



Governor's Commission on Disabilities
Executive Committee
Monday June 27, 2016 4 PM - 5:00 PM
 John O. Pastore Center, 41 Cherry Dale Court, Cranston, RI 02920-3049
 (voice) 401-462-0100 (fax) 462-0106 (tty) via RI Relay 711
 (e-mail) gcd.disabilities@gcd.ri.gov (website) www.disabilities.ri.gov
 Follow us on [twitter@ri_disabilities](https://twitter.com/ri_disabilities)



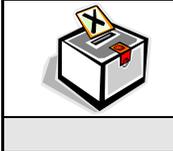
Attendees: Rosemary Carmody, (Vice Chair.); Judi Drew; Sarah Everhart Skeels; Casey Gartland; Jack Ringland; & Linda Ward
Absentees: Andrew Argenbright; Harvey Salvas; & Gary Witman

Staff: Bob Cooper, Executive Secretary & Alyssa Gleason, Public Education Aide



4:00 Call to Order and Acceptance of the Minutes, Rosemary Carmody, Interim Chair

Chair calls the meeting to order at 4:05
 Introductions of Commissioners and guests



MOTION: To accept the minutes of the previous meeting as presented
 Motion moved by LW, seconded by SES, passed unanimously

Action Items:



4:05 Appointment of Commissioners, Rosemary Carmody, Interim Chair

Purpose/Goal: To make recommendations to the Governor on new appointments of Commissioners.

Discussion: The Behavioral Healthcare community nominated Julie DeRosa, her name has been forwarded to the Governor for her consideration. Julie had served on the Commission before and has rejoined the Legislation Committee in the meantime. We have a vacancy, in addition to the Chairperson's. The Executive Secretary recommends outreach to the deaf and hard of hearing communities.



MOTION: To recruit nominees for Commissioner from the individuals who are deaf and hard of hearing.
 Motion moved by LW, seconded by CG, passed unanimously



4:10 State Plan for Independent Living

Purpose/Goal: To review the sections relating to the Commission or Designated State Agency and authorize the signing of the State Plan for Independent Living

Discussion: The Commission's role as the designated state entity (DSE) is very limited. It does not include approving the State Plan for Independent Living, just signing the plan jointly developed by the SIL Council Chairperson and Center for Independent Living director(s). There are sections of the draft plan assigning

tasks to the Commission that would have to be approved by the Commission or Executive Committee acting on behalf of the Commission.

Below the provisions of federal law detailing the DSE's role are highlighted.

29 U.S.C. 796c. State plan

(a) In general

(1) Requirement

To be eligible to receive financial assistance under this part, a State shall submit to the Administrator, and obtain approval of, a State plan developed and signed in accordance with paragraph (2), containing such provisions as the Administrator may require, including, at a minimum, the provisions required in this section.

(2) Joint development

The plan under paragraph (1) shall be jointly-

(A) developed by the chairperson of the Statewide Independent Living Council, and the directors of the centers for independent living in the State, after receiving public input from individuals with disabilities and other stakeholders throughout the State; and

(B) signed by-

(i) the chairperson of the Statewide Independent Living Council, acting on behalf of and at the direction of the Council;

(ii) the director of the designated State entity described in subsection (c); and

(iii) not less than 51 percent of the directors of the centers for independent living in the State.

(3) Periodic review and revision

The plan shall provide for the review and revision of the plan, not less than once every 3 years, to ensure the existence of appropriate planning, financial support and coordination, and other assistance to appropriately address, on a statewide and comprehensive basis, needs in the State for-

(A) the provision of independent living services in the State;

(B) the development and support of a statewide network of centers for independent living; and

(C) working relationships and collaboration between-

(i) centers for independent living; and

(ii)(I) entities carrying out programs that provide independent living services, including those serving older individuals;

(II) other community-based organizations that provide or coordinate the provision of housing, transportation, employment, information and referral assistance, services, and supports for individuals with significant disabilities; and

(III) entities carrying out other programs providing services for individuals with disabilities.

(4) Date of submission

The State shall submit the plan to the Administrator 90 days before the completion date of the preceding plan. If a State fails to submit such a plan that complies with the requirements of this section, the Administrator may withhold financial assistance under this part until such time as the State submits such a plan.

(5) Statewideness

The State plan shall describe strategies for providing independent living services on a statewide basis, to the greatest extent possible.

(b) Statewide Independent Living Council

The plan shall provide for the establishment of a Statewide Independent Living Council in accordance with [section 796d of this title](#).

(c) Designation of State entity

The plan shall designate a State entity of such State (referred to in this subchapter as the "designated State entity") as the agency that, on behalf of the State, shall-

- (1) receive, account for, and disburse funds received by the State under this part based on the plan;
- (2) provide administrative support services for a program under subpart 2, and a program under subpart 3 in a case in which the program is administered by the State under [section 796f-2 of this title](#);
- (3) keep such records and afford such access to such records as the Administrator finds to be necessary with respect to the programs;
- (4) submit such additional information or provide such assurances as the Administrator may require with respect to the programs; and
- (5) retain not more than 5 percent of the funds received by the State for any fiscal year under subpart 2, for the performance of the services outlined in paragraphs (1) through (4).

(d) Objectives

The plan shall-

- (1) specify the objectives to be achieved under the plan and establish timelines for the achievement of the objectives; and
- (2) explain how such objectives are consistent with and further the purpose of this part.

(e) Independent living services

The plan shall provide that the State will provide independent living services under this part to individuals with significant disabilities, and will provide the services to such an individual in accordance with an independent living plan mutually agreed upon by an appropriate staff member of the service provider and the individual, unless the individual signs a waiver stating that such a plan is unnecessary.

(f) Scope and arrangements

The plan shall describe the extent and scope of independent living services to be provided under this part to meet such objectives. If the State makes arrangements, by grant or contract, for providing such services, such arrangements shall be described in the plan.

(g) Network

The plan shall set forth a design for the establishment of a statewide network of centers for independent living that comply with the standards and assurances set forth in [section 796f-4 of this title](#).

