60 (e) <sup>(add)</sup>The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
61 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

1 § 45-21-21. Retirement for accidental disability. - (a) Any member in active service, regardless of length of service,  
2 is entitled to an accidental disability retirement allowance. Application for the allowance shall be made by the member  
3 or on the member's behalf, stating that the member is physically or mentally incapacitated for further service <sup>(add)</sup>with  
4 or without reasonable accommodation <sup>(add)</sup> as the result of an injury sustained while in the performance of duty and  
5 certifying the time, place, and conditions of the duty performed by the member which resulted in the alleged disability,  
6 and that the alleged disability was not the result of the willful negligence or misconduct on the part of the member,  
7 and was not the result of age or length of service, and that the member has not attained the age of sixty-five (65). The  
8 application shall be made within five (5) years of the alleged accident from which the injury has resulted in the  
9 member's present disability and shall be accompanied by an accident report and a physician's report certifying the  
10 disability. If a medical examination made by three (3) physicians engaged by the retirement board, and other  
11 investigations as the board may make, confirm the statements made by the member, the board may grant the  
12 member an accidental disability retirement allowance.

13 (b) The retirement board shall establish uniform eligibility requirements, standards and criteria for accidental  
14 disability which apply to all members who make application for accidental disability benefits.

15 (c) <sup>(add)</sup>The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
16 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

17 § 45-21-23. Periodical examination of disability annuitants - Placement on employment lists. - (a) At least once each  
18 year the retirement board may, and upon application shall, require any disability annuitant under the minimum age for  
19 service retirement, whether in receipt of an ordinary disability retirement allowance or an accidental disability  
20 retirement allowance, to undergo a medical examination, the examination to be made at the place of residence of the  
21 annuitant, or other place mutually agreed upon, by a physician or physicians engaged by the retirement board.

22 (b) If the examination indicates that the annuitant is able to engage in a gainful occupation <sup>(add)</sup>with or without  
23 reasonable accommodation, <sup>(add)</sup> the annuitant's name shall be placed on appropriate lists of candidates that are  
24 prepared for appointment to positions in the annuitant's department for which the annuitant is stated to be qualified, of  
25 a salary grade not less than that from which the annuitant was last retired.

26 (c) <sup>(add)</sup>The provisions of this section are subject to the provisions of section 28-33-18.2 suitable alternative  
27 employment and section 28-33-47 reinstatement of injured worker. <sup>(add)</sup>

28 SECTION 10. Chapter 45-21 entitled "Retirement of Municipal Employees" is hereby amended by adding the  
29 following section:

30 <sup>(add)</sup> § 45-21-67. Reinstatement of disabled member. - (a) A member who is absent as a result of the ordinary or  
31 accidental disability shall be reinstated by the member's employer to the member's former position of employment  
32 upon written demand for reinstatement, if the position exists and is available and the member is not disabled from  
33 performing the duties of the position with reasonable accommodation made by the employer in the manner in which  
34 the work is to be performed. A member's former position is "available" even if that position has been filled by a  
35 replacement while the member was absent as a result of the ordinary or accidental disability. If the former position is  
36 not available, the member shall be reinstated in any other existing position that is vacant and suitable. A certificate by  
37 the treating physician that the physician approves the member's return to the member's regular employment or other  
38 suitable employment shall be prima facie evidence that the member is able to perform the duties.

39 (b) The right of reinstatement shall be subject to the provisions for seniority rights and other employment restrictions  
40 contained in a valid collective bargaining agreement between the employer and a representative of the employer's  
41 employees, and nothing shall exempt any employer from or excuse full compliance with any applicable provisions of  
42 the Americans with Disabilities Act, 42 U.S.C. § 12101 et seq., and chapter 87 of title 42. <sup>(add)</sup>

43 SECTION 11. This act shall take effect on January 1, 2014.

 voting check off graphic	<b>MOTION:</b> To authorize and direct staff to find sponsors to introduce the Refocusing the State and Municipal Disability Pension Systems to become Reemployment Programs bill, as presented RCo/JC passed unanimously
	<b>H 5099 AN ACT CREATING A SPECIAL JOINT COMMISSION TO STUDY THE QUALITY OF LIFE AND CREATE POSITIVE OUTCOMES FOR INDIVIDUALS WITH AUTISM IN THE STATE OF RHODE ISLAND</b> <b>Introduced By:</b> Representative Peter G. Palumbo <b>Date Introduced:</b> January 16, 2013 <b>Referred To:</b> House Health, Education & Welfare, 01/31/2013 House passed This resolution would create a twenty-three (23) member special joint commission whose purpose it would be to make a comprehensive study to improve the quality of life and create positive outcomes for individuals with autism spectrum disorders and

their families in the State of Rhode Island and who would report back to the General Assembly no later than January 28, 2014, and said commission would expire on June 13, 2014.

1

1-1 <sup>{add}</sup>RESOLVED, That a special joint commission be and the same is hereby created  
1-2 consisting of twenty-three (23) members: two (2) of whom shall be members of the House of  
1-3 Representatives, not more than one of whom shall be from the same political party, to be  
1-4 appointed by the Speaker of the House; two (2) of whom shall be members of the Senate, not  
1-5 more than one of whom shall be from the same political party, to be appointed by the President of  
1-6 the Senate; one of whom shall be the Commissioner of the Department of Elementary and  
1-7 Secondary Education, or designee; one of whom shall be the Director of the Department of  
1-8 Human Services, or designee; one of whom shall be the Director of the Department of Health, or  
1-9 designee; one of whom shall be the Director of the Department of Children, Youth, and Families,  
1-10 or designee; one of whom shall be the Director of the Department of Behavioral Healthcare,  
1-11 Developmental Disabilities, and Hospitals, or designee; one of whom shall be the Executive  
1-12 Director of The Autism Project of Rhode Island, or designee; one of whom shall be the President  
1-13 of the National Autism Association, or designee; one of whom shall be the President of the Rhode  
1-14 Island Chapter-Autism Society of America; one of whom shall be a diagnostician, to be appointed  
1-15 by the Speaker; one of whom shall be a researcher, to be appointed by the Speaker; one of whom  
1-16 shall be the Director of Clinical and Educational Services from Pathways Strategic Teaching  
1-17 Center, or designee; one of whom shall be the Director of the Association of Rhode Island  
1-18 Administrators of Special Education, to be appointed by the Speaker; one of whom shall be a  
1-19 Special Education Director from Rhode Island College, to be appointed by the Speaker; one of  
1-20 whom shall be the Director of Development Pediatrics from Rhode Island Hospital, or designee;  
2-1 one of whom shall be from the Department of Special Education at Salve Regina University, to  
2-2 be appointed by the Speaker; one of whom shall be the Executive Director of The Groden Center,  
2-3 or designee; one of whom shall a representative from the Paul V. Sherlock Center on Disabilities;  
2-4 and two (2) of whom shall be parents of an individual with Autism, one of whom shall be  
2-5 appointed by the Speaker, and one of whom shall be appointed by the Senate President.  
2-6 In lieu of any appointment of a member of the legislature to a permanent advisory  
2-7 commission, a legislative study commission, or any commission created by a General Assembly  
2-8 resolution, the appointing authority may appoint a member of the general public to serve in lieu  
2-9 of a legislator, provided that the majority leader or the minority leader of the political party which  
2-10 is entitled to the appointment consents to the appointment of the member of the general public.  
2-11 The purpose of said commission shall be to make a comprehensive study to improve the  
2-12 quality of life and create positive outcomes for individuals with autism spectrum disorders and  
2-13 their families in the state of Rhode Island.  
2-14 Upon passage of this resolution, the members of the commission shall meet at the call of  
2-15 the Speaker of the House and President of the Senate and organize and shall select, from among  
2-16 the legislators, a chairperson.  
2-17 Vacancies in said commission shall be filled in like manner as the original appointment.  
2-18 The membership of said commission shall receive no compensation for their services.  
2-19 All departments and agencies of the state shall furnish such advice and information,  
2-20 documentary and otherwise, to said commission and its agents as is deemed necessary or  
2-21 desirable by the commission to facilitate the purposes of this resolution.  
2-22 The Joint Committee on Legislative Services is hereby authorized and directed to provide  
2-23 suitable quarters for said commission; and be it further  
2-24 RESOLVED, That the commission shall report its findings and recommendations to the  
2-25 General Assembly no later than January 28, 2014, and said commission shall expire on June 13,  
2-26 2014.<sup>{add}</sup>

2 a. Restore the 2008 children with autism spectrum disorders eligibility rules;	Support advocates for restoration of the autism spectrum disorder eligibility rules
c. Improve services for adults with autism spectrum disorders;	Support advocates working on legislation to improve services to adults with autism spectrum disorders



voting check off graphic

**MOTION:** To find 13 H 5099 AN ACT CREATING A SPECIAL JOINT COMMISSION TO STUDY THE QUALITY OF LIFE AND CREATE POSITIVE OUTCOMES FOR INDIVIDUALS WITH AUTISM IN THE STATE OF RHODE ISLAND to match the Commission's Legislative Initiative on Autism, as presented WI/TF passed unanimously.

**H 5073 AN ACT RELATING TO PUBLIC UTILITIES AND CARRIERS -- PUBLIC TRANSIT INVESTMENT**

**Introduced By:** Representatives O`Grady, Tanzi, Handy, Tomasso, and Keable

**Date Introduced:** January 15, 2013

**Referred To:** House Finance

This act would include public transit in the Rhode Island highway maintenance fund and accelerate the surcharges that support the fund. The funds shall be apportioned as follows: Sixty-five percent to the department of transportation to be used for highway maintenance and 35% percent to the RI public transit authority (RIPTA) to be used in maintaining, enhancing, and/or expanding services.

This act would take effect on July 1, 2013.

- 1-1 SECTION 1. Sections 39-18.1-2, 39-18.1-3, 39-18.1-4 and 39-18.1-5 of the General  
1-2 Laws in Chapter 39-18.1 entitled "Transportation Investment and Debt Reduction Act of 2011"  
1-3 are hereby amended to read as follows:  
1-4 **39-18.1-2. Legislative findings.** -- The general assembly finds that:  
1-5 (1) Rhode Island now has, and for some years has had, a serious shortfall of funds  
1-6 available for the upkeep, maintenance and repair of the state's highways, roads, and bridges.  
1-7 (2) Rhode Island now funds, and for some years has funded, the local twenty percent  
1-8 (20%) match required to bring federal transportation dollars into the state by means of selling  
1-9 bonds. This has proven unsustainable and creates unaffordable debt-service obligations for future  
1-10 generations of Rhode Island taxpayers.  
1-11 (3) The health, safety, and convenience of Rhode Island's citizens are seriously and  
1-12 adversely affected when the state's highways, roads, and bridges are not kept in a proper state of  
1-13 upkeep, maintenance and repair.  
1-14 (4) A critically important function of the state in maintaining the health, safety, and  
1-15 welfare of all the people of Rhode Island is to ensure the proper upkeep, maintenance and repair  
1-16 of the state's highways, roads, and bridges.  
1-17 <sup>(add)</sup> (5) The Rhode Island public transit authority, which depends heavily on proceeds of the  
1-18 gasoline tax for its operating budget, has suffered significantly in recent years due to high  
1-19 volatility of gasoline prices with a resulting volatility in both the level of gasoline sales and the  
1-20 amount of gasoline tax proceeds from such sales.  
2-1 (6) Availability of convenient, affordable public transit is critically important to Rhode  
2-2 Island's economic health and security because many Rhode Islanders depend on public transit in  
2-3 order to get to their places of employment, medical appointments, schools, and to carry on their  
2-4 daily activities.  
2-5 (7) A critically important function of the state in maintaining the health, safety, and  
2-6 welfare of all the people of Rhode Island is to ensure the continued functioning and reliability of  
2-7 public transit in Rhode Island. <sup>(add)</sup>  
2-8 ~~(5)~~ <sup>(delete)</sup> ~~(5)~~ <sup>(delete)</sup> ~~(5)~~ <sup>(add)</sup> (8) <sup>(add)</sup> Rhode Island must consider all potential sustainable sources as a vehicle for

2-9 maintaining and improving the transportation infrastructure of the state, <sup>(add)</sup>including public transit<sup>(add)</sup>.

2-10 ~~(6)~~ <sup>(add)</sup> (9) <sup>(add)</sup> Additional stable and secure funding sources are absolutely necessary in order for

2-11 the state to carry out its essential functions, including the upkeep, maintenance and repair of the

2-12 state's highways, roads, and bridges, and providing for the continued functioning and reliability of

2-13 public transit. In order to avoid to the full extent possible the creation of enormous and

2-14 unaffordable debt-service obligations for future generations of Rhode Islanders, these funding

2-15 sources should be created on a pay-as-you-go basis, and bonding should be reduced to the fullest

2-16 extent practicable.

2-17 **39-18.1-3. Definitions.** -- When used in this chapter:

2-18 (1) "Department of Transportation" means the department created by chapter 13 of title

2-19 42 of the general laws of Rhode Island.

2-20 (2) "Director" means the director of the Rhode Island department of transportation.

2-21 (3) "Highway maintenance" means the upkeep, maintenance, and repair of the state's

2-22 highways, roads, and bridges, including repaving or resurfacing the same.

2-23 (4) "State Planning Council" means the state planning council within the division of

2-24 planning of the department of administration, as established by Rhode Island general laws section

2-25 42-11-10.

2-26 (5) "Transportation Improvement Program" means the transportation improvement

2-27 program that is created and amended from time to time by the state planning council.

2-28 <sup>(add)</sup> (6) "Authority" means the Rhode Island public transit authority, established by chapter

2-29 18 of title 39 of the general laws of Rhode Island. <sup>(add)</sup>

2-30 ~~39-18.1-4.~~ <sup>(delete)</sup> ~~Rhode Island highway maintenance trust fund created~~ <sup>(delete)</sup> <sup>(add)</sup> Rhode Island

2-31 highway maintenance and public transit trust fund created. <sup>(add)</sup> -- (a) There is hereby created a

2-32 special account in the general fund to be known as the Rhode Island Highway Maintenance <sup>(add)</sup> and

2-33 Public Transit <sup>(add)</sup> Trust Fund.

3-34 (b) The fund shall consist of all those moneys which the state may from time to time

3-35 direct to the fund, including, but not necessarily limited to, moneys derived from the following

3-36 sources:

3-37 (1) There is imposed a surcharge of thirty dollars (\$30.00) per passenger car and light

3-38 truck to be paid by each car and light truck owner in order to register that owner's vehicle and

3-39 upon each subsequent biennial registration. This surcharge <sup>(add)</sup> will be effective <sup>(add)</sup> ~~(delete)~~ ~~shall be phased in at~~

3-40 ~~the rate of ten dollars (\$10.00) each year. The total surcharge will be ten dollars (\$10.00) from~~

3-41 ~~July 1, 2013 through June 30, 2014, twenty dollars (\$20.00) from July 1, 2014 through June 30,~~

3-42 ~~2015, and thirty dollars (\$30.00)~~ <sup>(delete)</sup> from July 1, <sup>(delete)</sup> ~~2015~~ <sup>(delete)</sup> <sup>(add)</sup> 2013 <sup>(add)</sup> through June 30, <sup>(delete)</sup>

3-43 ~~2016~~ <sup>(delete)</sup> <sup>(add)</sup> 2014 <sup>(add)</sup> and each

3-44 year thereafter.

3-45 (2) There is imposed a surcharge of fifteen dollars (\$15.00) per car and truck, for those

3-46 cars and trucks subject to annual registration, to be paid annually by each car and truck owner in

3-47 order to register that owner's vehicle and upon each subsequent annual registration. This

3-48 surcharge will be <sup>(add)</sup> effective <sup>(add)</sup> ~~(delete)~~ ~~phased in at the rate of five dollars (\$5.00) each year. The total~~

3-49 ~~surcharge will be five dollars (\$5.00) from July 1, 2013 through June 30, 2014, ten dollars~~

3-50 ~~(\$10.00) from July 1, 2014 through June 30, 2015, and fifteen dollars (\$15.00)~~ <sup>(delete)</sup> -from July 1,

3-51 <sup>(delete)</sup> ~~2015~~ <sup>(delete)</sup> <sup>(add)</sup> 2013 <sup>(add)</sup> through June 30, <sup>(delete)</sup> ~~2016~~ <sup>(delete)</sup> <sup>(add)</sup> 2014 <sup>(add)</sup> and each year thereafter.

3-52 (3) There is imposed a surcharge of thirty dollars (\$30.00) per operator's license to be

3-53 paid every five (5) years by each licensed operator of motor vehicles. This surcharge will be

3-54 phased in at the rate of ten dollars (\$10.00) each year. The total surcharge will be <sup>(add)</sup> effective <sup>(add)</sup> ~~(delete)~~ ~~ten~~

3-55 ~~dollars (\$10.00) from July 1, 2013 through June 30, 2014, twenty dollars (\$20.00) from July 1,~~

3-56 ~~2014 through June 30, 2015, and thirty dollars (\$30.00)~~ <sup>(delete)</sup> from July 1, <sup>(delete)</sup> ~~2015~~ <sup>(delete)</sup> <sup>(add)</sup> 2013 <sup>(add)</sup> through

3-57 June 30,

3-58 <sup>(delete)</sup> ~~2016~~ <sup>(delete)</sup> 2014 and each year thereafter.

3-59 <sup>(add)</sup> (4) Notwithstanding any other provision of law to the contrary, all fees paid to the general

3-58 treasury for biennial passenger car and light truck registration and for annual car and truck

3-59 registrations according to the following schedule:

3-60 (i) Beginning in fiscal year 2013, twenty percent (20%) of the fees described in this  
3-61 subsection which are collected by the division of motor vehicles shall be transferred to the Rhode  
3-62 Island highway maintenance and public transit trust fund and the remainder shall be deposited to  
3-63 the general fund.

3-64 (ii) Beginning in fiscal year 2014, forty percent (40%) of the fees described in this  
3-65 subsection which are collected by the division of motor vehicles shall be transferred to Rhode  
3-66 Island highway maintenance and public transit trust fund and the remainder shall be deposited to  
3-67 the general fund.

4-68 (iii) Beginning in fiscal year 2015, sixty percent (60%) of the fees described in this  
4-69 subsection which are collected by the division of motor vehicles shall be transferred to Rhode  
4-70 Island highway maintenance and public transit trust fund and the remainder shall be deposited to  
4-71 the general fund.

4-72 (iv) Beginning in fiscal year 2016, eighty percent (80%) of the fees described in this  
4-73 subsection which are collected by the division of motor vehicles shall be transferred to Rhode  
4-74 Island highway maintenance and public transit trust fund and the remainder shall be deposited to  
4-75 the general fund.

4-76 (v) Beginning in fiscal year 2017, and continuing thereafter in perpetuity, one hundred  
4-77 percent (100%) of the fees described in this subsection which are collected by the division of  
4-78 motor vehicles shall be transferred to Rhode Island highway maintenance and public transit trust  
4-79 fund and the remainder shall be deposited to the general fund.<sup>(add)</sup>

4-80 (c) All funds collected pursuant to this section shall be deposited in the highway  
4-81 maintenance fund<sup>(add)</sup> and public transit trust fund<sup>(add)</sup> and shall be used only for the purposes set forth in  
4-82 this chapter.

4-83 (d) Unexpended balances and any earnings thereon shall not revert to the general fund  
4-84 but shall remain in the highway maintenance<sup>(add)</sup> and public transit trust<sup>(add)</sup> fund. There shall be no  
4-85 requirement that moneys received into the highway maintenance fund during any given calendar  
4-86 year or fiscal year be expended during the same calendar year or fiscal year.

4-87 (e) The highway maintenance<sup>(add)</sup> and public transit trust<sup>(add)</sup> fund shall be administered by the  
4-88 director, who shall allocate and spend moneys from the fund only in accordance with the  
4-89 purposes and procedures set forth in this chapter.

4-90 **39-18.1-5. Allocation of funds.** -- (a) The monies in the<sup>(add)</sup> Rhode Island<sup>(add)</sup> highway  
4-91 maintenance<sup>(add)</sup> and public transit trust fund<sup>(add)</sup> ~~to be directed to the department of transportation~~  
4-92 ~~pursuant to subdivision (a)(1) of this section shall be allocated through the transportation~~  
4-93 ~~improvement program process to provide the state match for federal transportation funds, in place~~  
4-94 ~~of borrowing, as approved by the state planning council.~~<sup>(delete)</sup> <sup>(add)</sup> shall be apportioned as follows:

4-95 (1) Sixty-five percent (65%) to the department of transportation to be used for highway  
4-96 maintenance, to offset borrowing in accordance with subsection (c) of this section.

4-97 (2) Thirty-five percent (35%) to the authority to be used in maintaining, enhancing,  
4-98 and/or expanding services. These funds may be used by the authority for capital expenditures  
4-99 according to the restrictions contained in subdivision (b)(2) of this section, or for routine  
4-100 operations and maintenance, or any combination of those.<sup>(add)</sup>

4-101 <sup>(add)</sup> (b)(1)<sup>(add)</sup> The expenditure of moneys in the<sup>(add)</sup> Rhode Island<sup>(add)</sup> highway maintenance<sup>(add)</sup> and public  
4-102 transit trust<sup>(add)</sup> fund<sup>(add)</sup> by the department of transportation<sup>(add)</sup> shall only be authorized for projects that  
5-1 appear in the state's transportation improvement program<sup>(add)</sup> plan as the same has been approved by  
5-2 the transportation advisory committee.

5-3 (2) To the extent that moneys in the Rhode Island highway maintenance and public  
5-4 transit trust fund are expended by the authority for capital expenditure, all such expenditures must  
5-5 first be approved by the state planning council, which shall only authorize expenditures for such  
5-6 capital projects that appear in the state's transportation improvement plan as the same has been  
5-7 approved by the transportation advisory committee.

5-8 (c) Moneys received by the department of transportation pursuant to subdivision (a)(1) of  
5-9 this section shall be used to provide the state match for federal transportation funds, in place of  
5-10 borrowing.<sup>(add)</sup>

5-11 SECTION 2. This act shall take effect on July 1, 2013.

<p>1. Transportation to Employment, job training, education, health care, etc.</p> <p>a. Maintain the existing RIPTA/RIde service areas;</p> <p>b. Adequate funding/new &amp; stable funding source;</p> <p>c. Expand the RIPTA/RIde service areas/hours beyond the existing service/hours</p>	<p>Support RI Coalition for Transportation Choices' funding efforts and encouraging a phased in funding approach</p>
 <p>voting check off graphic</p>	<p>MOTION: To find 13 H 5073 AN ACT RELATING TO PUBLIC UTILITIES AND CARRIERS -- PUBLIC TRANSIT INVESTMENT to match the Commission's Legislative Initiative on Transportation, as encouraging a phased in funding approach RCo/AP passed unanimously</p>
<p>S 0092 AN ACT RELATING TO INSURANCE - COVERAGE FOR PRESCRIPTION DRUGS</p> <p><b>Introduced By:</b> Sen. Crowley</p> <p><b>Date Introduced:</b> January 22, 2013</p> <p><b>Referred To:</b> Senate Health &amp; Human Services</p> <p>This act would prevent health insurance policies, plans or contracts that provide coverage for prescription drugs from requiring a beneficiary to use an alternative brand name prescription drug or over-the-counter drug prior to using a brand name prescription drug prescribed by a licensed physician.</p> <p>This act would take effect upon passage.</p>	

1-1 SECTION 1. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service  
1-2 Corporations" is hereby amended by adding thereto the following section:  
1-3 <sup>{add}</sup>**27-19-70. Coverage for prescription drugs. --** (a) Every individual or group health  
1-4 insurance contract, or every individual or group hospital or medical expense insurance policy,  
1-5 plan, or group policy issued for delivery, or renewed in this state on or after the enactment of this  
1-6 section that provides coverage for prescription drugs shall not require an insured to use, prior to  
1-7 using a brand name prescription drug prescribed by a licensed prescriber, any alternative brand  
1-8 name prescription drugs or over-the-counter drugs.  
1-9 (b) Health insurance contracts, plans or policies to which this section applies may require  
1-10 An insured to use, prior to using a brand name prescription drug prescribed by a licensed  
1-11 prescriber, a therapeutically equivalent generic drug, unless, pursuant to sections 5-19.1-19, 5-37-  
1-12 18.1 and 21-31-15(b), the prescriber indicates "brand name necessary" on the prescription form,  
1-13 or if the prescriber gives oral direction to that effect to the dispensing pharmacist. <sup>{add}</sup>  
1-14 SECTION 2. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service  
1-15 Corporations" is hereby amended by adding thereto the following section:  
1-16 <sup>{add}</sup>**27-20-66. Coverage for prescription drugs. --** (a) Every individual or group health  
1-17 insurance contract, or every individual or group hospital or medical expense insurance policy,  
1-18 plan, or group policy issued for delivery, or renewed in this state on or after the enactment of this  
1-19 section that provides coverage for prescription drugs shall not require an insured to use, prior to  
1-20 using a brand name prescription drug prescribed by a licensed prescriber, any alternative brand  
2-1 name prescription drugs or over-the-counter drugs.  
2-2 (b) Health insurance contracts, plans or policies to which this section applies may require  
2-3 an insured to use, prior to using a brand name prescription drug prescribed by a licensed  
2-4 prescriber, a therapeutically equivalent generic drug, unless, pursuant to sections 5-19.1-19, 5-37-  
2-5 18.1 and 21-31-15(b), the prescriber indicates "brand name necessary" on the prescription form,  
2-6 or if the prescriber gives oral direction to that effect to the dispensing pharmacist. <sup>{add}</sup>  
2-7 SECTION 3. Chapter 27-41 of the General Laws entitled "Health Maintenance  
2-8 Organizations" is hereby amended by adding thereto the following section:  
2-9 <sup>{add}</sup>**27-41-83. Coverage for prescription drugs. --** (a) Every individual or group health  
2-10 insurance contract, or every individual or group hospital or medical expense insurance policy,

- 2-11 [plan, or group policy issued for delivery, or renewed in this state on or after the enactment of this](#)  
 2-12 [section that provides coverage for prescription drugs shall not require an insured to use, prior to](#)  
 2-13 [using a brand name prescription drug prescribed by a licensed prescriber, any alternative brand](#)  
 2-14 [name prescription drugs or over-the-counter drugs.](#)  
 2-15 [\(b\) Health insurance contracts, plans or policies to which this section applies may require](#)  
 2-16 [an insured to use, prior to using a brand name prescription drug prescribed by a licensed](#)  
 2-17 [prescriber, a therapeutically equivalent generic drug, unless, pursuant to sections 5-19.1-19, 5-37-](#)  
 2-18 [18.1 and 21-31-15\(b\), the prescriber indicates “brand name necessary” on the prescription form,](#)  
 2-19 [or if the prescriber gives oral direction to that effect to the dispensing pharmacist.](#)<sup>{add}</sup>  
 2-20 SECTION 4. This act shall take effect upon passage.

<p>2 b. <b>No failure first drugs:</b> Restore the right to medically necessary brand name drugs without requiring two generic failures before allowing brand name;</p>	<p>Support advocates working on the right to medically necessary brand name drugs</p>
<p><input checked="" type="checkbox"/> voting check off graphic</p> <p>MOTION: To find 13 S 0092 AN ACT RELATING TO INSURANCE - COVERAGE FOR PRESCRIPTION DRUGS to match the Commission’s Legislative Initiative on No Failure First Drugs, as presented TF/SB passed Abstained AP</p>	

A DRAFT ACT RELATING TO PRESCRIPTION DRUG BENEFITS (STEP THERAPY)  
 SECTION 1. Section 27-20.8-2 of the General Laws in Chapter 27-20.8 entitled “Prescription Drug Benefits” is hereby amended to read as follows:

**27-20.8-2 Pharmacy benefit, limits and co-payments.** – Any health plan that offers pharmacy benefits shall comply with the following:

(a) <sup>(delete)</sup>When a <sup>(delete)</sup> <sup>(add)</sup> A <sup>(delete)</sup> health plan’s pharmacy benefit <sup>(delete)</sup> has <sup>(delete)</sup> <sup>(add)</sup> shall not have <sup>(add)</sup> a dollar limit <sup>(delete)</sup>; ~~the insured’s use of such benefit shall be determined based on the health plan’s contracted rate to purchase the drug minus the enrollee’s applicable co-payment for covered drugs. The balance will apply towards the enrollee’s dollars limit~~ <sup>(delete)</sup>.

(b) <sup>(add)</sup>Each health plan shall establish a separate out-of-pocket limit for prescription drugs, including specialty drugs, equal to the maximum dollar amounts in effect under Section 223(b)(2) of the Internal Revenue Code for self-only and family coverage, respectively. For the purposes of this section, the use of the term “out-of-pocket limit” must be consistent with the definitions of those terms as prescribed by the Secretary of the United States Department of Health and Human Services pursuant to Section 2715 of the federal Affordable Care Act.

(c) <sup>(add)</sup> When a health plan charges a co-payment for covered prescription drugs that is based on a percent of the drug cost, the health plan shall disclose within the group policy or individual policy benefits description statement whether the co-payment is based on the plan’s contracted rate to purchase the drug or some other cost basis such as retail price.

<sup>(add)</sup>(d) Nothing in this section shall apply to the title XIX state plan pursuant to title XIX of the Social Security Act to provide Medicaid coverage or title XXI state plan pursuant to title XXI of the Social Security Act to provide medical assistance coverage. The services provided shall be in accord with title XIX [42 U.S.C. § et seq.] and title XXI [42 U.S.C. § 1397 et seq.] of the Social Security Act. <sup>(add)</sup>

SECTION 2. Section 27-18-50 of the General Laws in Chapter 27-18, entitled “Accident and Sickness Insurance Policies” is hereby amended to read as follows:

**27-18-50 Drug coverage.** – (a) Any accident and sickness insurer that utilizes a formulary of medications for which coverage is provided under an individual or group plan master contract shall require any physician or other person authorized by the department of health to prescribe medication to prescribe from the formulary. A physician or other person authorized by the department of health to prescribe medication shall be allowed to prescribe medications previously on, or not on, the accident and sickness insurer’s formulary if he or she believes that the prescription of the non-formulary medication is medically necessary. An accident and sickness insurer shall be required to provide coverage for a non-formulary medication only when the non-formulary medication meets the accident and sickness insurer’s medical exception criteria for the coverage of that medication.

(b) An accident and sickness insurer’s medical exception criteria for the coverage of non-formulary medications shall <sup>(add)</sup> <sup>(add)</sup> <sup>(delete)</sup> be <sup>(delete)</sup> <sup>(add)</sup> (1) Be <sup>(add)</sup> developed in accordance with § 23-17.13-3(c)(3); <sup>(add)</sup> and

(2) Adhere to federal Food and Drug Administration prescription drug labeling. <sup>(add)</sup>

(c) Any subscriber who is aggrieved by a denial of benefits to be provided under this section may appeal the denial in accordance with the rules and regulations promulgated by the department of health pursuant to chapter 17.12 of title 23.