(h) Centers

In States in which State funding for centers for independent living equals or exceeds the amount of funds allotted to the State under subpart 3, as provided in [section 796f-2 of this title](#), the plan shall include policies, practices, and procedures governing the awarding of grants to centers for independent living and oversight of such centers consistent with [section 796f-2 of this title](#).

(i) Cooperation, coordination, and working relationships among various entities

The plan shall set forth the steps that will be taken to maximize the cooperation, coordination, and working relationships among-

- (1) the Statewide Independent Living Council;

(2) centers for independent living;
(3) the designated State entity; and
(4) other State agencies or entities represented on the Council, other councils that address the needs and issues of specific disability populations, and other public and private entities determined to be appropriate by the Council.

(j) Coordination of services

The plan shall describe how services funded under this part will be coordinated with, and complement, other services, in order to avoid unnecessary duplication with other Federal, State, and local programs.

(k) Coordination between Federal and State sources

The plan shall describe efforts to coordinate Federal and State funding for centers for independent living and independent living services.

(l) Outreach

With respect to services and centers funded under this part, the plan shall set forth steps to be taken regarding outreach to populations that are unserved or underserved by programs under this subchapter, including minority groups and urban and rural populations.

(m) Requirements

The plan shall provide satisfactory assurances that all recipients of financial assistance under this part will-

(1) notify all individuals seeking or receiving services under this part about the availability of the client assistance program under [section 732 of this title](#), the purposes of the services provided under such program, and how to contact such program;

(2) take affirmative action to employ and advance in employment qualified individuals with disabilities on the same terms and conditions required with respect to the employment of such individuals under the provisions of [section 793 of this title](#);

(3) adopt such fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for funds paid to the State under this part;

(4)(A) maintain records that fully disclose-

(i) the amount and disposition by such recipient of the proceeds of such financial assistance;

(ii) the total cost of the project or undertaking in connection with which such financial assistance is given or used; and

(iii) the amount of that portion of the cost of the project or undertaking supplied by other sources;

(B) maintain such other records as the Administrator determines to be appropriate to facilitate an effective audit;

(C) afford such access to records maintained under subparagraphs (A) and (B) as the Administrator determines to be appropriate; and

(D) submit such reports with respect to such records as the Administrator determines to be appropriate;

(5) provide access to the Administrator and the Comptroller General or any of their duly authorized representatives, for the purpose of conducting audits and examinations, of any books, documents, papers, and records of the recipients that are pertinent to the financial assistance received under this part; and

	<p>(6) provide for public hearings regarding the contents of the plan during both the formulation and review of the plan.</p> <p>(n) Evaluation The plan shall establish a method for the periodic evaluation of the effectiveness of the plan in meeting the objectives established in subsection (d) of this section, including evaluation of satisfaction by individuals with disabilities.</p> <p>(o) Promoting full access to community life The plan shall describe how the State will provide independent living services described in section 705(18) of this title that promote full access to community life for individuals with significant disabilities.</p>
	<p>Questions for Elizabeth - Administration for Community Living</p> <ol style="list-style-type: none"> 1. Should we continue to use Division of Payment Management login? <i>Yes</i> 2. General Information 1. Is Designated Agency Identification still ORS - <i>That is on the template, and cannot be revised for 3 more years</i> 3. Section 6: Fiscal Control and Fund Accounting & Section 7: Recordkeeping, Access and Reporting 7.1 EDGAR fiscal and accounting requirements? <i>No UGG</i> 4. Part II: Narrative: Section 5 5.2 Establishment and Placement - Describe how the establishment and placement of the SILC ensures its independence with respect to the DSU and all other State agencies. Refer to the SPIL Instructions for more information about completing this section. - Do we need to send a copy of GCD Law, as amended? <i>Just citation</i> 5. Minutes from last year reference problems with how the SILC was operating with regards to decisions made by either staff and/or executive committee - are there any outstanding issues that need to be addressed, or concerns that the DSE should be aware of? <i>No</i> 6. The Council may be purchasing some services from the GCD - taking minutes, posting of meeting notices/minutes, hosting SILC website, etc. <i>Yes As long as that staff person did not have other duties that would create a conflict of interest while assisting the SILC in carrying out its duties.</i> 7. Should the GCD's project manager also be the DSE's representative on the SILC? <i>Not recommended</i>
	<p>Sections of the Proposed State Plan for Independent Living Relating to the Commission/Designated State Entity:</p>

State Plan for Independent Living (SPIL) for Rhode Island for 2017-2019

Part II: Narrative: Section 1 - Goals, Objectives and Activities

Section 1: Goals, Objectives and Activities

1.1 Goals and Mission

Describe the overall goals and mission of the State's IL programs and services. The SPIL must address the goals and mission of both the SILS and the CIL programs, including those of the State agency for individuals who are blind as they relate to the parts of the SPIL administered by that agency.

1.2 Objectives

1.2A. Specify the objectives to be achieved and the time frame for achieving them.

Goal(s) from Section 1.1	Objective to be achieved	Time frame start date	Time frame end date
Mission Goal 1	<p>Objective 2: <i>Government officials and policy makers are educated on areas that impact Rhode Islanders with disabilities.</i></p> <p>Activities:</p> <p>1. <i>Partner with the Governor’s Commission on Disabilities (GCD) Legislative Committee regarding issues impacting persons with disabilities.</i></p> <p>Responsible: <i>OSCIL and SILC</i> Time frame: <i>2017-2019</i></p> <p>2. <i>Co-host GCD Public Forum event and participate on other forum panels.</i></p> <p>Responsible: <i>OSCIL and SILC</i></p> <p>Time frame: <i>2017-2019</i></p>	10/01/2016	09/30/2019
Mission Goal 2	<p>Objective 2: <i>Recreational activities are accessible to Rhode Islanders with disabilities.</i></p> <p>Activities:</p> <p>1. <i>Advocate for accessible recreational activities and facilities in the community, bringing information to the OSCIL and DSE.</i></p> <p>Responsible: <i>OSCIL and SILC</i></p> <p>Time frame: <i>2017-2019</i></p> <p>2. <i>Use media options i.e. websites and newsletters to inform consumers of location of accessible recreation options.</i></p> <p>Responsible: <i>OSCIL</i></p> <p>Time frame: <i>2017-2019</i></p> <p>3. <i>Promote Accessible RI as a resource to finding accessible recreational activities by helping to distribute at least 100 copies per year statewide.</i></p> <p>Responsible: <i>OSCIL and SILC</i></p> <p>Time frame: <i>2017-2019</i></p>	10/01/2016	09/30/2019