(d) <sup>(add)</sup>Nothing in this section shall be construed to prevent health care providers from prescribing a medication for an off-label use. <sup>(add)</sup>

<sup>(add)</sup>(e) <sup>(add)</sup>This section shall not apply to insurance coverage providing benefits for: (1) hospital confinement indemnity; (2) disability income; (3) accident only; (4) long term care; (5) Medicare supplement; (6) limited benefit health; (7) specified disease indemnity; (8) sickness or bodily injury or death by accident or both; or (9) other limited benefit policies.

SECTION 3. Section 27-19-42 of the General Laws in Chapter 27-19 entitled “Nonprofit Hospital Service Corporations” is hereby amended to read as follows:

**27-19-42 Drug coverage.** – (a) Any nonprofit hospital service corporation that utilizes a formulary of medications for which coverage is provided under an individual or group plan master contract shall require any physician or other person authorized by the department of health to prescribe medication to prescribe from the formulary. A physician or other person authorized by the department of health to prescribe medication shall be allowed to prescribe medications previously on, or not on, the nonprofit hospital service corporation's formulary if he or she believes that the prescription of the non-formulary medication is medically necessary. A nonprofit hospital service corporation shall be required to provide coverage for a non-formulary medication only when the non-formulary medication meets the nonprofit hospital service corporation's medical exception criteria for the coverage of that medication.

(b) A nonprofit hospital service corporation's medical exception criteria for the coverage of non-formulary medications shall <sup>(add)</sup>. <sup>(add)</sup> ~~be~~ <sup>(delete)</sup>

<sup>(add)</sup>(1) Be <sup>(add)</sup> developed in accordance with § 23-17.13-3(c)(3); <sup>(add)</sup> and

(2) Adhere to federal Food and Drug Administration prescription drug labeling. <sup>(add)</sup>

(c) Any subscriber who is aggrieved by a denial of benefits to be provided under this section may appeal the denial in accordance with the rules and regulations promulgated by the department of health pursuant to chapter 17.12 of title 23.

<sup>(add)</sup>(d) Nothing in this section shall be construed to prevent health care providers from prescribing a medication for an off-label use. <sup>(add)</sup>

SECTION 4. Section 27-20-37 of the General Laws in Chapter 27-20 entitled “Nonprofit Medical Service Corporations is hereby amended to read as follows:

**27-20-37 Drug coverage.** – (a) Any nonprofit medical service corporation that utilizes a formulary of medications for which coverage is provided under an individual or group plan master contract shall require any physician or other person authorized by the department of health to prescribe medication to prescribe from the formulary. A physician or other person authorized by the department of health to prescribe medication shall be allowed to prescribe medications previously on, or not on, the nonprofit medical service corporation's formulary if he or she believes that the prescription of the non-formulary medication is medically necessary. A nonprofit hospital service corporation shall be required to provide coverage for a non-formulary medication only when the non-formulary medication meets the nonprofit medical service corporation's medical exception criteria for the coverage of that medication.

(b) A nonprofit medical service corporation's medical exception criteria for the coverage of non-formulary medications shall <sup>(add)</sup>. <sup>(add)</sup> ~~be~~ <sup>(delete)</sup>

<sup>(add)</sup>(1) Be <sup>(add)</sup> developed in accordance with § 23-17.13-3(c)(3); <sup>(add)</sup> and

(2) Adhere to federal Food and Drug Administration prescription drug labeling. <sup>(add)</sup>

(c) Any subscriber who is aggrieved by a denial of benefits to be provided under this section may appeal the denial in accordance with the rules and regulations promulgated by the department of health pursuant to chapter 17.12 of title 23.

<sup>(add)</sup>(d) Nothing in this section shall be construed to prevent health care providers from prescribing a medication for an off-label use. <sup>(add)</sup>

SECTION 5. Section 27-41-51 of the General Laws in Chapter 27-41 entitled “Prescription Drug Benefits” is hereby amended to read as follows:

**27-41-51 Drug coverage.** – (a) Any health maintenance organization that utilizes a formulary of medications for which coverage is provided under an individual or group plan master contract shall require any physician or



making sure the 2008 level of services stay in place for persons with severe disabilities:	
a. Restore the 2008 Katie Beckett eligibility rules;	Support advocates for restoration of the Katie Beckett rules
d. Retain multiple behavioral healthcare service delivery models;	Support advocates working on retaining multiple behavioral healthcare service delivery models
e. Maintain developmental disability service funding; and	Support advocates working on retaining developmental disability service funding
f. Post-Global Medicaid Consumer Choice Waiver Transition Plan	Arrange for a subcommittee to meeting with EOHHS Secretary, monitor the development of the state's proposal to CMS and comment on the draft proposal <sup>1</sup>
<b>3. Housing Supports</b> and other services for people with behavioral health concerns: a. Restore the Neighborhood Opportunities Program funding; and b. Create a supportive housing program; and c. Expansion of Affordable Housing - require at least 2 additional affordable housing units for cities and towns that have not met the affordable housing goals	Support RI Coalition for the Homeless' efforts to establish a stable funding source for the Neighborhood Opportunities Program & supportive housing
<b>5. Accessibility to Services:</b> a. Provide interpreter services for ancillary healthcare programs or supports (including peer supports); and b. Provide closed captions of all Capitol Television programming	Support Commission on the Deaf and Hard of Hearing's funding efforts



**3:30 Consideration of New Bills/Budget Articles, Bob Cooper, Executive Secretary**

Purpose/Goal: 1) To make recommendations to the Commission regarding the impact of disability related Budget Articles  
2) To review and determine the impact of recently introduced bills that might impact people with disabilities

Discussion: The Commission's Executive Committee requests the Legislation Committee review and comment on the impact of the following Budget Articles on people with disabilities. The options are to recommend the Commission:

- ✓ Support;
- ✓ Oppose;
- ✓ Propose Amendments; or
- ✓ Take no position.

**ARTICLE 15 RELATING TO HUMAN RESOURCE INVESTMENT COUNCIL**  
This article provides that the Human Resource Investment Council shall develop a state work immersion program and a non-trade apprenticeship program to provide post-secondary school students and unemployed adults a meaningful work experience. It further provides that, for the work immersion program, the Job Development Fund shall reimburse eligible businesses up to 50 percent of the cost of not more than 200 hours of work during a ten week period.  
*The article does not specifically include persons with disabilities as eligible for this program,*

<sup>1</sup> Designated Bob Cooper to be the Commission's lead advocate on post global Medicaid consumer choice waiver transition plans

Starting on Page 115 of the Budget Act

ARTICLE 15

RELATING TO HUMAN RESOURCE INVESTMENT COUNCIL

SECTION 1. Chapter 42-102 of the General Laws entitled "Rhode Island Human

Resource Investment Council" is hereby amended by adding thereto the following section:

<sup>(add)</sup>§ 42-102-11. State Work Immersion Program. -- (a)(1) The council shall develop a state work immersion program and a non-trade apprenticeship program. For the purposes of this section work immersion shall mean a temporary, paid work experience that provides a meaningful learning opportunity and increases the employability of the participant. The programs shall be designed in order to provide post-secondary school students and unemployed adults with a meaningful work experience, and to assist businesses by training individuals for potential employment.

(2) Funding for the work immersion program will be allocated from the Job Development Fund account and/or from funds appropriated in the annual appropriations act. Appropriated funds will match investments made by businesses in providing meaningful work immersion positions and non-trade apprenticeships.

(b) For each participant in the work immersion program, the program shall reimburse eligible businesses up to fifty percent (50%) of the cost of not more than two hundred (200) hours of work experience and during a period of ten (10) weeks. If an eligible business hires a program participant at the completion of such a program, the state may provide reimbursement for a total of seventy-five percent (75%) of the cost of the work immersion position.

(c) The council shall create a non-trade apprenticeship program and annually award funding on a competitive basis to at least one (1) new initiative proposed and operated by the Governor's Workforce Board Industry Partnerships. This program shall meet the standards of apprenticeship programs defined pursuant to section 28-45-9 of the general laws. The council shall present the program to the State Apprenticeship Council, established pursuant to chapter 28-45 of the general laws, for review and consideration.

(d) An eligible participant in programs established in subsections (b) and (c) must be at least eighteen (18) years of age and must be a Rhode Island resident. Provided, however, any non-Rhode Island resident, who is enrolled in a college or university located in Rhode Island, is eligible to participate while enrolled at the college or university.

(e) In order to fully implement the provisions of this section, the council is authorized to promulgate rules and regulations. In developing rules and regulations, the council shall consult with the Governor's Workforce Board. The rules and regulations shall define eligible businesses that can participate in the programs created by this section.<sup>(add)</sup>

SECTION 2.



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MOTION: To ask the Governor's Policy Office to attend the next committee meeting to discuss potential amendments to ARTICLE 15 RELATING TO HUMAN RESOURCE INVESTMENT COUNCIL RCa/AP passed unanimously

ARTICLE 17 RELATING TO EMERGENCY AND PUBLIC COMMUNICATION ACCESS FUND

This article creates a new restricted receipt account in the Commission of the Deaf and Hard of Hearing and provides funding the for technology required to provide communication access for the deaf and hard of hearing population during periods of emergencies or in other necessary situations.

Starting on Page 119 of the Budget Act

ARTICLE 17

RELATING TO EMERGENCY AND PUBLIC COMMUNICATION ACCESS FUND

SECTION 1. Section 39-1-42 of the General Laws in Chapter 39-1 entitled Public "

Utilities Commission is hereby amended to read as follows: "

6           **§ 39-1-42. Access to telephone information services for persons with disabilities.** --(a) The  
7 public utilities commission shall establish, administer and promote an information accessibility  
8 service that includes:

9           (1) A statewide telephone relay service and, through the competitive bidding process, contract for  
10 the administration and operation of such a relay system for utilization of the telecommunications network  
11 by deaf, hard of hearing and speech impaired persons;

12           (2) The adaptive telephone equipment loan program capable of servicing the needs of persons  
13 who are deaf, hard of hearing, severely speech impaired, or those with neuromuscular impairments for use  
14 with a single party telephone line, to any subscriber who is certified as deaf, hard of hearing, severely  
15 speech impaired, or with neuromuscular impairments by a licensed physician, audiologist, speech  
16 pathologist, or a qualified state agency, pursuant to chapter 23 of this title; and

17           (3) A telephone access to the text of newspaper programs to residents who are blind, deaf or  
18 blind, visually impaired, or reading impaired with a single party telephone line.

19           (b) The commission shall establish, by rule or regulation, an appropriate funding mechanism to  
20 recover the costs of providing this service from each residence and business telephone access line or trunk  
21 in the state, including PBX trunks and centrex equivalent trunks and each service line or trunk, and upon  
22 each user interface number or extension number or similarly identifiable line, trunk, or path to or from a  
23 digital network. Notwithstanding the foregoing, there shall not be any additional funding mechanism used  
24 to charge each residence and business telephone access line or truck in the state, including PBX trunks  
25 and centrex equivalent trunks and each service line or trunk, or upon each user interface number or  
26 extension number or similarly identifiable line, trunk or path to or from a digital network, to recover the  
27 costs of providing the services outlined in subsections (a)(1), (2) or (3) above.

28           © The commission, with the assistance of the state commission on the deaf and hard of hearing,  
29 shall also develop the appropriate rules, regulations and service standards necessary to implement the  
30 provisions of subsection (a)(1) of this section. At a minimum, however, the commission shall require,  
31 under the terms of the contract, that the relay service provider:

32           (1) Offer its relay services seven (7) days a week, twenty-four (24) hours a day, including  
33 Holidays;

34           (2) Hire only qualified salaried operators with deaf language skills; and

1           (3) Maintain the confidentiality of all communications.

2           ~~(e)~~ <sup>{add}</sup> (d) <sup>{add}</sup> The commission shall collect from the telecommunications service providers the  
3 amounts of the surcharge collected from their subscribers and remit to the department of human services  
4 an additional ten thousand dollars (\$10,000) annually commencing in fiscal year 2005 for the adaptive  
5 telephone equipment loan program and forty thousand dollars (\$40,000) to the department of human  
6 services for the establishment of a new telephone access to the text of newspaper programs. <sup>{add}</sup> In addition,  
7 eighty thousand dollars (\$80,000) shall annually be remitted to the Rhode Island Commission on the Deaf  
8 and Hard of Hearing for an emergency and public communication access program, pursuant to section 23-  
9 1.8-4 of the Rhode Island General Laws, as amended. <sup>{add}</sup> The surcharge referenced hereunder shall be  
10 generated from existing funding mechanisms and shall not be generated as a result of any new funding  
11 mechanisms charged to each residence and business telephone access line or trunk in the state, including  
12 PBX trunks and centrex equivalent trunks and each service line or trunk, or upon each user interface  
13 number or extension number or similarly identifiable line, trunk or path to or from a digital network.

14           SECTION 2. Chapter 23-1.8 of the General Laws entitled Commission on the Deaf and “  
15 Hard of Hearing is hereby amended by adding thereto the following section: “

16           <sup>{add}</sup> **§ 23-1.8-4. Emergency and public communication access account.** - (a) There is established  
17 within the general fund the emergency and public communication access account, which shall be referred  
18 to as the EPCA account. This purpose of this account is to create emergency communication and enhance  
19 public communication access for deaf and hard of hearing people, in accordance with subsection 39-1-  
20 42(e) of the Rhode Island General Laws, as amended. In addition, the account shall be used to enhance  
21 emergency communication systems to alert deaf and hard of hearing people to any type of emergencies  
22 within the state.

23           (b) The fund shall purchase and install public communication access equipment and  
24 products at public sites for deaf and hard of hearing citizens.

25           (c) The commission is authorized to establish, administer and promote its emergency and public

26 [communication access program.](#)  
 27 [\(d\) The commission is authorized to make purchases specifically for the EPCA program](#)  
 28 [and empowered to receive donations and grants from sources including, but not limited to, the federal](#)  
 29 [government, governmental and private foundations, and corporate and individual donors; these donations](#)  
 30 [and grants to be deposited in the EPCA account.](#)  
 31 [\(e\) The commission is authorized to promulgate rules and regulations that will set forth how the](#)  
 32 [commission shall utilize the EPCA account.](#)  
 33 [communications, the Commission shall confer with applicable departments and agencies.](#) <sup>{add}</sup>  
 34 SECTION 3. This article shall take effect upon passage.

 <p>voting check off graphic</p>	<p><b>MOTION: To recommend the Commission support ARTICLE 17 RELATING TO EMERGENCY AND PUBLIC COMMUNICATION ACCESS FUND TF/RCa passed unanimously</b></p>
	<p><b>ARTICLE 19 RELATING TO MEDICAL ASSISTANCE</b>          This article suspends scheduled cost-of-living adjustments in FY 2014 for both nursing facilities and hospital services under the Medical Assistance program. This article also authorizes the expansion of Medicaid eligibility to childless adults up to 138 percent of the federal poverty level in conformance with provisions of the Affordable Care Act; and empowers the Executive Office of Health and Human Services to pursue the renewal or extension of the Section 1115 Research and Demonstration Waiver or other waivers as deemed appropriate.</p>

Starting on Page 133 of the Budget Act

14 **ARTICLE 19**  
 15 **RELATING TO MEDICAL ASSISTANCE**  
 16 SECTION 1. Sections 40-8-13.4 and 40-8-19 of the General Laws in Chapter 40-8 entitled  
 17 "Medical Assistance" are hereby amended to read as follows:  
 18 **§ 40-8-13.4. Rate methodology for payment for in state and out of state hospital services.**-(a)  
 19 The <sup>{delete}</sup> department <sup>{delete}</sup> <sup>{add}</sup> executive office of <sup>{add}</sup> health and human services shall implement a new  
 20 methodology for  
 21 payment for in state and out of state hospital services in order to ensure access to and the provision of  
 22 high quality and cost-effective hospital care to its eligible recipients.  
 23 (b) In order to improve efficiency and cost effectiveness, the <sup>{delete}</sup> department <sup>{delete}</sup> <sup>{add}</sup> executive  
 24 office  
 25 health and <sup>{add}</sup> human services shall:  
 26 (1) With respect to inpatient services for persons in fee for service Medicaid, which is non-  
 27 managed care, implement a new payment methodology for inpatient services utilizing the Diagnosis  
 28 Related Groups (DRG) method of payment, which is, a patient classification method which provides a  
 29 means of relating payment to the hospitals to the type of patients cared for by the hospitals. It is  
 30 understood that a payment method based on Diagnosis Related Groups may include cost outlier payments  
 31 and other specific exceptions. The <sup>{delete}</sup> department <sup>{delete}</sup> <sup>{add}</sup> executive office <sup>{add}</sup> will review the DRG  
 32 payment method and  
 33 the DRG base price annually, making adjustments as appropriate in consideration of such elements as  
 34 trends in hospital input costs, patterns in hospital coding, beneficiary access to care, and the Center for  
 1 Medicare and Medicaid Services national CMS Prospective Payment System (IPPS) Hospital Input Price  
 2 index.  
 3 (B) With respect to inpatient services, (i) it is required as of January 1, 2011 until December 31,  
 4 2011, that the Medicaid managed care payment rates between each hospital and health plan shall not  
 5 exceed ninety and one tenth percent (90.1%) of the rate in effect as of June 30, 2010. Negotiated increases  
 6 in inpatient hospital payments for each annual twelve (12) month period beginning January 1, 2012 may  
 7 not exceed the Centers for Medicare and Medicaid Services national CMS Prospective Payment System  
 8 (IPPS) Hospital Input Price index for the applicable period; (ii) <sup>{add}</sup> provided, however, for the twelve (12)  
 9 month period beginning July 1, 2013 the Medicaid managed care payment rates between each hospital  
 and health plan shall not exceed the payment rates in effect as of January 1, 2013; (iii) negotiated  
 increases in inpatient hospital payments for each annual twelve (12) month period beginning July 1, 2014  
 may not exceed the Centers for Medicare and Medicaid Services national CMS Prospective Payment

10 System (IPPS) Hospital Input Price Index, less Productivity Adjustment, for the applicable period; (iv) <sup>{add}</sup>  
11 The Rhode Island <sup>{delete}</sup>department<sup>{delete}</sup> executive office of health and human services will develop an audit  
12 methodology and process to assure that savings associated with the payment reductions will accrue  
13 directly to the Rhode Island Medicaid program through reduced managed care plan payments and shall  
14 not be retained by the managed care plans; <sup>{delete}</sup>(iii) <sup>{delete}</sup>(v) <sup>{add}</sup> All hospitals licensed in Rhode Island  
15 shall accept  
16 such payment rates as payment in full; and <sup>{delete}</sup>(iv) <sup>{delete}</sup>(vi) <sup>{add}</sup> for all such hospitals, compliance with  
17 the provisions  
18 of this section shall be a condition of participation in the Rhode Island Medicaid program.  
19 (2) With respect to outpatient services and notwithstanding any provisions of the law to the  
20 contrary, for persons enrolled in fee for service Medicaid, the <sup>{delete}</sup>department<sup>{delete}</sup> <sup>{add}</sup>executive office<sup>{add}</sup>  
21 will reimburse  
22 hospitals for outpatient services using a rate methodology determined by the <sup>{delete}</sup>department<sup>{delete}</sup>  
23 <sup>{add}</sup>executive office<sup>{add}</sup>  
24 and in accordance with federal regulations. Fee-for-service outpatient rates shall align with Medicare  
25 payments for similar services. <sup>{delete}</sup>Changes<sup>{delete}</sup> <sup>{add}</sup>Notwithstanding the above, there shall be no increase  
26 in the  
27 Medicaid fee-for-service outpatient rates effective July 1, 2013. Thereafter, changes <sup>{add}</sup>  
28 will be implemented on July 1 each year <sup>{add}</sup>and shall align with Medicare payments for similar services from  
29 the prior federal fiscal year <sup>{add}</sup>. With respect to the outpatient rate, (i) it is required as of January 1, 2011 until  
30 December 31, 2011, that the Medicaid managed care payment rates between each hospital and health plan  
31 shall not exceed one hundred percent (100%) of the rate in effect as of June 30, 2010. Negotiated  
32 increases in hospital outpatient payments for each annual twelve (12) month period beginning January 1,  
33 2012 may not exceed the Centers for Medicare and Medicaid Services national CMS Outpatient  
34 Prospective Payment System (OPPS) hospital price index for the applicable period. <sup>{add}</sup> ;(ii) provided,  
1 however, for the twelve (12) month period beginning July 1, 2013 the Medicaid managed care outpatient  
2 payment rates between each hospital and health plan shall not exceed the payment rates in effect as of  
3 January 1, 2013; (iii) negotiated increases in outpatient hospital payments for each annual twelve (12)  
4 month period beginning July 1, 2014 may not exceed the Centers for Medicare and Medicaid Services  
5 national CMS Outpatient Prospective Payment System (OPPS) Hospital Input Price Index, less <sup>{add}</sup>  
6 Productivity Adjustment, for the applicable period.  
7 © It is intended that payment utilizing the Diagnosis Related Groups method shall reward  
8 hospitals for providing the most efficient care, and provide the <sup>{delete}</sup>department<sup>{delete}</sup> <sup>{add}</sup>executive office <sup>{add}</sup>  
9 the  
10 opportunity to conduct value based purchasing of inpatient care.  
11 (d) The director secretary of the <sup>{delete}</sup>department<sup>{delete}</sup> <sup>{add}</sup>executive office <sup>{add}</sup> of <sup>{add}</sup> health and <sup>{add}</sup>  
12 human services <sup>{delete}</sup>and/or<sup>{delete}</sup>  
13 <sup>{delete}</sup>the secretary of executive office of health and human services<sup>{delete}</sup> is hereby authorized to promulgate  
14 such  
15 rules and regulations consistent with this chapter, and to establish fiscal procedures he or she deems  
16 necessary for the proper implementation and administration of this chapter in order to provide payment to  
17 hospitals using the Diagnosis Related Group payment methodology. Furthermore, amendment of the  
18 Rhode Island state plan for medical assistance (Medicaid) pursuant to Title XIX of the federal Social  
19 Security Act is hereby authorized to provide for payment to hospitals for services provided to eligible  
20 recipients in accordance with this chapter.  
21 (e) The <sup>{delete}</sup>department<sup>{delete}</sup> <sup>{add}</sup>executive office <sup>{add}</sup> shall comply with all public notice  
22 requirements necessary to  
23 implement these rate changes.  
24 (f) As a condition of participation in the DRG methodology for payment of hospital services,  
25 every hospital shall submit year-end settlement reports to the <sup>{delete}</sup>department<sup>{delete}</sup> <sup>{add}</sup>executive office <sup>{add}</sup>  
26 within one year  
27 from the close of a hospital's fiscal year. Should a participating hospital fail to timely submit a year-end  
28 settlement report as required by this section, the <sup>{delete}</sup>department<sup>{delete}</sup> <sup>{add}</sup>executive office <sup>{add}</sup> shall withhold  
29 financial  
30 cycle payments due by any state agency with respect to this hospital by not more than ten percent (10%)  
31 until said report is submitted. For hospital fiscal year 2010 and all subsequent fiscal years, hospitals will

21 not be required to submit year-end settlement reports on payments for outpatient services. For hospital  
22 fiscal year 2011 and all subsequent fiscal years, hospitals will not be required to submit year-end  
23 settlement reports on claims for hospital inpatient services. Further, for hospital fiscal year 2010, hospital  
24 inpatient claims subject to settlement shall include only those claims received between October 1, 2009  
25 and June 30, 2010.

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

30 ~~(h) The director of the Department of Human Services shall establish an independent study~~  
31 ~~commission comprised of representatives of the hospital network, representatives from the communities~~  
32 ~~the hospitals serve, state and local policy makers and any other stakeholders or consumers interested in~~  
33 ~~improving the access and affordability of hospital care.~~

34 ~~The study commission shall assist the director in identifying: issues of concern and priorities in the~~  
1 ~~community hospital system, the delivery of services and rate structures, including graduate medical~~  
2 ~~education and training programs; and opportunities for building sustainable and effective public-private~~  
3 ~~partnerships that support the missions of the department and the state's community hospitals.~~

4 ~~The director of the Department of Human Services shall report to the chairpersons of the House~~  
5 ~~and Senate Finance Committees the findings and recommendations of the study commission by~~  
6 ~~December 31, 2010.~~ ~~(delete)~~

7 **§ 40-8-19. Rates of payment to nursing facilities.** - (a) Rate reform. (1) The rates to be paid by  
8 the state to nursing facilities licensed pursuant to chapter 17 of title 23, and certified to participate in the  
9 Title XIX Medicaid program for services rendered to Medicaid-eligible residents, shall be reasonable and  
10 adequate to meet the costs which must be incurred by efficiently and economically operated facilities in  
11 accordance with 42 U.S.C. § 1396a(a)(13). The executive office of health and human services shall  
12 promulgate or modify the principles of reimbursement for nursing facilities in effect as of July 1, 2011 to  
13 be consistent with the provisions of this section and Title XIX, 42 U.S.C. § 1396 et seq., of the Social  
14 Security Act.

15 (2) The executive office of health and human services ("Executive Office") shall review the  
16 current methodology for providing Medicaid payments to nursing facilities, including other long-term  
17 care services providers, and is authorized to modify the principles of reimbursement to replace the current  
18 cost based methodology rates with rates based on a price based methodology to be paid to all facilities  
19 with recognition of the acuity of patients and the relative Medicaid occupancy, and to include the  
20 following elements to be developed by the executive office:

21 (i) A direct care rate adjusted for resident acuity;

22 (ii) An indirect care rate comprised of a base per diem for all facilities;

23 (iii) A rearray of costs for all facilities every three (3) years beginning October, 2015, which may  
24 or may not result in automatic per diem revisions;

25 (iv) Application of a fair rental value system;

26 (v) Application of a pass-through system; and

27 (vi) Adjustment of rates by the change in a recognized national nursing home inflation index to be  
28 applied on October 1<sup>st</sup> of each year, beginning October 1, 2012. [\(add\) This adjustment will not occur on](#)  
29 [October 1, 2013, but will resume on October 1, 2014.](#) [\(add\)](#) Said inflation index shall be applied without regard  
30 for the transition factor in subsection (b)(2) below.

31 (b) Transition to full implementation of rate reform. For no less than four (4) years after the initial  
32 application of the price-based methodology described in subdivision (a)(2) to payment rates, the  
33 ~~department~~ [\(add\) executive office of health and human services](#) [\(add\)](#) shall implement a transition plan to  
moderate

1 the impact of the rate reform on individual nursing facilities. Said transition shall include the following  
2 components:

3 (1) No nursing facility shall receive reimbursement for direct care costs that is less than the rate  
4 of reimbursement for direct care costs received under the methodology in effect at the time of passage of  
5 this act; and

6 (2) No facility shall lose or gain more than five dollars (\$5.00) in its total per diem rate the first

7 year of the transition. The adjustment to the per diem loss or gain may be phased out by twenty-five  
8 percent (25%) each year; and

9 (3) The transition plan and/or period may be modified upon full implementation of facility per  
10 diem rate increases for quality of care related measures. Said modifications shall be submitted in a report  
11 to the general assembly at least six (6) months prior to implementation.

12 SECTION 2. Title 40 of the General Laws entitled "Human Services" is hereby amended by  
13 adding thereto the following chapter:

14 <sup>{add}</sup> CHAPTER 40-8.11  
15 HEALTH CARE FOR ADULTS

16 **§ 40-8.11-1 Purpose.** - Pursuant to § 42-12.3-2, it is the intent of the general assembly to create  
17 access to comprehensive health care for uninsured Rhode Islanders. The Rhode Island Medicaid program  
18 has become an important source of insurance coverage for low income pregnant women, families with  
19 children, elders, and persons with disabilities who might not be able otherwise to obtain or afford health  
20 care. Under the U.S. Patient Protection and Affordable Care Act (ACA) of 2010, all Americans will be  
21 required to have health insurance, with some exceptions, beginning in 2014. Federal funding is available  
22 with ACA implementation to help pay for health insurance for low income adults, age 19 to 64, who do  
23 not qualify for Medicaid eligibility under RI general and public laws. It is the intent of the general  
24 assembly, therefore, to implement the Medicaid expansion for childless adults authorized by the ACA, to  
25 extend health insurance coverage to these Rhode Islanders and further the goal established in § 42-12.3-2  
26 in 1993.

27 **§ 40-8.11-2 Eligibility-** (a) *Medicaid coverage for non-pregnant adults without children.* There  
28 is hereby established, effective January 1, 2014, a category of Medicaid eligibility pursuant to Title XIX  
29 of the Social Security Act, as amended by the U.S. Patient Protection and Affordable Care Act (ACA) of  
30 2010, 42 U.S.C. § 1396u-1, for adults ages 19 to 64 who do not have children and do not qualify for  
31 Medicaid under RI general laws applying to families with children and adults who are blind, aged or  
32 living with a disability. The executive office of health and human services is directed to make any  
33 amendments to the Medicaid state plan and waiver authorities established under Title XIX necessary to  
34 implement this expansion in eligibility and assure the maximum federal contribution for health insurance  
1 coverage provided pursuant to this chapter. (b) Income. The secretary of the executive office of health  
2 and human services is authorized and directed to amend the Medicaid Title XIX state plan and, as deemed  
3 necessary, any waiver authority to effectuate this expansion of coverage to any Rhode Islander who  
4 qualifies for Medicaid eligibility under this chapter with income at or below one hundred and thirty eight  
5 percent (138%) the federal poverty level, based on modified adjusted gross income. @ Delivery system.  
6 The executive office of health and human services is authorized and directed to apply for and obtain any  
7 waiver authorities necessary to provide persons eligible under this chapter with managed, coordinated  
8 health care coverage consistent with the principles set forth in § 42-12.4, pertaining to a health care home.  
9 <sup>{add}</sup>

9 SECTION 3. Section 42-12.4-8 of the General Laws in Chapter 42-12.4 entitled "The Rhode  
10 Island Medicaid Reform Act of 2008" is hereby amended to read as follows:

11 **§ 42-12.4-8** <sup>{delete}</sup> ~~Demonstration termination~~ <sup>{delete}</sup> ~~,~~ <sup>{add}</sup> Demonstration expiration or termination. <sup>{add}</sup> -  
12 In the  
13 event the demonstration is suspended or terminated for any reason, or in the event that the demonstration  
14 expires, <sup>{delete}</sup> ~~the department of human services, in conjunction with~~ <sup>{delete}</sup> the executive office of health and  
15 human  
16 services, is directed and authorized to apply for and <sup>{delete}</sup> ~~obtain all waivers~~ <sup>{delete}</sup> <sup>{add}</sup> an extension or renewal  
17 of the  
18 Section 1115 Research and Demonstration Waiver or any new waiver(s) that, at a minimum, ensure  
19 continuation of the waiver authorities <sup>{add}</sup> in existence prior to the acceptance of the demonstration. The  
20 office  
21 <sup>{add}</sup> shall ensure that any such actions are conducted in accordance with applicable federal guidelines  
pertaining to Section 1115 demonstration waiver renewals, extensions, suspensions or terminations <sup>{add}</sup>. The  
department of human services and the executive office of health and human services to the extent possible  
shall ensure that said ~~waivers~~ <sup>{add}</sup> waiver authorities <sup>{add}</sup> are reinstated prior to any suspension, termination,  
or  
expiration of the demonstration.