Mission Goal 2	<p>Objective 3: <i>Rhode Islanders with disabilities have access to all forms of communication without barriers.</i></p> <p>Activities:</p> <p>1. <i>Model communication access at all meetings of the OSCIL, DSE and SILC.</i></p> <p>Responsible: <i>OSCIL, SILC, and DSE</i></p> <p>Time frame: <i>2017-2019</i></p> <p>2. <i>Provide I & R to address community barriers to communication.</i></p> <p>Responsible: <i>OSCIL and DSE</i></p> <p>Time frame: <i>2017-2019</i></p>	10/01/2016	09/30/2019
Mission Goal 2	<p>Objective 4: <i>Rhode Island will be a state where people with disabilities have access to the community without barriers.</i></p> <p>Activities:</p> <p>1. <i>Model access without barriers at OSCIL, DSE and SILC public events.</i></p> <p>Responsible: <i>OSCIL, SILC, and DSE</i></p> <p>Time frame: <i>2017-2019</i></p> <p>2. <i>Educate consumers on how to self-advocate to address community barriers through instruction and training opportunities.</i></p> <p>Responsible: <i>OSCIL</i></p> <p>Time frame: <i>2017-2019</i></p>	10/01/2016	09/30/2019

1.3B Financial Plan Narratives

1.3B(1) Specify how the part B, part C and chapter 2 (Older Blind) funds, if applicable, will further the SPIL objectives.

Part B funds will be administered by the DSE to the Center for implementation of the goals outlined - in particular for those activities serving those consumers needing home modifications, transition and assistive technology services. Part B funds will also be allocated annually to SILC resource activities and SILC related goals also detailed in this plan.

Part C serves to fund the Center's main operational needs. Chapter 3 OIB¹ funds are not referenced in this plan.

1.3B(2) Describe efforts to coordinate Federal and State funding for centers and IL services, including the amounts, sources and purposes of the funding to be coordinated.

In addition to Part B and C funds, the plan allocates Federal and State funds from Medicaid Waiver programs (CNOM) in Rhode Island- to expand the Home

¹ OIB Older individuals who are blind

Modification Program and to supplement Personal Care Attendant costs for eligible consumers.

These funds are monitored by the RI Office of Rehabilitation Services by contract to the Center (OSCIL) on a State Fiscal Cycle pending budget approval = \$610,000.00

1.3B(3) Describe any in-kind resources including plant, equipment or services to be provided in support of the SILC resource plan, IL services, general CIL operations and/or other SPIL objectives.

The GCD who will serve as the DSE, is making available several in kind resources in support of the SILC resource plan- those resources include meeting and office space, grant monitoring, program oversight, personnel, fiscal management, purchasing and coordination with the Center.

1.3B(4) Provide any additional information about the financial plan, as appropriate.

n/a

1.5 Cooperation, Coordination, and Working Relationships Among Various Entities

Describe the steps that will be taken to maximize the cooperation, coordination and working relationships among the SILS program, the SILC, and centers; the DSU, other State agencies represented on the SILC and other councils that address the needs of specific disability populations and issues; and other public and private entities determined to be appropriate by the SILC.

The description must identify the entities with which the DSU and the SILC will cooperate and coordinate.

SILC members are recruited from and/or are represented on many Councils/agencies that address the needs of people with disabilities. OSCIL also partners with many state and community agencies in order to provide and coordinate needed IL services. The State Plan includes activities to increase partnerships.

These partnerships could include: State Rehabilitation Council, Governor's Advisory Council on the Blind and Vision Impaired, Commission for the Deaf and Hard of Hearing, Governor's Council on Behavioral Health; RI Developmental Disabilities Council, Accessible Transportation Advisory Council, Veterans' Services Strategic Plan Advisory Committee; WIOA Joint Employment of Individuals with Disabilities Committee; United Way 211, Client Assistance Program (Disability Law Center), Division of Elderly Affairs, The MS Dream Center, Accessible RI, RI Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals; RI Department of Health, RI Department of Human Services; RI Office of Veterans' Affairs and the YMCA.

1.6 Coordination of Services

Describe how IL services funded under chapter 1 of title VII of the Act will be coordinated with and complement other services to avoid unnecessary duplication with other Federal, State, and local programs, including the OIB program authorized by chapter 2 of title VII of the Act, that provide IL- or VR-related services.

The ~~DSE~~, OSCIL, and the SILC review the plans of other agencies statewide providing services to individuals with disabilities and seek to provide IL services not otherwise provided as well as individual and system advocacy.

OIB services in RI are coordinated and provided directly by the Office of Rehabilitation Services. Though ORS will no longer serve as DSE for Rhode Island, OIB staff exercise due diligence concerning cross referral and utilization of funds, exchange of best practice models, and sharing of consumer satisfaction survey outcomes.

Coordination with multiple Social Security programs occurs on a case by case basis and through OSCIL participating on advisory committees. Frequent contact and coordination occurs in using Medicaid and Medicare services for access to assistive technology, health care and transportation.

The RI Department of Human Services administers Title XVIII Medicaid, including Medicaid waivers which are fully utilized in assisting individuals with significant disabilities to become more independent through access to personal care assistance, assistive technology and some other services.

The Department of Human Services also administers Title XX and OSCIL assist in accessing the services, such as transportation, provided through the agencies funded by Title XX.