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MOTION: To ask Executive Office of Health and Human Services to discuss ARTICLE 19 RELATING TO MEDICAL ASSISTANCE AP/RCa passed unanimously

ARTICLE 20 RELATING TO MEDICAID REFORM ACT OF 2008

The article establishes the legal authority for the Executive Office of Health and Human Services to undertake a series of programmatic reforms within the Medicaid program in FY 2014:

- (a) *Nursing Facility Payment Rates - Eliminate Rate Increase.*
- (b) *Medicaid Hospital Payment Rates - Eliminate Adjustments*
- (c) *Integrated Care Initiative - Implementation Phase-in*
- (d) *BHDDH System Reforms - Implementation of Employment First and Housing First Initiative*
- (e) *Costs Not Otherwise Matchable (CNOM) Federal Funding*
- (f) *Medicaid Requirements and Opportunities under the U.S. Patient Protection and Affordable Care Act of 2010*

This article consists of a resolution that is in conformance with RIGL 42-12.4-7.

Starting on Page 138 of the Budget Act

ARTICLE 20

RELATING TO MEDICAID REFORM ACT OF 2008

[\(add\) SECTION 1. Rhode Island Medicaid Reform Act of 2008.](#)

[WHEREAS, the General Assembly enacted Chapter 12.4 of Title 42 entitled "The Rhode Island Medicaid Reform Act of 2008"; and](#)

[WHEREAS, a Joint Resolution is required pursuant to Rhode Island General Laws § 42-12.4-1, et seq.; and](#)

[WHEREAS, Rhode Island General Law § 42-12.4-7 provides that any change that requires the 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 by the general assembly; and](#)

[WHEREAS, Rhode Island General Law § 42-7.2-5 provides 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 II or III 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 as 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 general assembly approval of the following proposals to amend the demonstration:](#)

[\(a\) Nursing Facility Payment Rates - Eliminate Rate Increase. The Medicaid agency proposes to eliminate the projected nursing facility rate increase and associated hospice rate increase that would otherwise become effective during state fiscal year 2014. A Category II change is required to implement this proposal under the terms and conditions of the Global Consumer Choice Compact Waiver. Further, this change may also require the adoption of new or amended rules, regulations and procedures.](#)

[\(b\) Medicaid Hospital Payment Rates - Eliminate Adjustments. The Medicaid single state agency proposes to reduce hospital payments by eliminating the projected inpatient and outpatient hospital rate increase for state fiscal year 2014. A Category II change is required to implement this proposal under the terms and conditions of the Global Consumer Choice Compact Waiver. Further, this change may also require the adoption of new or amended rules, regulations and procedures.](#)

[© Integrated Care Initiative - Implementation Phase-in. The Medicaid single state agency proposes to continue implementation of the Medicaid Integrated Care Initiative for Adults authorized](#)

25 [under the Rhode Island Medicaid Reform Act of 2008, as amended in 2011. Moving the initiative](#)  
26 [forward may require Category II changes under the terms and conditions of the Global Consumer Choice](#)  
27 [Compact Waiver and the adoption of new or amended rules, regulations and procedures.](#)

28 [\(d\) BHDDH System Reforms - Implementation of Employment First and Housing First Initiative.](#)  
29 [As part of ongoing reforms promoting rehabilitation services that enhance a person's dignity, self-worth](#)  
30 [and connection to the community, the Department of Behavioral Healthcare, Developmental Disabilities,](#)  
31 [and Hospitals proposes to change Medicaid financing to support the Employment First and Housing First](#)  
32 [initiatives. Both initiatives use reductions in Medicaid payments to provide incentives for service](#)  
33 [alternatives that optimize health and independence. The resulting changes in payment rates may require](#)  
1 [Category II changes under the terms and conditions of the Global Consumer Choice Compact Waiver and](#)  
2 [the adoption of new or amended rules, regulations and procedures.](#)

3 [\(e\) Costs Not Otherwise Matchable \(CNOM\) Federal Funding.](#)  
4 [Patient Protection and Affordable Care Act of 2010 will render it unnecessary for the Medicaid agency to](#)  
5 [continue to pursue federal CNOM funding for services to certain newly Medicaid eligible populations](#)  
6 [served by the Executive Office of Health and Human Services, the Department of Human Services and](#)  
7 [the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals. Category II changes](#)  
8 [may be necessary under the terms and conditions of the Global Consumer Choice Compact Waiver to](#)  
9 [facilitate the transition of the affected people and services to full Medicaid coverage.](#)

10 [\(f\) Medicaid Requirements and Opportunities under the U.S. Patient Protection and Affordable](#)  
11 [Care Act of 2010. The Medicaid agency proposes to pursue any requirements and/or opportunities](#)  
12 [established under the U.S. Patient Protection and Affordable Care Act of 2010 that may warrant a](#)  
13 [Category II or III change under the terms and conditions of the Global Consumer Choice Compact](#)  
14 [Waiver. Any such actions the Medicaid agency takes shall not have an adverse impact on beneficiaries or](#)  
15 [cause there to be an increase in expenditures beyond the amount appropriated for state fiscal year 2014.](#)  
16 [Now, therefore, be it](#)

17 [RESOLVED, that the general assembly hereby approves proposals \(a\) through \(f\) listed above to](#)  
18 [amend the demonstration; and be it further](#)

19 [RESOLVED, that the secretary of the office of health and human services is authorized to pursue](#)  
20 [and implement any waiver amendments, category II or category III changes, state plan amendments](#)  
21 [and/or changes to the applicable department's rules, regulations and procedures approved herein and as](#)  
22 [authorized by § 42-12.4-7. <sup>\(add\)</sup>](#)

23 SECTION 2. This article shall take effect upon passage.



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**MOTION: To ask Executive Office of Health and Human Services to discuss ARTICLE 20 RELATING TO MEDICAID REFORM ACT OF 2008 TF/JC passed unanimously**

**ARTICLE 21 RELATING TO RHODE ISLAND PUBLIC TRANSIT AUTHORITY**  
The article provides that the \$4.2 million loan from the State Revolving Loan Fund to the Rhode Island Public Transit Authority is made available as a direct grant to RIPTA and does not need to be repaid. The funds are for the required 20% match to obtain federal funds to purchase buses through FY 2017. (The article appears to be limited to "buses" and could exclude RIde vans.)

**House Finance Committee 02/05/2013 Hearing Rise of the House Room 35**

Starting on Page 140 of the Budget Act

24

ARTICLE 21

25

RELATING TO RHODE ISLAND PUBLIC TRANSIT AUTHORITY

26 SECTION 1. Section 42-11-2.4 of the General Laws in Chapter 42-11 entitled "Department of  
27 Administration" is hereby amended to read as follows:

28 § 42-11-2.4 State Fleet Replacement Revolving Loan Fund. - (a) There is hereby created as a  
29 separate fund within the treasury to be known as the state fleet replacement revolving loan fund which  
30 shall be administered by the general treasurer in accordance with the same laws and fiscal procedures as

31 the general funds of the state. This fund, hereafter referred to as the revolving loan fund” shall consist of  
 32 such sums as the state may from time to time appropriate, as well as money received from the disposal of  
 33 used vehicles, loan, interest and service charge payments from benefiting state agencies, as well as  
 1 interest earnings, money received from the federal government, gifts, bequests, donations, or otherwise  
 2 from any public or private source.  
 3 (b) This fund shall be used for the purpose of acquiring motor vehicles, both new and used, and  
 4 vehicle-related equipment and attachments for state departments and agencies.  
 5 © The proceeds from the repayment of any loans made for the purposes authorized under this  
 6 chapter shall be deposited in and returned to the revolving loan fund in order to constitute a continuing  
 7 revolving fund for the purposes listed above.  
 8 (d) The office of state fleet operations of the Rhode Island department of administration shall  
 9 adopt rules and regulations consistent with the purposes of this chapter and chapter 35 of title 42, in order  
 10 to provide for the orderly and equitable disbursement and repayment of funds from the revolving loan  
 11 fund.  
 12 (e) Provided; however, a total of four million two hundred thousand dollars (\$4,200,000) shall be  
 13 made available <sup>{add}</sup> [as a direct grant from the revolving loan fund](#) <sup>{add}</sup> for the required twenty percent (20%) match  
 14 for the Rhode Island Public Transit Authority to obtain federal funds to purchase buses through FY 2017.  
 15 <sup>{add}</sup> [Any such sums need not be repaid to the revolving loan fund.](#) <sup>{add}</sup>  
 16 SECTION 2. This article shall take effect upon passage.

 <small>voting check off graphic</small>	<b>MOTION: To recommend the Commission support ARTICLE 21 RELATING TO RHODE ISLAND PUBLIC TRANSIT AUTHORITY (ask whether the funding of the Rhode vans is allowed) RCa/RCo unanimously</b>
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Recently Introduced bills that could impact people with disabilities

**H 5020 AN ACT RELATING TO BEHAVIORAL HEALTHCARE, DEVELOPMENTAL DISABILITIES AND HOSPITALS**

**Introduced By:** Representatives Bennett, Diaz, Naughton, Hull, and McNamara  
**Date Introduced:** January 08, 2013  
**Referred To:** House Health, Education & Welfare

This act would expand the parent deinstitutionalization subsidy to include appropriate relatives and would allow a relative to care for a child or adult if the parent was unable to and receive a subsidy for doing so.  
 This act would take effect upon passage.  
 The bill has been **withdrawn** at the request of Rep. Bennett.

**H 5029 AN ACT RELATING TO HUMAN SERVICES – PUBLIC ASSISTANCE**

**Introduced By:** Representatives Messier, Ferri, Malik, E Coderre, and Fellela  
**Date Introduced:** January 09, 2013  
**Referred To:** House Finance

This act would require picture identification on all (EBT) electronic benefit transfer cards issued to administer this program.  
 This act would take effect upon passage.

1-1 SECTION 1. Section 40-6-8 of the General Laws in Chapter 40-6 entitled “Public  
 1-2 Assistance Act” is hereby amended to read as follows:  
 1-3 **40-6-8. Supplemental nutrition assistance program (SNAP).** -- (a) The department  
 1-4 shall have the responsibility to administer the food stamp program for the state in compliance  
 1-5 with the provisions of the federal Food Stamp Act of 1964, as amended, 7 U.S.C. section 2011 et  
 1-6 seq. The supplemental nutrition assistance program (SNAP) is and shall be the new title of the  
 1-7 program formerly known as the food stamp program. All references in the Rhode Island general

1-8 laws to food stamps shall be deemed to mean, apply to, refer to, and be interpreted in accordance  
 1-9 with the supplemental nutrition assistance program (SNAP).  
 1-10 (b) The department is empowered and authorized to submit its plan for food stamps to  
 1-11 the federal government or any agency or department of it. The department shall act for the state in  
 1-12 any negotiations relative to the submission and approval of a plan, and may make any  
 1-13 arrangement or changes in its plan not inconsistent with this chapter which may be required by  
 1-14 the Food Stamp Act or the rules and regulations promulgated pursuant to it to obtain and retain  
 1-15 such approval and to secure for this state the benefits of the provisions of the federal act relating  
 1-16 to food stamps. The department shall make reports to the federal government or any agency or  
 1-17 department of it in the form and nature required by it, and in all respects comply with any request  
 1-18 or direction of the federal government or any agency or department of it, which may be necessary  
 1-19 to assure the correctness and verification of the reports.  
 2-20 © The department is authorized and directed to pay one hundred percent (100%) of the  
 2-21 state's share of the administrative cost involved in the operation of the food stamp program.  
 2-22 (d) No person shall be ineligible for food stamp benefits due solely to the restricted  
 2-23 eligibility rules otherwise imposed by section 115(a)(2) of the Personal Responsibility and Work  
 2-24 Opportunity Reconciliation Act of 1996 (Public Laws No. 104-193), 21 U.S.C. section  
 2-25 862a(a)(2), and as this section may hereafter be amended.  
 2-26 <sup>{add}</sup>(e) [The department shall be required to issue \(EBT\) electronic benefit transfer cards used](#)  
 2-27 [to administer this program with the cardholder's picture identification.](#)<sup>{add}</sup>  
 2-28 SECTION 2. This act shall take effect upon passage.



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**MOTION: To find 13 H - 5029 AN ACT RELATING TO HUMAN SERVICES—PUBLIC ASSISTANCE to be harmful W/MS passed Nay RCa, JC**

**S 0098 AN ACT RELATING TO PROPERTY -- RHODE ISLAND FAIR HOUSING PRACTICES ACT**

**Introduced By:** Senators Metts, Crowley, Jabour, Miller, and Pichardo

**Date Introduced:** January 22, 2013

**Referred To:** Senate Judiciary 02/05/2013 Hearing Rise of the Senate Room 313

This act would protect persons who are recipients of government assistance against discrimination under the Rhode Island Fair Housing Practices Act. The term "government assistance recipient status" means being the recipient of federal, state or local public assistance, including medical assistance, or the recipient of federal, state or local housing subsidies, including section 8, and other rental assistance or rental supplements, or who is subject to the requirements of any public assistance, rental assistance or housing subsidy program.

This act would take effect upon passage.

1-1 SECTION 1. Chapter 34-37 of the General Laws entitled "Rhode Island Fair Housing  
 1-2 Practices Act" is hereby amended by adding thereto the following sections:  
 1-3 **34-37-2.5. Right to equal housing opportunities -- Government assistance recipient**  
 1-4 **status.** <sup>{add}</sup> [Whenever in this chapter there shall appear the words "marital status" there shall be](#)  
 1-5 [inserted immediately thereafter the words "government assistance recipient status."](#)  
 1-6 **34-37-2.6. Discrimination based on government assistance recipient status**  
 1-7 **exemption.** [Nothing in this title shall prohibit an owner of a housing accommodation from](#)  
 1-8 [refusing to rent to a person based on his or her government assistance recipient status if the](#)  
 1-9 [housing accommodation is three \(3\) units or less, one of which is occupied by the owner.](#)<sup>{add}</sup>  
 1-10 SECTION 2. Sections 34-37-1, 34-37-2, 34-37-3, 34-37-4, 34-37-4.3, 34-37-5.2, 34-37-  
 1-11 5.3 and 34-37-5.4 of the General Laws in Chapter 34-37 entitled "Rhode Island Fair Housing  
 1-12 Practices Act" are hereby amended to read as follows:  
 1-13 **34-37-1. Finding and declaration of policy.** -- (a) In the State of Rhode Island and  
 1-14 Providence Plantations, hereinafter referred to as the state, many people are denied equal

1-15 opportunity in obtaining housing accommodations and are forced to live in circumscribed areas  
1-16 because of discriminatory housing practices based upon race, color, religion, sex, sexual  
1-17 orientation, gender identity or expression, marital status, <sup>{add}</sup> [government assistance recipient status](#), <sup>{add}</sup>  
1-18 country of ancestral origin, disability, age, familial status, or on the basis that a tenant or  
1-19 applicant, or a member of the household, is or has been, or is threatened with being, the victim of  
1-20 domestic abuse, or that the tenant or applicant has obtained, or sought, or is seeking, relief from  
2-1 any court in the form of a restraining order for protection from domestic abuse. These practices  
2-2 tend unjustly to condemn large groups of inhabitants to dwell in segregated districts or under  
2-3 depressed living conditions in crowded, unsanitary, substandard, and unhealthful  
2-4 accommodations. These conditions breed intergroup tension as well as vice, disease, juvenile  
2-5 delinquency, and crime; increase the fire hazard; endanger the public health; jeopardize the public  
2-6 safety, general welfare and good order of the entire state; and impose substantial burdens on the  
2-7 public revenues for the abatement and relief of conditions so created. These discriminatory and  
2-8 segregative housing practices are inimical to and subvert the basic principles upon which the  
2-9 colony of Rhode Island and Providence Plantations was founded and upon which the state and the  
2-10 United States were later established. Discrimination and segregation in housing tend to result in  
2-11 segregation in our public schools and other public facilities, which is contrary to the policy of the  
2-12 state and the constitution of the United States. Further, discrimination and segregation in housing  
2-13 adversely affect urban renewal programs and the growth, progress, and prosperity of the state. In  
2-14 order to aid in the correction of these evils, it is necessary to safeguard the right of all individuals  
2-15 to equal opportunity in obtaining housing accommodations free of discrimination.

2-16 (b) It is hereby declared to be the policy of the state to assure to all individuals regardless  
2-17 of race, color, religion, sex, sexual orientation, gender identity or expression, marital status,  
2-18 <sup>{add}</sup> [government assistance recipient status](#), <sup>{add}</sup> country of ancestral origin, or disability, age, familial  
2-19 status, housing status, or those tenants or applicants, or members of a household, who are, or have  
2-20 been, or are threatened with being, the victims of domestic abuse, or those tenants or applicants  
2-21 who have obtained, or sought, or are seeking, relief from any court in the form of a restraining  
2-22 order for protection from domestic abuse, equal opportunity to live in decent, safe, sanitary, and  
2-23 healthful accommodations anywhere within the state in order that the peace, health, safety, and  
2-24 general welfare of all the inhabitants of the state may be protected and insured.

2-25 (c) The practice of discrimination in rental housing based on the potential or actual  
2-26 tenancy of a person with a minor child, or on the basis that a tenant or applicant, or a member of  
2-27 the household, is or has been or is threatened with being, the victim of domestic abuse, or that the  
2-28 Tenant or applicant has obtained, or sought, or is seeking, relief from any court in the form of a  
2-29 restraining order for protection from domestic abuse is declared to be against public policy.

2-30 (d) This chapter shall be deemed an exercise of the police power of the state for the  
2-31 protection of the public welfare, prosperity, health, and peace of the people of the state.

2-32 (e) Nothing in this section shall prevent a landlord from proceeding with eviction action  
2-33 against a tenant who fails to comply with section 34-18-24(7).

3-34 **34-37-2. Right to equal housing opportunities -- Civil rights.** -- The right of all  
3-35 individuals in the state to equal housing opportunities and regardless of race, color, religion, sex,  
3-36 Sexual orientation, gender identity or expression, marital status, <sup>{add}</sup> [government assistance recipient](#)  
3-37 [status](#), <sup>{add}</sup> country of ancestral origin, disability, age, familial status, or regardless of the fact that a  
3-38 Tenant or applicant, or a member of the household, is or has been, or is threatened with being, the  
3-39 Victim of domestic abuse, or that the tenant or applicant has obtained, or sought, or is seeking,  
3-40 relief from any court in the form of a restraining order for protection from domestic abuse, is  
3-41 hereby recognized as, and declared to be, a civil right. Nothing in this section shall prevent a  
3-42 landlord from proceeding with eviction action against a tenant who fails to comply with section  
3-43 34-18-24(7).

3-44 **34-37-3. Definitions.** -- When used in this chapter:

3-45 (1) "Age" means anyone over the age of eighteen (18).

3-46 (2) "Commission" means the Rhode Island commission for human rights created by  
3-47 section 28-5-8.

3-48 (3) "Disability" means a disability as defined in section 42-87-1.

3-49 Provided further that the term "disability" does not include current, illegal use of or  
3-50 addiction to a controlled substance, as defined in 21 U.S.C. section 802.

3-51 (4) "Discriminate" includes segregate, separate, or otherwise differentiate between or  
3-52 Among individuals because of race, color, religion, sex, sexual orientation, gender identity or  
3-53 expression, marital status, <sup>{add}</sup> government assistance recipient status, <sup>{add}</sup> country of ancestral origin,  
3-54 disability, age, housing status, or familial status or because of the race, color, religion, sex, sexual  
3-55 orientation, gender identity or expression, marital status, <sup>{add}</sup> government assistance recipient status, <sup>{add}</sup>  
3-56 country of ancestral origin, disability, age, housing status, or familial status of any person with  
3-57 Whom they are or may wish to be associated.

3-58 (5) The term "domestic abuse" for the purposes of this chapter shall have the same  
3-59 meaning as that set forth in section 15-15-1, and include all forms of domestic violence as set  
3-60 forth in section 12-29-2, except that the domestic abuse need not involve a minor or parties with  
3-61 minor children.

3-62 (6) (i) "Familial status" means one or more individuals who have not attained the age of  
3-63 eighteen (18) years being domiciled with:

3-64 (A) A parent or another person having legal custody of the individual or individuals; or  
3-65 (B) The designee of the parent or other person having the custody, with the written  
3-66 permission of the parent or other person provided that if the individual is not a relative or legal  
3-67 dependent of the designee, that the individual shall have been domiciled with the designee for at  
3-68 least six (6) months.

4-1 (ii) The protections afforded against discrimination on the basis of familial status shall  
4-2 apply to any person who is pregnant or is in the process of securing legal custody of any  
4-3 individual who has not attained the age of eighteen (18) years.

4-4 (7) The terms, as used regarding persons with disabilities, "auxiliary aids and services,"  
4-5 "reasonable accommodation," and "reasonable modifications" have the same meaning as those  
4-6 terms are defined in section 42-87-1.1.

4-7 (8) The term "gender identity or expression" includes a person's actual or perceived  
4-8 gender, as well as a person's gender identity, gender-related self image, gender-related  
4-9 appearance, or gender-related expression; whether or not that gender identity, gender-related self  
4-10 image, gender-related appearance, or gender-related expression is different from that traditionally  
4-11 associated with the person's sex at birth.

4-12 (9) "Housing accommodation" includes any building or structure or portion of any  
4-13 building or structure, or any parcel of land, developed or undeveloped, which is occupied or is  
4-14 intended, designed, or arranged to be occupied, or to be developed for occupancy, as the home or  
4-15 residence of one or more persons.

4-16 (10) "Otherwise qualified" includes any person with a disability who with respect to the  
4-17 rental of property, personally or with assistance arranged by the person with a disability, is  
4-18 capable of performing all the responsibilities of a tenant as contained in section 34-18-24.

4-19 (11) "Owner" includes any person having the right to sell, rent, lease, or manage a  
4-20 housing accommodation.

4-21 (12) "Person" includes one or more individuals, partnerships, associations, organizations,  
4-22 Corporations, labor organizations, mutual companies, joint stock companies, trusts, receivers,  
4-23 legal representatives, trustees, other fiduciaries, or real estate brokers or real estate salespersons  
4-24 as defined in chapter 20.5 of title 5.

4-25 (13) "Senior citizen" means a person sixty-two (62) years of age or older.

4-26 (14) The term "sexual orientation" means having or being perceived as having an  
4-27 orientation for heterosexuality, bisexuality, or homosexuality. This definition is intended to  
4-28 describe the status of persons and does not render lawful any conduct prohibited by the criminal  
4-29 laws of this state nor impose any duty on a religious organization. This definition does not confer  
4-30 legislative approval of said status, but is intended to assure the basic human rights of persons to  
4-31 hold and convey property and to give and obtain credit, regardless of such status.

4-32 (15) The term "victim" means a family or household member and all other persons  
4-33 contained within the definition of those terms as defined in section 12-29-2.

5-34 (16) The term "housing status" means the status of having or not having a fixed or

5-35 regular residence, including the status of living on the streets or in a homeless shelter or similar  
5-36 temporary residence.

5-37 <sup>{add}</sup> (17) The term "government assistance recipient status" means being the recipient of  
5-38 federal, state or local public assistance, including medical assistance, or the recipient of federal,  
5-39 state or local housing subsidies, including section 8, and other rental assistance or rental  
5-40 Supplements, or who is subject to the requirements of any public assistance, rental assistance or  
5-41 housing subsidy program. <sup>{add}</sup>

5-42 **34-37-4. Unlawful housing practices.** -- (a) No owner having the right to sell, rent,  
5-43 lease, or manage a housing accommodation as defined in section 34-37-3(11), or an agent of any  
5-44 of these shall, directly or indirectly, make or cause to be made any written or oral inquiry  
5-45 concerning the race, color, religion, sex, sexual orientation, gender identity or expression, marital  
5-46 status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral origin or disability, age,  
5-47 familial status nor make any written or oral inquiry concerning whether a tenant or applicant, or a  
5-48 member of the household, is or has been, or is threatened with being, the victim of domestic  
5-49 abuse, or whether a tenant or applicant has obtained, or sought, or is seeking, relief from any  
5-50 court in the form of a restraining order for protection from domestic abuse, of any prospective  
5-51 purchaser, occupant, or tenant of the housing accommodation; or shall, directly or indirectly,  
5-52 refuse to sell, rent, lease, let, or otherwise deny to or withhold from any individual the housing  
5-53 accommodation because of the race, color, religion, sex, sexual orientation, gender identity or  
5-54 expression, marital status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral origin,  
5-55 disability, age, or familial status of the individual or the race, color, religion, sex, sexual  
5-56 orientation, gender identity or expression, marital status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup>  
5-57 country of ancestral origin or disability, age, or familial status of any person with whom the  
5-58 individual is or may wish to be associated; or shall, or on the basis that a tenant or applicant, or a  
5-59 member of the household, is or has been, or is threatened with being, the victim of domestic  
5-60 abuse, or that the tenant or applicant has obtained, or sought, or is seeking, relief from any court  
5-61 in the form of a restraining order for protection from domestic abuse. Nor shall an owner having  
5-62 the right to sell, rent, lease, or manage a housing accommodation as defined in section 34-37-  
5-63 3(11), or an agent of any of these, directly or indirectly, issue any advertisement relating to the  
5-64 sale, rental, or lease of the housing accommodation which indicates any preference, limitation,  
5-65 specification, or discrimination based upon race, color, religion, sex, sexual orientation, gender  
5-66 identity or expression, marital status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral  
5-67 Origin, disability, age, familial status, or on the basis that a tenant or applicant, or a member of the  
5-68 household, is or has been, or is threatened with being, the victim of domestic abuse, or that the  
6-1 Tenant or applicant has obtained, or sought, or is seeking, relief from any court in the form of a  
6-2 restraining order for protection from domestic abuse, or shall, directly or indirectly, discriminate  
6-3 against any individual because of his or her race, color, religion, sex, sexual orientation, gender  
6-4 identity or expression, marital status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral  
6-5 Origin, disability, age, familial status, or on the basis that a tenant or applicant, or a member of the  
6-6 household, is or has been, or is threatened with being, the victim of domestic abuse, or that the  
6-7 Tenant or applicant has obtained, or sought, or is seeking, relief from any court in the form of a  
6-8 restraining order for protection from domestic abuse, in the terms, conditions, or privileges of the  
6-9 sale, rental, or lease of any housing accommodation or in the furnishing of facilities or services in  
6-10 connection with it. Nothing in this subsection shall be construed to prohibit any oral or written  
6-11 inquiry as to whether the prospective purchaser or tenant is over the age of eighteen (18).

6-12 (b) No person to whom application is made for a loan or other form of financial  
6-13 assistance for the acquisition, construction, rehabilitation, repair, or maintenance of any housing  
6-14 accommodation, whether secured or unsecured shall directly or indirectly make or cause to be  
6-15 made any written or oral inquiry concerning the race, color, religion, sex, sexual orientation,  
6-16 gender identity or expression, marital status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of  
6-17 ancestral origin, disability, age, familial status, or any express written or oral inquiry into whether  
6-18 a tenant or applicant, or a member of the household, is or has been, or is threatened with being,  
6-19 the victim of domestic abuse, or whether a tenant or applicant has obtained, or sought, or is  
6-20 seeking, relief from any court in the form of a restraining order for protection from domestic

6-21 abuse, of any individual seeking the financial assistance, or of existing or prospective occupants  
6-22 or tenants of the housing accommodation; nor shall any person to whom the application is made  
6-23 in the manner provided, directly or indirectly, discriminate in the terms, conditions, or privileges  
6-24 relating to the obtaining or use of any financial assistance against any applicant because of the  
6-25 race, color, religion, sex, sexual orientation, gender identity or expression, marital status,  
6-26 <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral origin, disability, age, familial status,  
6-27 or on the basis that a tenant or applicant, or a member of the household, is or has been, or is  
6-28 threatened with being, the victim of domestic abuse, or that the tenant or applicant has obtained,  
6-29 or sought, or is seeking, relief from any court in the form of a restraining order for protection  
6-30 from domestic abuse, of the applicant or of the existing or prospective occupants or tenants.  
6-31 Nothing in this subsection shall be construed to prohibit any written or oral inquiry as to whether  
6-32 the applicant is over the age of eighteen (18).

6-33 (c) Nothing in this section contained shall be construed in any manner to prohibit or limit  
6-34 the exercise of the privilege of every person and the agent of any person having the right to sell,  
7-1 rent, lease, or manage a housing accommodation to establish standards and preferences and set  
7-2 terms, conditions, limitations, or specifications in the selling, renting, leasing, or letting thereof or  
7-3 in the furnishing of facilities or services in connection therewith which do not discriminate on the  
7-4 basis of the race, color, religion, sex, sexual orientation, gender identity or expression, marital  
7-5 status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral origin, disability, age, familial  
7-6 status, or on the basis that a tenant or applicant, or a member of the household, is or has been, or  
7-7 is threatened with being, the victim of domestic abuse, or that the tenant or applicant has  
7-8 obtained, or sought, or is seeking, relief from any court in the form of a restraining order for  
7-9 protection from domestic abuse, of any prospective purchaser, lessee, tenant, or occupant thereof  
7-10 or on the race, color, religion, sex, sexual orientation, gender identity or expression, marital  
7-11 status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral origin, disability, age, or  
7-12 familial status of any person with whom the prospective purchaser, lessee, tenant, or occupant is  
7-13 or may wish to be associated. Nothing contained in this section shall be construed in any manner  
7-14 to prohibit or limit the exercise of the privilege of every person and the agent of any person  
7-15 making loans for or offering financial assistance in the acquisition, construction, rehabilitation,  
7-16 repair, or maintenance of housing accommodations to set standards and preferences, terms,  
7-17 conditions, limitations, or specifications for the granting of loans or financial assistance which do  
7-18 not discriminate on the basis of the race, color, religion, sex, sexual orientation, gender identity or  
7-19 expression, marital status, <sup>{add}</sup>government assistance recipient status, <sup>{add}</sup> country of ancestral origin,  
7-20 disability, age, familial status, or on the basis that a tenant or applicant, or a member of the  
7-21 household, is or has been, or is threatened with being, the victim of domestic abuse, or that the  
7-22 tenant or applicant has obtained, or sought, or is seeking, relief from any court in the form of a  
7-23 restraining order for protection from domestic abuse, of the applicant for the loan or financial  
7-24 assistance or of any existing or prospective owner, lessee, tenant, or occupant of the housing  
7-25 accommodation.