The Office of Rehabilitation Services also has an Assistive Technology Partnership (ATAP) grant through which the OSCIL receives additional funding and participate as partners.

Veteran's services are coordinated through contacts with the RI Office of Veterans' Affairs and the Regional Federal Veterans' Affairs Office.

Services to individuals with intellectual & developmental disabilities and behavioral healthcare services will be coordinated through the Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals.

OSCIL provides on-going Information and Referral services as part of their everyday program activity. OSCIL employs a full-time I and R Specialist who responds to calls via phone, emails and walk-ins, including referrals from the Point 211. Information is provided to the community, other service providers, and OSCIL staff. This program is funded through Title VII: C funding and the Division of Elderly Affairs, as well as smaller grants.

Through OSCIL's Gift of Hearing Program, in collaboration with the URI Speech and Hearing Center, OSCIL provides low-cost hearing aids for those individuals who meet program eligibility.

Part II: Narrative: Section 2 - Scope, Extent, and Arrangements of Services

2.1 Scope and Extent

2.1A Check the appropriate boxes in the SPIL Instrument table indicating the types of IL services to be provided to meet the objectives identified in section 1.2 of this SPIL, and whether the services will be provided by the CILs or by the DSU (directly and/or through contract or grant).

Table 2.1A: Independent living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/grants)
Core Independent Living Services - Information and referral	No	No	Yes
Core Independent Living Services - IL skills training	No	No	Yes
Core Independent Living Services - Peer counseling	No	No	Yes
Core Independent Living Services - Individual and systems advocacy	No	No	Yes
Counseling services, including psychological, psychotherapeutic, and related services	No	No	No
Services related to securing housing or shelter, including services related to community group living, and supportive of the purposes of this Act and of the titles of this Act, and adaptive housing services (including appropriate accommodations to and modifications of any space used to serve, or occupied by, individuals with significant disabilities)	No	No	Yes
Rehabilitation technology	No	No	Yes
Mobility training	No	No	No
Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services	No	No	Yes
Personal assistance services, including attendant care and the training of personnel providing such services	No	No	Yes
Surveys, directories and other activities to identify appropriate housing, recreation, accessible transportation and other support services	No	No	Yes
Consumer information programs on rehabilitation and IL services available under this Act, especially for minorities and other individuals with disabilities who have traditionally been unserved or underserved by programs under this Act	No	No	Yes
Education and training necessary for living in the community and participating in community activities	No	No	Yes
Supported living	No	No	No

Table 2.1A: Independent living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/grants)
Transportation, including referral and assistance for such transportation	No	No	Yes
Physical rehabilitation	No	No	No
Therapeutic treatment	No	No	No
Provision of needed prostheses and other appliances and devices	No	No	No
Individual and group social and recreational services	No	No	Yes
Training to develop skills specifically designed for youths who are individuals with significant disabilities to promote self-awareness and esteem, develop advocacy and self-empowerment skills, and explore career options	No	No	Yes
Services for children with significant disabilities	No	No	No
Services under other Federal, State, or local programs designed to provide resources, training, counseling, or other assistance of substantial benefit in enhancing the independence, productivity, and quality of life of individuals with significant disabilities	No	No	Yes
Appropriate preventive services to decrease the need of individuals with significant disabilities for similar services in the future	No	No	Yes
Community awareness programs to enhance the understanding and integration into society of	No	No	Yes
Other necessary services not inconsistent with the Act	No	No	Yes

2.2 Arrangements for State-Provided Services

2.2A If the DSU will provide any of the IL services identified in section 2.1A through grants or contractual arrangements with third parties, describe such arrangements.

The DSE will contract with the CIL for Part B SILS services. IL service contracts with the CIL includes the provision of eligibility being determined by the CIL, with a sample of case records reviewed by the DSE. The DSE receives and reviews quarterly statistical, narrative, and financial reports.

Part II: Narrative: Section 4 - Designated State Unit (DSU)

4.1 Administrative Support Services

4.1A Describe the administrative support services to be provided by the DSU for the SILS (Part B) program and, if the State is a Section 723 State, for the CIL (Part C) program. Refer to the SPIL Instructions for additional information about administrative support services.

The DSE will administer the Independent Living Services (Part B SILS) programs via developing and monitoring contracts with the CIL, which is funded by Part B federal funds and by funding and administering the contract with the SILC for its resource plan funds.

The DSE will provide the following in-kind services:

- 1. accessible meeting space for webinars, teleconferences or meetings on request of the SILC and/or the CIL;*
- 2. office space for the SILC chairperson and/or administrative staff;*
- 3. a business telephone line, with voicemail that can be accessed off-site;*
- 4. email accounts that can be accessed off-site;*
- 5. internet service and supports;*
- 6. website maintenance; and*
- 7. a computer workstation.*

The DSE will utilize the state division of purchasing's (bulk) master price agreements to purchase for the SILC and CIL, upon request he following:

- 1. Interpreters for the deaf & CART recorders;*
- 2. Travel Services, booking hotel, airline tickets, etc. at the Government rate for council members attending conferences;*
- 3. Information Technology Services, including cloud based daily automatic off-site backup of data files;*
- 4. Directors & Officers Liability Insurance coverage;*
- 5. Off-Site Shredding Services; and*
- 6. mail processing at the state government's pre-sort rates.*

4.1B Describe other DSU arrangements for the administration of the IL program, if any.

The DSE will enter into a memorandum of agreement with the SILC, to provide the personnel support services, see 5.4.

Part II: Narrative: Section 5 - Statewide Independent Living Council (SILC)

5.1 Resource plan

5.1A Describe the resource plan prepared by the SILC in conjunction with the **DSU** for the provision of resources, including staff and personnel, made available under parts B and C of chapter 1 of title VII, section 101(a)(18) of the Act, and from other public and private sources that may be necessary to carry out the functions of the SILC identified in section 705(c). The description must address the three years of this SPIL.