7-26 (d) An owner may not refuse to allow a person with a disability to make, at his or her  
7-27 expense, reasonable modifications of existing premises occupied or to be occupied by the person  
7-28 if the modifications may be necessary to afford the person full enjoyment of the premises, except  
7-29 that, in the case of a rental, the owner may where it is reasonable to do so condition permission  
7-30 for a modification on the renter agreeing to restore the interior of the premises to the condition  
7-31 that existed before the modification, reasonable wear and tear excepted. Where it is necessary in  
7-32 order to ensure with reasonable certainty that funds will be available to pay for the restorations at  
7-33 the end of the tenancy, the landlord may negotiate as part of the restoration agreement a provision  
7-34 requiring that the tenant pay into an interest bearing escrow account, over a reasonable period, a  
8-1 reasonable amount of money not to exceed the cost of the restorations. The interest in the account  
8-2 shall accrue to the benefit of the tenant. The restoration deposition shall be exempt from section  
8-3 34-18-19(a) but will be subject to section 34-18-19(b) -- (f).

8-4 (e) (1) An owner may not refuse to make reasonable accommodations in rules, policies,  
8-5 practices, or services, when those accommodations may be necessary to afford an occupant with a  
8-6 disability equal opportunity to use and enjoy a dwelling.

8-7 (2) Every person with a disability who has a guide dog or other personal assistive  
8-8 animal, or who obtains a guide dog or other personal assistive animal, shall be entitled to full and  
8-9 equal access to all housing accommodations provided for in this section, and shall not be required  
8-10 to pay extra compensation for the guide dog or other personal assistive animal, but shall be liable  
8-11 for any damage done to the premises by a guide dog or other personal assistive animal. For the  
8-12 purposes of this subsection a "personal assistive animal" is an animal specifically trained by a  
8-13 certified animal training program to assist a person with a disability to perform independent living  
8-14 tasks.

8-15 (f) Any housing accommodation of four (4) units or more constructed for first occupancy  
8-16 after March 13, 1991 shall be designed and constructed in such a manner that:

8-17 (1) The public use and common use portions of the dwellings are readily accessible to  
8-18 and usable by persons with disabilities;

8-19 (2) All the doors designed to allow passage into and within all premises within the  
8-20 dwellings are sufficiently wide to allow passage by persons with disabilities in wheelchairs;

8-21 (3) All premises within the dwellings contain the following features of adaptive design:

8-22 (i) Accessible route into and through the dwelling;

8-23 (ii) Light switches, electrical outlets, thermostats, and other environmental controls in  
8-24 accessible locations;

8-25 (iii) Reinforcements in bathroom walls to allow later installation of grab bars; and

8-26 (iv) Usable kitchens and bathrooms such that an individual in a wheelchair can maneuver  
8-27 about the space. To the extent that any state or local building codes, statutes or ordinances are  
8-28 inconsistent with this section, they are hereby repealed. The state building code standards  
8-29 committee is hereby directed to adopt rules and regulations consistent with this section as soon as  
8-30 possible, but no later than September 30, 1990.

8-31 (g) Compliance with the appropriate requirements of the State Building Code 14  
8-32 "accessibility for individuals with disabilities for residential use groups" suffices to satisfy the  
8-33 requirements of subsection (f).

9-34 (h) As used in subsection (f), the term "housing accommodation of four (4) units or  
9-35 more" means:

9-36 (1) Buildings consisting of four (4) or more units if those buildings have one or more  
9-37 elevators; and

9-38 (2) Ground floor units in other buildings consisting of four (4) or more units;

9-39 (i) Nothing in subsection (f) shall be construed to limit any law, statute, or regulation  
9-40 Which requires a greater degree of accessibility to persons with disabilities.

9-41 (j) Nothing in this section requires that a dwelling be made available to an individual  
9-42 Whose tenancy would constitute a direct threat to the health or safety of other individuals or  
9-43 Whose tenancy would result in substantial physical damage to the property of others.

9-44 (k) Nothing contained in this chapter shall be construed to prohibit an owner, lessee,  
9-45 sublessee, or assignee from advertising or selecting a person of the same or opposite gender to  
9-46 rent, lease, or share the housing unit which the owner, lessee, sublessee, or assignee will occupy  
9-47 with the person selected.

9-48 (l) No person shall aid, abet, incite, compel, or coerce the doing of any act declared by  
9-49 this section to be an unlawful housing practice, or obstruct or prevent any person from complying  
9-50 with the provisions of this chapter or any order issued thereunder, or attempt directly or indirectly  
9-51 to commit any act declared by this section to be an unlawful housing practice.

9-52 (m) No owner, person defined in section 34-37-3(12), person to whom application is  
9-53 made for a loan or other form of financial assistance for the acquisition, construction,  
9-54 rehabilitation, repair, or maintenance of any housing accommodation, whether secured or  
9-55 unsecured, no financial organization governed by the provisions of title 19 or any other credit  
9-56 granting commercial institution, or respondent under this chapter or any agent of these shall  
9-57 discriminate in any manner against any individual because he or she has opposed any practice  
9-58 forbidden by this chapter, or because he or she has made a charge, testified, or assisted in any  
9-59 manner in any investigation, proceeding, or hearing under this chapter.

9-60 (n) Nothing in this section shall prevent a landlord from proceeding with eviction action

9-61 against a tenant who fails to comply with section 34-18-24(7)(n).  
 9-62 **34-37-4.3. Discrimination in granting credit or loans prohibited.** -- No financial  
 9-63 organization governed by the provisions of title 19 or any other credit granting commercial  
 9-64 institution may discriminate in the granting or extension of any form of loan or credit, or the  
 9-65 privilege or capacity to obtain any form of loan or credit, on the basis of the applicant's sex,  
 9-66 marital status, <sup>(add)</sup> government assistance recipient status, <sup>(add)</sup> race or color, religion or country of  
 9-67 ancestral origin, disability or age or familial status, sexual orientation, or gender identity or  
 9-68 expression, and the form of loan and credit shall not be limited to those concerned with housing  
 10-1 accommodations, and the commission shall prevent any violation hereof in the same manner as it  
 10-2 is to prevent unlawful housing practices under the provisions of this chapter.  
 10-3 **34-37-5.2. Discrimination in brokerage services.** -- It shall be unlawful to deny any  
 10-4 Person who meets licensing and other non-discriminatory requirements which are also applied to  
 10-5 other applicants and members access to or membership or participation in any real estate listing  
 10-6 service, real estate brokers' organization, or other service, organization, or facility relating to the  
 10-7 business of selling, leasing, or renting a housing accommodation, or to discriminate against him  
 10-8 or her in the terms or conditions of the access, membership, or participation, on account of race,  
 10-9 color, religion, sex, sexual orientation, gender identity or expression, marital status, <sup>(add)</sup> government <sup>(add)</sup>  
 10-10 assistance recipient status country of ancestral origin, disability, age, or familial status.  
 10-11 **34-37-5.3. Fostering of segregated housing prohibited.** -- It shall be an unlawful  
 10-12 discriminatory housing practice to for profit induce or attempt to induce any person to sell or rent  
 10-13 any dwelling by representations regarding the entry or prospective entry into the neighborhood of  
 10-14 a person or persons of a particular race, color, religion, marital status, <sup>(add)</sup> government assistance  
 10-15 recipient status, <sup>(add)</sup> country of ancestral origin, sex, sexual orientation, gender identity or expression,  
 10-16 age, disability, or familial status.  
 10-17 **34-37-5.4. Discrimination in residential real estate related transactions.** -- (a) It shall  
 10-18 be unlawful for any person or other entity whose business includes engaging in residential real  
 10-19 estate related transactions to discriminate against any person in making available a transaction, or  
 10-20 in the terms and conditions of the transaction, because of race, color, religion, marital status,  
 10-21 <sup>(add)</sup> government assistance recipient status, <sup>(add)</sup> country of ancestral origin, sex, sexual orientation, gender  
 10-22 identity or expression, age, disability, or familial status.  
 10-23 (b) As used in this section, the term "residential real estate related transaction" means  
 10-24 any of the following:  
 10-25 (1) The making or purchasing of loans or providing other financial assistance:  
 10-26 (i) For purchasing, constructing, improving, repairing, or maintaining a dwelling; or  
 10-27 (ii) Secured by residential real estate.  
 10-28 (2) The selling, brokering, or appraising of residential real property.  
 10-29 (c) Nothing in this chapter prohibits a person engaged in the business of furnishing  
 10-30 appraisals of real property to take into consideration factors other than race, color, religion,  
 10-31 marital status, country of ancestral origin, sex, sexual orientation, gender identity or expression,  
 10-32 age, disability, or familial status.  
 11-33 SECTION 3. This act shall take effect upon passage.



voting check off graphic

**MOTION: To find 13 S - 0098 AN ACT RELATING TO PROPERTY -- RHODE ISLAND FAIR HOUSING PRACTICES ACT to be beneficial TF/AP passed unanimously**

**H 5033 AN ACT RELATING TO LABOR AND LABOR RELATIONS -- ESTABLISHING BACK TO WORK RHODE ISLAND PROGRAM ACT OF 2013**

**Introduced By: Representatives McNamara, Malik, Gallison, McLaughlin, and Shekarchi**

**Date Introduced: January 09, 2013**

**Referred To: House Finance 01/31/2013 Held for further study**

**This act would assist employers and potential employees by creating the "Back to**

Work Rhode Island Program.” [This act does not require coordinated with the Office of Rehabilitation Services.]

This act would take effect upon passage.

1-1 SECTION 1. Title 28 of the General Laws entitled "LABOR AND LABOR  
1-2 RELATIONS" is hereby amended by adding thereto the following chapter:

1-3 <sup>(ADD)</sup> **CHAPTER 44.1**

1-4 **BACK TO WORK RHODE ISLAND PROGRAM ACT OF 2013**

1-5 **28-44.1-1. Short title.** – This act shall be known and may be cited as the “Back to Work  
1-6 Rhode Island Program Act of 2013.”

1-7 **28-44.1-2. Legislative findings and purpose.** – The general assembly hereby finds as  
1-8 follows:

1-9 (1) As of January 1, 2013, Rhode Island’s unemployment rate is the highest in the New  
1-10 England region and above the national average;

1-11 (2) Despite this high unemployment, businesses report difficulties and frustration in  
1-12 locating employment candidates with the requisite knowledge, skills, and abilities they need;

1-13 (3) In an uncertain economy, employers are hesitant to invest in training if there is a risk  
1-14 the investment will not result in a qualified and skilled employee;

1-15 (4) Despite the need for skilled employees, job seekers face difficulties in getting their  
1-16 “foot in the door” to demonstrate their value to potential employers;

1-17 (5) Statistics indicate that unemployment compensation claimants who participated in  
1-18 employer-partnered training programs return to work more quickly than those who do not, and  
1-19 that such programs have saved significant sums of employment security funds;

2-1 (6) The purpose of the “Back to Work Rhode Island Program” is to assist employers in  
2-2 locating and obtaining skilled and qualified employees at little to no training cost, and to provide  
2-3 the opportunity for job seekers to gain a “foot in the door,” gain knowledge, learn new skills, and  
2-4 abilities, and receive the opportunity for employment.

2-5 **28-44.1-3. Definitions.** – For the purposes of this chapter, the following terms shall have  
2-6 the following meanings:

2-7 (1) “Claimant” means a person collecting unemployment security benefits under the  
2-8 provisions of chapters 28-42 through 28-44;

2-9 (2) “Department” means the Rhode Island department of labor and training;

2-10 (3) “Director” means the director of the Rhode Island department of labor and training;

2-11 (4) “Participating employer” means an employer who has voluntarily agreed to  
2-12 participate in the “Back to Work Rhode Island Program” and meets the criteria for participation  
2-13 established by this chapter and as determined by the director;

2-14 (5) “Program” means the “Back to Work Rhode Island Program” established under this  
2-15 chapter;

2-16 (6) “Skill enhancement and job training” means the measurable raising to a higher degree  
2-17 an individual’s knowledge and execution of a fundamental job function;

2-18 (7) “Unemployment benefits” means the money payable to a claimant for his or her wage  
2-19 losses due to unemployment, payable pursuant to chapter 28-44 (“Employment Security-  
2-20 Benefits”), and includes any amounts payable pursuant to an agreement under federal law  
2-21 providing for compensation, assistance, or allowances with respect to unemployment.

2-22 **28-44.1-4. Back to Work Rhode Island Program.** – (a) The “Back to Work Rhode  
2-23 Island Program” is hereby established and shall be administered by the department of labor and  
2-24 training.

2-25 (b) The program shall be designed so as to permit a claimant to be matched with an  
2-26 employer participating in the program and be placed in an open employment position made  
2-27 available by the employer. Participation by both claimant and employer shall be voluntary. The  
2-28 employer shall provide the claimant with skill enhancement and job training relevant to the open  
2-29 employment position for up to twenty-four (24) hours per week for up to six (6) weeks. Upon  
2-30 completion of the six (6) week period, claimants must be considered for employment by the  
2-31 employer. During the six (6) week period, the employer shall not compensate the claimant in any

2-32 way other than the training that the claimant receives through participation in the program. An  
2-33 employer may terminate participation in the program at any time.

3-34 (c) Notwithstanding any other law, participation in the “Back to Work Rhode Island  
3-35 Program” shall not affect the employment security benefits of a claimant; provided, however, that  
3-36 contingent upon appropriation, said claimant may receive a reasonable stipend in an amount  
3-37 determined by the director to cover any additional costs associated with their participation in the  
3-38 program, including, but not limited to, transportation or childcare costs.

3-39 (d) The department shall notify employers of the availability of the program and shall  
3-40 provide employers with information and materials necessary to participate upon request.

3-41 (e) The department shall continuously monitor the program to ensure that participating  
3-42 employers enter the program in good faith with the genuine expectation of hiring for the open  
3-43 position and with the intent and ability to provide relevant skill enhancement and job training.

3-44 (f) The department shall develop and conduct an orientation program for participating  
3-45 claimants and employers informing them of the rules, regulations, opportunities, and limitations  
3-46 of the “Back to Work Rhode Island Program”.

3-47 (g) A claimant may stay in the program if they exhaust benefits or lose program  
3-48 eligibility prior to the end of the six (6) weeks; provided, however, once benefits are exhausted or  
3-49 program eligibility is lost, unemployment compensation shall be discontinued.

3-50 (h) Participation in the program by a claimant shall be limited to six (6) weeks in any  
3-51 benefit year. A claimant shall be encouraged to end a training relationship that is not beneficial  
3-52 and shall be encouraged to preserve the remainder of his or her six (6) weeks of training for  
3-53 another training opportunity.

3-54 (i) In order to participate, a claimant must be seeking work and must be able, available,  
3-55 and accept work during the training period.

3-56 (j) Interested claimants shall be encouraged, but not required, to find employment  
3-57 opportunities that align with their current job skills, knowledge and experience. Employers shall  
3-58 be encouraged to work with the department to locate claimants with current job skills, knowledge,  
3-59 and experience that align with the requirements of an open employment opportunity;

3-60 (k) The claimant and the employer must agree upon a formal training plan and schedule  
3-61 which must be approved by the department.

3-62 (l) Participation in the program will be limited to the first two hundred (200) participants  
3-63 determined to be eligible by the department.

3-64 (m) The “Back to Work Rhode Island Program” will expire on December 31, 2014. New  
3-65 participants will not be enrolled after November 18, 2014.

3-66 **28-44.1-5. Eligibility to be a participating employer. –** (a) An employer wishing to  
3-67 participate in the “Back to Work Rhode Island Program” shall be required to meet the following  
3-68 qualifications:

4-1 (1) The employer must conduct business in Rhode Island; although, the business need not  
4-2 be domestic to Rhode Island;

4-3 (2) The employer must have a full-time position of employment available that the  
4-4 employer is desirous of filling;

4-5 (3) The employer must be willing and able to provide a participating claimant with skills  
4-6 enhancement and job training focused toward the position that is available;

4-7 (4) The employer must certify that he, she, they, or it will not pay any wages or provide  
4-8 any payment in kind to the claimant during the course of the claimant’s participation in the  
4-9 program;

4-10 (5) The employer must agree to follow up a claimant’s participation in the program with a  
4-11 performance evaluation of the claimant, regardless of whether or not the claimant is hired for  
4-12 employment;

4-13 (6) The employer must agree to provide information as requested by the department and  
4-14 verify that employment of a participating claimant will not displace nor have any impact on a  
4-15 promotion due an existing employee;

4-16 (7) The employer must certify that the employment and training opportunity is not due to  
4-17 a lockout, strike, or other labor dispute; and

4-18 (8) For employers with employees who are subject to collective bargaining, the written  
4-19 approval by the collective bargaining representative for each affected unit shall be required to be  
4-20 included in the plan for any job training for a position which would otherwise be covered by a  
4-21 collective bargaining agreement.

4-22 **28-44.1-6. Eligibility to be a participating claimant.** – (a) An individual receiving  
4-23 unemployment benefits and wishing to participate in the “Back to Work Rhode Island Program”  
4-24 must meet the following qualifications:

4-25 (1) The individual must be eligible to receive Rhode Island unemployment compensation  
4-26 benefits;

4-27 (2) The individual must continue to file weekly continued claims to receive benefits  
4-28 unless otherwise exempted;

4-29 (3) The individual must continue to look for work and employment opportunities during  
4-30 their participation in the program, unless otherwise exempt;

4-31 (4) The individual must certify that he or she understands that participation in the  
4-32 program includes no guarantee of employment;

4-33 (5) The individual must attend a mandatory orientation to be offered by the department;

5-34 (6) The individual must agree to provide relevant information as requested by the  
5-35 department; and must agree to report any missed training or changes to the training program.

5-36 (b) Claimants with a definite recall date within six (6) weeks and those who do not  
5-37 register for employment services are not eligible for the program.

5-38 **28-44.1-7. Workers’ compensation.** – The department will provide workers  
5-39 compensation coverage for participating claimants.

5-40 **28-44.1-8. Rules and regulations.** – The director shall promulgate such rules and  
5-41 regulations as the director deems necessary to implement the provisions of this chapter.

5-42 **28-44.1-9. Funding.** – Creation of the “Back to Work Rhode Island Program” is  
5-43 contingent upon funding.

5-44 **28-44.1-10. Severability.** – If any of the provisions of this chapter or the application  
5-45 thereof to any persons or circumstances are held invalid, the remainder of this chapter and the  
5-46 application thereof to other persons or circumstances shall not be affected thereby. To that end,  
5-47 the provisions of this chapter are declared to be severable. <sup>{add}</sup>

5-48 SECTION 2. This act shall take effect upon passage.

*The Committee took no position*

H 5195 AN ACT RELATING TO BEHAVIORAL HEALTHCARE, DEVELOPMENTAL  
DISABILITIES AND HOSPITALS - DIVISION OF DEVELOPMENTAL DISABILITIES  
**Introduced By:** Representatives McNamara, Corvese, Bennett, Palumbo, and Serpa  
**Date Introduced:** January 30, 2013

**Referred To:** House Finance

This act would require that the executive director of the department of behavioral  
healthcare, developmental disabilities and hospitals to promulgate and adopt a  
reimbursement system at a rate prescribed by current state law, and adjusted  
annually for direct support professionals employed by private developmental  
disability organizations.

This act would take effect upon passage.

1-1 SECTION 1. Section 40.1-21-4 of the General Laws in Chapter 40.1-21 entitled  
1-2 "Division of Developmental Disabilities" is hereby amended to read as follows:

1-3 **40.1-21-4. Powers and duties of director of mental health, retardation and hospitals.**

1-4 **– (a) The director of mental health, retardation, and hospitals shall be responsible for**  
1-5 **planning and developing a complete, comprehensive, and integrated statewide program for the**  
1-6 **developmentally disabled for the implementation of the program; and for the coordination of the**  
1-7 **efforts of the department of mental health, retardation, and hospitals with those of other state**  
1-8 **departments and agencies, municipal governments as well as the federal government and private**

1-9 agencies concerned with and providing services for the developmentally disabled.

1-10 (b) The director shall be responsible for the administration and operation of all state

1-11 operated community and residential facilities established for the diagnosis, care, and training of

1-12 the developmentally disabled. The director shall be responsible for establishing standards in

1-13 conformance with generally accepted professional thought and for providing technical assistance

1-14 to all state supported and licensed habilitative, developmental, residential and other facilities for

1-15 the developmentally disabled, and exercise the requisite surveillance and inspection to insure

1-16 compliance with standards. Provided, however, that none of the foregoing shall be applicable to

1-17 any of the facilities wholly within the control of any other department of state government.

1-18 (c) The director of mental health, retardation, and hospitals shall stimulate research by

1-19 public and private agencies, institutions of higher learning, and hospitals, in the interest of the

2-1 elimination and amelioration of developmental disabilities, and care and training of the

2-2 developmentally disabled.

2-3 (d) The director shall be responsible for the development of criteria as to the eligibility

2-4 for admittance of any developmentally disabled person for residential care in any department

2-5 supported and licensed residential facility or agency.

2-6 (e) The director of mental health, retardation, and hospitals may transfer retarded persons

2-7 from one state residential facility to another when deemed necessary or desirable for their better

2-8 care and welfare.

2-9 (f) The director of mental health, retardation, and hospitals shall make grants-in-aid and

2-10 otherwise provide financial assistance to the various communities and private nonprofit agencies,

2-11 in amounts which will enable all developmentally disabled adults to receive developmental and

2-12 other services appropriate to their individual needs.

2-13 (g) The director shall coordinate all planning for the construction of facilities for the

2-14 developmentally disabled, and the expenditure of funds appropriated or otherwise made available

2-15 to the state for this purpose.

2-16 <sup>(add)</sup> (h) The director shall adopt a state reimbursement system for community and nonprofit

2-17 agencies that will encourage the hiring and retention of competent, qualified and caring

2-18 individuals. Effective April 1, 2013, the reimbursement rate for direct support professionals

2-19 employed by private developmental disability organizations shall be increased from eleven

2-20 dollars and thirty cents (\$11.30) per hour to twelve dollars and three cents (\$12.03) per hour. The

2-21 rate shall be adjusted annually every April 1st by a percentage increase to the nearest cent using

2-22 the consumer price index for urban wage earners and clerical workers (CPI-W), or a successor

2-23 index for the previous calendar year as calculated for the northeast region by the United States

2-24 department of labor. <sup>(add)</sup>

2-25 SECTION 2. This act shall take effect upon passage.

*The Committee took no position*

H 5203 AN ACT RELATING TO EDUCATION - THE EDUCATION EQUITY AND  
PROPERTY TAX RELIEF

**Introduced By:** Representatives Canario, Edwards, Finn, Gallison, and Ferri

**Date Introduced:** January 30, 2013

**Referred To:** House Finance

This act would limit the amount by which schools provide special education services to students from other districts, including, but not limited to, private schools providing special education services, could raise their fees for providing said services.

This act would take effect upon passage.

1-1 SECTION 1. Chapter 16-7.2 of the General Laws entitled "The Education Equity and

1-2 Property Tax Relief Act" is hereby amended by adding thereto the following section:

1-3 <sup>(add)</sup> 16-7.2-11. Maximum rate increases -- Providers of special education services. -- As

1-4 [to any public school and/or any private school which receives state and/or municipal funding to](#)  
1-5 [provide special education services, from one year to the next, said school shall not increase its](#)  
1-6 [charges to a municipality, state, or local educational agency sending the student and/or which is](#)  
1-7 [responsible for the payment of special services, in an amount in excess of the maximum levy](#)  
1-8 [which a municipality may increase its tax rate or levy pursuant to the provisions of chapter 44-5](#)  
1-9 [\("Levy and Assessment of Local Taxes"\). Provided, this limitation shall not apply in those](#)  
1-10 [instances where there is a significant change in the services provided to the student and the school](#)  
1-11 [providing services gives at least thirty \(30\) days written notice to the sending district of the](#)  
1-12 [school's intention to increase its rate and the reasons for such increase.](#)<sup>(add)</sup>  
1-13 SECTION 2. This act shall take effect upon passage.



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graphic

MOTION: To find 13 H 5203 AN ACT RELATING TO EDUCATION - THE EDUCATION EQUITY AND PROPERTY TAX RELIEF to be harmful WI/AP passed unanimously (why aren't all other "tuition" education facilities included)

H 5204 AN ACT RELATING TO HEALTH AND SAFETY - STATE PALLIATIVE CARE AND QUALITY OF LIFE ACT

**Introduced By:** Representatives McNamara, Bennett, Palumbo, Serpa, and Malik  
**Date Introduced:** January 30, 2013

**Referred To:** House Health, Education & Welfare **02/06/2013 Hearing Rise Rm 135**

This act would establish the "Rhode Island Palliative Care and Quality of Life Interdisciplinary Advisory Council" within the department of health and would require healthcare organizations to provide information about palliative care to appropriate patients. Palliative care" means patient and family centered medical care that optimizes quality of life by anticipating, preventing, and treating suffering caused by serious illness. Palliative care throughout the continuum of illness also involves addressing physical, emotional, social, and spiritual needs and facilitating patient autonomy, access to information, and choice.

This act would take effect upon passage.

1-1 SECTION 1. Title 23 of the General Laws entitled "HEALTH AND SAFETY" is hereby  
1-2 amended by adding thereto the following chapter:

<sup>(add)</sup>CHAPTER 88

THE RHODE ISLAND PALLIATIVE CARE AND QUALITY OF LIFE ACT

1-5 23-88-1. Establishment of advisory council - Purposes. -- (a) There is hereby  
1-6 authorized, created and established a seven (7) member advisory council to be known as "The  
1-7 Rhode Island Palliative Care and Quality of Life Interdisciplinary Advisory Council" within the  
1-8 department of health with the powers and duties set forth in this chapter.

1-9 (b) The director of the department of health shall appoint seven (7) members to the  
1-10 council who shall have expertise in various aspects of palliative care including, but not limited to,  
1-11 medical, nursing, social work, pharmacy and spiritual; and patient and family caregivers.

1-12 Membership shall specifically include experience in palliative care in a variety of inpatient,  
1-13 outpatient and community settings such as acute care, long-term care and hospice and with a  
1-14 variety of populations including pediatric, youth and adult care. At least two (2) council members  
1-15 shall be board-certified hospice and palliative medicine physicians and/or nurses. Members shall  
1-16 serve for a term of three (3) years. Members shall receive no compensation for their services.

1-17 (c) The Rhode Island palliative care and quality of life interdisciplinary advisory council  
1-18 shall consult with and advise the department of health on matters related to the establishment,  
1-19 maintenance, operation, and outcomes evaluation of palliative care initiatives in the state.

2-1 23-88-2. Establishment of palliative care consumer and professional information

2-2 **and education program.** -- (a) There is hereby created and established a statewide "Palliative  
2-3 Care Consumer and Professional Information and Education Program" within the department of  
2-4 health.

2-5 (b) The purpose of the palliative care consumer and professional information and  
2-6 education program shall be to maximize the effectiveness of palliative care initiatives in the state  
2-7 by ensuring that comprehensive and accurate information and education about palliative care is  
2-8 available to the public, healthcare providers, and healthcare facilities.

2-9 (c) The department of health shall publish on its website information and resources,  
2-10 including links to external resources, about palliative care delivery for the public, healthcare  
2-11 providers, and healthcare facilities. This shall include, but not limited to, continuing educational  
2-12 opportunities for healthcare providers; information about palliative care delivery in the home,  
2-13 primary, secondary, and tertiary environments; best practices for palliative care delivery; and  
2-14 consumer educational materials and referral information for palliative care, including hospice.

2-15 (d) The department of health may develop and implement any other initiatives regarding  
2-16 palliative care services and education that the director determines would further the purposes of  
2-17 this chapter.

2-18 (e) The department shall consult with the palliative care and quality of life  
2-19 interdisciplinary advisory council in implementing this section.

2-20 **23-88-3. Access to palliative care.** -- (a) As used in this section, the following terms  
2-21 shall have the following meanings:

2-22 (1) "Appropriate" means consistent with applicable legal, health and professional  
2-23 standards, the patient's clinical and other circumstances, and the patient's reasonably known  
2-24 wishes and beliefs.

2-25 (2) "Medical care" means services provided, requested, or supervised by a physician or  
2-26 advanced practice nurse.

2-27 (3) "Palliative care" means patient and family centered medical care that optimizes  
2-28 quality of life by anticipating, preventing, and treating suffering caused by serious illness.  
2-29 Palliative care throughout the continuum of illness involves addressing physical, emotional,  
2-30 social, and spiritual needs and facilitating patient autonomy, access to information, and choice.  
2-31 Palliative care includes, but is not limited to, discussions of the patient's goals for treatment;  
2-32 discussion of treatment options appropriate to the patient, including, where appropriate, hospice  
2-33 care; and comprehensive pain and symptom management.

3-34 (4) "Serious illness" means and medical illness or physical injury or condition that  
3-35 substantially impacts quality of life for more than a short period of time. Serious illness includes,  
3-36 but is not limited to, cancer; heart, renal or liver failure; lung disease; and Alzheimer's disease  
3-37 and related dementias.

3-38 (b) On or before January 1, 2015, all healthcare organizations which required a license to  
3-39 operate shall:

3-40 (1) Establish a system for identifying patients or residents who could benefit from  
3-41 palliative care.

3-42 (2) Provide information about and facilitate access to appropriate palliative care services  
3-43 for those patients or residents with serious illness.

3-44 (c) The department shall carry out this section with the consultation of the palliative care  
3-45 and quality of life interdisciplinary advisory council.

3-46 (d) In carrying out this section, the department shall take into account factors that may  
3-47 impact the development of such a system and its ability to facilitate access to palliative care,  
3-48 including the size of the healthcare organization; access and proximity to palliative care services,  
3-49 including the availability of hospice and palliative care board-certified practitioners and related  
3-50 workforce staff; and geographic factors.

3-51 (e) If a healthcare organization fails to carry out the provisions of this section, the director

3-52 [of the department of health shall require the organization to provide a plan of action to bring the organization into compliance and may impose a civil monetary penalty.](#) <sup>(add)</sup>

3-54 SECTION 2. This act shall take effect upon passage.



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**MOTION: To find 13 H 5204 AN ACT RELATING TO HEALTH AND SAFETY - STATE PALLIATIVE CARE AND QUALITY OF LIFE ACT beneficial TF/AP passed unanimously**

Gun control and people with disabilities. The Commission should reach out to other behavioral health community regarding to the reaction to shooting.



Meeting graphic

**4:15 Public Forums, Linda Ward, Chair**

**Purpose/Goal: To begin identifying locations and host organizations for the July 22<sup>nd</sup> - 26<sup>th</sup> Public Forums**

**Discussion: Need volunteers to secure locations for the public forums, by the January meeting.**



calendar graphic

**4:25 Agenda and Scheduling the Next Meeting, Linda Ward, Chair**

Items to be placed on the next meeting's agenda:

1. Status of the Commission's Legislative Package
2. Review of recently introduced bills that might impact people with disabilities

**Next meeting will be on: Monday March 11, 2013 3 - 4:30 PM**



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**4:30 Adjournment, Linda Ward, Chair**



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**MOTION: To adjourn at 4:56 PM SB/TF passed unanimously**