Refer to the SPIL Instructions for more information about completing this section.

In conjunction with developing the SPIL, the Council and State Plan Committee also undertook the task of selecting a DSE. We met with our selection, the Governor's

Commission on Disabilities (GCD), and discussed our various roles and what is expected of each other. The Council feels they have made an excellent choice and will be complementary in our respective roles going forward.

The Rhode Island State Independent Living Council's (RISILC) State Plan Committee prepared a draft budget. This step was necessary because our Treasurer, and head of the Finance Committee, was on leave. Therefore, the Chairperson reached out to available sources to review past budgets and expenditures to develop a starting point for the State Plan Committee to prepare a draft budget. Special attention was given to the goals of this SPIL to ensure appropriate resources to carry out the Plan. Its recommendation was sent to the full Council where it was reviewed and discussed. The RISILC Chairperson and State Plan Committee met with the DSE, Governor's Commission on Disabilities (GCD), several times to review the resource funding source(s) and draft budget. The final budget was presented and approved by the RISILC, the Ocean State Center for Independent Living (CIL representative) and the DSE at the June 22, 2016 bi-monthly Council meeting.

The RISILC utilized the following guidelines in preparing the resource plan:

- Maximizing the use of other resources, including cost savings through utilization of the Master Price Agreement.*
- Council members scheduling their own transportation.*
- Committee Chairpersons assume the responsibility for scheduling meetings and contacting members, maintaining a committee file to include committee meeting agendas, minutes and reports.*
- The RISILC will assure that accessibility needs are met for all members, volunteers, and the general public.*
- The Governor's Commission on Disabilities provides administrative support to the Council to fulfill its federal mandates.*
- The GCD providing office space to assist the Council in conducting business, holding committee meetings, housing files and equipment rent free.*
- Travel costs represent reimbursement for mileage for members to attend Council meetings, hearings, and forums to gather the needs of people with disabilities and follows the guidelines in Section 705 (f) of the Rehabilitation Act.*
- The RISILC receives its Resource Plan funds directly from the DSE in the amount of \$46,684 each year of the three years of this SPIL.*

5.1B Describe how the following SILC resource plan requirements will be addressed.

- The SILC's responsibility for the proper expenditure of funds and use of resources that it receives under the resource plan.

The RISILC's resource plan requirements as listed above are met by the following relevant written procedures and policies, which are on file with the RISILC and the DSE and available for review: Financial Procedures, Business Procedures, and Internal Procedures. These procedures will be reviewed annually.

- Non-inclusion of conditions or requirements in the SILC resource plan that may compromise the independence of the SILC.

The RI General Assembly Enacted and the Governor, on June 24, 2016 signed into law the following statute, effective October 1, 2016:

RIGL 42-51-12 Governor's Commission on Disabilities - 42-51-12.

Designated state entity. -- (a) The governor's commission on disabilities shall be the designated state entity (DSE), pursuant to section 705(e) of the Workforce Innovation and Opportunity Act (29 U.S.C. 796c). As the DSE, the commission shall apply for and:

- (1) Receive, account for, and disburse funds received by the state under Part B based on the state independent living plan (SILP);
 - (2) Provide administrative support services for a program under Part B;
 - (3) Keep such records and afford such access to such records as the administrator finds to be necessary with respect to the programs;
 - (4) Submit such additional information or provide such assurances as the administrator may require with respect to the programs; and
 - (5) Retain not more than five percent (5%) of the funds received by the state for any fiscal year under Part B, for the performance of the services outlined in paragraphs (a)(1) through 4) of this section. For purposes of these regulations, the five percent (5%) cap on funds for administrative expenses applies only to the Part B funds allocated to the state and to the state's required ten percent (10%) Part B match. It does not apply to other program income funds, including, but not limited to, payments provided to the state from the social security administration for assisting social security beneficiaries and recipients to achieve employment outcomes, any other federal funds, or to other funds allocated by the state for IL purposes.
- (b) The DSE shall carry out its other responsibilities under the act, including, but not limited to, arranging for the delivery of IL services under Part B of the act, and for the necessary and sufficient resources needed by the statewide independent living council (SILC) to fulfill its statutory duties and authorities, as authorized in the approved state plan.
- (c) Fiscal and accounting requirements: The DSE shall adopt fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for federal funds provided to centers for independent living (CILs), SILCs, and/or other service providers under the independent living services (ILS) program. The DSE must comply with all applicable federal and state laws and regulations, including those in 45 CFR parts 75.
- (d) The SILC shall not be established as an entity within a state agency, including the DSE. The SILC shall be independent of and autonomous from the DSE and all other state agencies.

- Reliance, to the maximum extent possible, on the use of resources in existence during the period of implementation of the State plan.

Collaboration is an ongoing priority since it maximizes efforts and limited resources. Based on conservative budget figures and developing the SPIL goals and objectives within our financial and administrative assistance means, the RISILC's resource plan is consistent

with the existing resources expected to be allocated during the course of the three year SPIL period.

5.2 Establishment and Placement

Describe how the establishment and placement of the SILC ensures its independence with respect to the DSU and all other State agencies. Refer to the SPIL Instructions for more information about completing this section.

The SILC is established as a 501(c)3 and is independent of all state agencies including the DSE (Governor's Commission on Disabilities, see RIGL 42-51-12(d) above) where the SILC's office is located. The SILC develops and administers its own budget and may hire, supervise and evaluate its own staff or enter into a memorandum of agreement with the DSE for staff support.

5.3 Appointment and Composition

Describe the process used by the State to appoint members to the SILC who meet the composition requirements in section 705(b). Refer to the SPIL Instructions for more information about completing this section.

All appointments to the SILC are made by the Governor of RI upon receipt of SILC's recommendations as vacancies occur. Applications, appointment documents, and other pertinent materials are filed in the SILC office. The current appointments and terms are kept at both the SILC and the Governor's Office and are filed on the RI Secretary of State's website. Periodic reviews are conducted by SILC to assess and monitor the term limits, upcoming vacancies, and the diversity of the members.

5.4 Staffing

Describe how the following SILC staffing requirements will be met.

- SILC supervision and evaluation, consistent with State law, of its staff and other personnel as may be necessary to carry out its functions.
- Non-assignment of duties to SILC staff and other personnel made available by the DSU, or any other State agency or office that would create a conflict of interest while assisting the SILC in carrying out its duties.

The DSE will enter into a memorandum of agreement with the SILC, to provide the following support services:

- 1. posting SILC meeting notices on the Secretary of State's Open Meetings' website and email to SILC listserv;*
- 2. recording the minutes at SILC meeting, prepare draft minutes & post within 14 days on the Secretary of State's Open Meetings' website;*
- 3. filing SILC minutes once adopted on the Secretary of State's Open Meetings' website;*
- 4. arranging for interpreters for the deaf, CART recorders and other accommodations for SILC meetings and events;*
- 5. arranging logistics for SILC events;*

6. answer dedicated SILC telephone line and provide information, referral or other assistance as determined by the SILC;
7. preparing and distributing mailings/emailings as directed by the SILC;
8. compiling financial information for quarterly/annual reports for SILC's review and approval;
9. processing of invoices approved to by the SILC; and
10. other staffing assistance the SILC requests, that can be provided within the SILC's 30% cap.

Part II: Narrative: Section 6 - Service Provider Requirements

Describe how the following service provider requirements will be met:

6.3 Recordkeeping, Access and Reporting

- Maintenance of records that fully disclose and document the information listed in 34 CFR 364.35.

OSCIL is required to maintain compliance with the contract requirements, including compliance with the Rehab Act's Section 725 Standards and Assurances. The DSE conducts periodic record review of OSCIL to assure compliance with these requirements.

**Financial Record keeping (Sec. 704(M)(4)(A) and B of the Act; 34 CFR 364.35)*

**Financial Reports (Sec. 704 (M)(4)(D); 34 CFR 364.36)*

***Includes monthly financial reporting to the DSE.*

- Submission of annual performance and financial reports, and any other reports that the Secretary determines to be appropriate

OSCIL is required to submit monthly and annual performance and financial reports. The DSE conducts periodic record review of OSCIL to assure compliance with these requirements.

** Financial Reports (Sec. 704 (M)(4)(D); 34 CFR 364.36)*

***As required by Uniform Grant Guidance (UGG), OSCIL will provide monthly financial and programmatic reports to the DSE for review.*

- Access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, for the purpose of conducting audits, examinations, and compliance reviews, to the information listed in 34 CFR 364.37.

OSCIL is required to provide access to the Commissioner for the purpose of conducting audits, examinations and compliance reviews. The DSE conducts periodic record review of OSCIL to assure compliance with these requirements.

** Access to Financial Records (Secs. 704.(M)(4) and (5) 34 CFR 364.37)*

State Plan for Independent Living Budget	State FY 2017 Independent Living
<i>Independent Living Administration</i>	
Wages & Benefits	\$6,228
Contracted Professional Services	\$4,966

Operating Supplies and Expenses	\$1,239
Capital Purchases and Equipment	\$210
Independent Living Administration Subtotal	\$12,644
State Funded Hours of Service	432
<i>Statewide Independent Living Council</i>	
Wages & Benefits	\$0
Contracted Professional Services ²	\$8,127
Operating Supplies and Expenses ³	\$5,629
Statewide Independent Living Council Subtotal	\$13,757
State Funded Hours of Service	324
<i>Independent Living State Match Total</i>	<i>\$26,400</i>
Independent Living State Plan Grant	
Wages & Benefits	\$0
Contracted Professional Services ⁴	\$16,600
Operating Supplies and Expenses ⁵	\$764
Assistance and Grants ⁶	\$211,386
Independent Living Services Federal Grant Total	\$228,750

The Office of Rehabilitation Services projects up to \$100,000 of prior federal fiscal year carry-over independent living services funding that could be turned over to the Commission on October 1, 2016.

	<p>MOTION: To authorize and direct the Executive Secretary to sign the State Plan for Independent Living, as the director of the designated state entity, once revised as follows:</p> <p>1.2 Objectives Goal 2 - Objective 2 - Activity 1: strike the words “and DSE”;</p> <p>1.3B(3) Financial Plan Narratives - strike the words “, grant monitoring, program oversight, personnel, fiscal management, purchasing and coordination with the Center”;</p> <p>1.6 Coordination of Services - 1st paragraph only sentence strike “DSE”;</p> <p>2.2A Arrangements for State-Provided Services - 1st sentence strike “services”.</p> <p>Motion moved by LW, seconded by JD, passed, recused JR</p>
Status Reports:	

² SILC would purchase 324 hours of clerical support (Administrative Assistant) from the Commission adding 0.24 FTE, bringing the position up to full time = \$6,020 to take minutes, post meeting notices & minutes, answer phone, process payments, enter fiscal & narrative reports, etc.

Legal services \$300 for the 501c(3)'s registered agent + \$600 for PCAs at meetings + 1,200 for meeting facilitator
³ SILC membership dues & subscriptions \$500 + printing business cards \$60 + \$2,445 D&O insurance + \$2,608 in-state travel + \$16 parking & tolls.

⁴ SILC training \$3,000 + interpreters & CART \$6,600 + Strategic planning/SILC Development \$7,000

⁵ Program supplies \$450 + printing \$200 + single federal audit fee \$114

⁶ Center for Independent Living (OSCIL) \$206,070 + SILC Annual Regional Education Event \$5,316.

	4:40 Commission Operations and Budget, Bob Cooper, Executive Secretary
	Purpose/Goal: To brief the committee on Commission operations and budget since the last meeting
	Discussion: The FY 2016 Revised & 2017 Budgets as Enacted was identical to the Commission's Revised 2016 & 2017 Requests, including the Independent Living state & federal funding.

Line Sequence (Account) Title	FY 2016 Revised	FY 2017 Enacted
Governor's Commission on Disabilities Total	\$364,973	\$366,436
Mary Brennan Fellowship Fund Total	\$14,718	\$14,718
Disability Business Enterprise Total	\$2,199	\$4,993
Independent Living - Administration Total	\$0	\$12,644
Statewide Independent Living Council – Administration Total	\$0	\$13,757
Total General Revenue	\$381,890	\$412,547
HAVA Grant Total	\$31,647	\$0
Independent Living Services Total	\$0	\$228,750
Total Federal	\$31,647	\$228,750
Technical Assistance - GCD Total	\$10,103	\$10,505
New England ADA Center Total	\$22,787	\$33,621
Total Restricted Receipts	\$32,890	\$44,126
Grand Total	\$446,427	\$685,423

	4:45 Status of GCD Legislative Package
	Purpose/Goal: To brief the Committee on the 2015 General Assembly Session & Commission's Legislative Package.

Governor's Commission on Disabilities Legislative Package Status as of 06/27/2016

GCD Position	Status	Total	
Commission Opposes unless amended			
	<i>Held for Further Study, Continued, or Heard</i>	2	2.2%
	Resolution Adopted	1	1.1%
Commission Opposes unless amended		3	
Commission Supports			
	<i>Held for Further Study, Continued, or Heard</i>	2	2.2%
	<i>Signed by the Governor</i>	1	1.1%
Commission Supports		3	
Commission Supports as amended			
	<i>Passed in Concurrence</i>	1	1.1%
	<i>Signed by the Governor</i>	3	3.3%
	<i>Transmitted to Governor</i>	1	1.1%
Commission Supports as amended		5	
Commission Supports if amended			
	Indefinitely Postponed	1	1.1%
	Referred to Committee	3	3.3%
	Signed by the Governor	4	4.3%
Commission Supports if amended		8	
Legislation Committee finds this bill Beneficial			
	<i>Held for Further Study, Continued, or Heard</i>	23	25.0%
	Passed and Referred to	4	4.3%

Recommend Pass in Concurrence	1	1.1%
Referred to Committee	2	2.2%
<i>Signed by the Governor</i>	8	8.7%
<i>Transmitted to Governor</i>	6	6.5%
Legislation Committee finds this bill Beneficial	44	
Legislation Committee finds this bill Beneficial if amended		
Held for Further Study, Continued, or Heard	9	9.8%
Passed in Concurrence	1	1.1%
Signed by the Governor	2	2.2%
Transmitted to Governor	5	5.4%
Withdrawn by sponsor	1	1.1%
Legislation Committee finds this bill Beneficial if amended	18	
Legislation Committee finds this bill Harmful		
<i>Held for Further Study, Continued, or Heard</i>	6	6.5%
<i>Meeting Postponed</i>	1	1.1%
<i>Passed and Referred to</i>	1	1.1%
<i>Referred to Committee</i>	3	3.3%
Legislation Committee finds this bill Harmful	11	
	Grand Total	92
	Successful	31 33.7%

Governor's Commission on Disabilities Legislation that has passed in concurrence

Signed by the Governor

Commission Supports

16 H 7454 Art. 11 AN ARTICLE RELATING TO STRENGTHENING NEIGHBORHOOD SCHOOLS

Rep. Abney Requested by the Governor

This article amends several sections of law relating to school district accounting and the education funding formula, including review of the formula on a regular interval, change to the weight for high-cost special education and adjusting per pupil funding for charter school students. Also, new accounting standards for greater transparency at the local level are proposed.

House Finance Committee Substitute does not alter the determination of excess cost, instead it requires the department of elementary and secondary education to collect data on those educational costs that exceed the state approved threshold based on an amount above four (4) times the core foundation amount.

The Floor Amendment does not affect the special education provisions.

Commission Supports as amended

16 H 7454 Art. 01/10 AN ARTICLE RELATING TO MAKING APPROPRIATIONS IN SUPPORT OF FY 2017
- GOVERNOR'S COMMISSION ON DISABILITIES

Rep. Abney Requested by the Governor

FY 2016 Revised Budget

The Governor recommends revised FY 2016 appropriations of \$435,961 for the Governor's Commission on Disabilities, including \$381,890 from general revenue, \$21,181 from federal funds, and \$32,890 from restricted receipts. Relative to FY 2016 enacted levels, recommended general revenue financing decreases by \$1,166, federal funds financing decreases by \$14,278, and restricted receipts financing increases by \$22,881.

FY 2017 Recommended Budget

The Governor recommends FY 2017 appropriations of \$440,570, including \$386,147 from general revenue, \$10,297 from federal funds, and \$44,126 in restricted receipts. Relative to FY 2016 enacted levels, the FY 2017 recommended general revenue financing increases by \$3,091, federal funds financings decreases by \$25,162, and restricted receipt financing increases by \$34,117. The FY 2017 Budget is inclusive of enacted statewide medical benefit and other savings distributed to state agencies, which resulted in \$1,176 of general revenue savings being allocated to the Commission.

The Substitute

FY 2016

76. Federal HA VA Grant Fund Adjustments. The FY 2017 recommended budget includes \$10,297 from federal Help America Vote Act funds for renovation of polling places, fellowships, signage, and other costs associated with elections. The Governor's Commission on Disabilities was notified by the United States Department of Health and Human Services that the funds must be spent by June 30, 2016. The Governor subsequently requested an amendment to shift expenditures from FY 2017 to FY 2016 and includes \$10,466 to enable the Commission to spend the funds before the grant expires. The House Finance Committee concurs.

FY 2017

Independent Living Program from DHS. The House Finance Committee concurs with the Governor's requested

amendment to designate the Governor's Commission on Disabilities as the state agency responsible for applying for and receiving federal funds under the Workforce Innovation and Opportunity Act for the State Independent Living Plan, effective October 1, 2016. The House Finance Committee also concurs with the requested amendment to transfer \$255,150 from the Department of Human Services to the Commission. This includes \$228,750 from federal funds and \$26,400 from general revenues for the state's required 10.0 percent match.

Federal HA VA Grant Adjustment. The FY 2017 recommended budget includes \$10,297 from federal Help America Vote Act funds for renovation of polling places, fellowships, signage, and other costs associated with elections. The Governor's Commission on Disabilities was notified by the U.S. Department of Health and Human Services that the funds must be spent by June 30, 2016. The House Finance Committee concurs with the Governor's requested amendment to shift available resources from FY 2017 to FY 2016 to enable the Commission to spend the funds before the grant expires.

16 H 7454 Art. 04 Sec. 19 & 20 AN ARTICLE RELATING TO GOVERNMENT ORGANIZATION

Rep. Abney Requested by the Governor

This article will formalize and streamline several important areas of state government, which is intended to improve government efficiency, protect against fraud, waste and abuse, and to better serve the citizens of Rhode Island. Included within this article is the establishment of the Office of Diversity, Equity and Opportunity, the Office of Internal Audit, an Independent Office of Veterans Affairs, the Division of Enterprise Technology Strategy and Service, and the Division of Capital Asset Management and Maintenance. In addition, the Women, Infants, and Children program is transferred to the Department of Health from the Department of House Finance Committee transfers the State Independent Living Program from the Department of Human Services to the Governor's Commission on Disabilities. The new statutory language will also establish the Commission as the Designated State Entity under the federal Workforce Innovation and Opportunity Act. The transfer of these functions is proposed to coincide with the federal fiscal year on October 1, 2016.

16 S 2476 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- GOVERNOR'S WORKFORCE BOARD RHODE ISLAND

Sen. Conley

This act would require the governor's workforce board to expand job and career opportunities for individuals with intellectual and developmental disabilities. In addition, it would add representatives from the department of behavioral healthcare, developmental disabilities and hospitals to the advisory committee of the state career pathways systems.

This act would take effect upon passage.

The Floor Amendment adds "and other significant disabilities" On page 5 line 27-28 when referring to the distribution of funds for adult training activities.

16 H 7454 Art. 14 AN ARTICLE RELATING TO CAREGIVERS/COMPASSION CENTERS

Rep. Abney Requested by the Governor

This article restructures and expands regulation of Rhode Island's medical marijuana system. The Department of Business Regulation (DBR) will regulate primary caregivers, compassion centers, cooperative cultivations, and a new class of cultivator licenses for people and businesses who wish to operate as wholesale suppliers of marijuana to compassion centers. The Department of Health will continue to regulate patients and a new group called authorized purchasers. This article implements a system requiring every medical marijuana plant in the state to be tagged, and tag holders will be charged an annual fee for each tag. This article also lowers the number of plants a qualifying patient or primary caregiver can grow, and decreases the surcharge on compassion centers from 4% to 3%.

House Finance Committee Substitute reduces the fees from \$150/plant for patients growing their own & \$350/plant for caregivers to \$25/plant. For patients that qualify for reduced-registration due to income or disability status, there shall be no fee per tag set.

The Floor Amendment allows a patient/cardholder to designate "an authorized purchaser cardholder" or "registry identification card" to act on their behalf.

It adds "Notwithstanding any other provisions of the general laws, the manufacture of marijuana using a solvent extraction process that includes the use of a compressed, flammable gas as a solvent by a licensed cultivator shall not be subject to the protections of this chapter."

It also makes a number of technical changes.

Commission Supports if amended

16 H 7454 Art. 07 Sec. 05 formerly 09 Sec. 07 AN ARTICLE RELATING TO HEALTH AND HUMAN SERVICES

Rep. Abney Requested by the Governor

This Section amends Chapter 40-8.9 Medical Assistance - Long-Term Care Service and Finance Reform. By October 1, 2016, an increase in the base payment rates for home care service providers, for the purpose of implementing a wage pass-through program for personal care attendants and home health aides assisting long-term care beneficiaries.

House Finance Committee Substitute requires the service providers to report on patient liability owed and collected to the Executive Office of Health and Human Services. As the Governor requested home care provider agencies participating in the wage pass-through program targeted to increase wages for direct care home care workers will be

permitted to retain any costs related to payroll taxes, insurance contributions and only those other expenses of implementing the wage increase that are required by state and federal law.

The Floor Amendment clarifies the intent that the wage increase is passed on to the employees.

16 H 7454 Art. 07 Sec. 04 formerly 09 Sec. 06 AN ARTICLE RELATING TO HEALTH AND HUMAN SERVICES
Rep. Abney Requested by the Governor

This Section amends Chapter 40-8.5 Health Care for Elderly and Disabled Residents Act; Chapter 40-8.9. Managed care systems would be expanded to include community health teams, and/or other such House Finance Committee Substitute does not make any changes to the renumbered Section 04.

16 H 7454 Art. 07 Sec. 09 formerly Art. 07 AN ARTICLE RELATING TO HEALTH AND HUMAN SERVICES
Rep. Abney Requested by the Governor

This article is a joint resolution authorizing the Executive Office of Health and Human Services to undertake various reforms within the Medical Assistance (Medicaid) program. Included in the resolution are measures requiring changes to the Medicaid State Plan, Category II or III changes under the terms and conditions of Rhode Island's Section 1115 Waiver, and/or changes to state rules and regulations.

The annual appropriation bill passed by the General Assembly typically includes an article that provides legal authority for Medicaid initiatives that have budgetary savings associated with them. In recent budgets, this article has also included a series of resolutions that describe changes to the Medicaid program that underlie the budget's appropriation but that do not require statutory action, rather regulatory changes. This article grants OHHS the authority to undertake all actions required to realize the funding levels included in Article 1. Article 9 includes language for the statutory changes needed to implement several of the associated initiatives.

The Governor's budget includes \$8.8 million (\$22.7 million all funds) in savings and recommends expenditure of \$2.0 million in general revenues and (\$4.1 million all funds) for a net savings of \$6.8 million (\$18.6 million all funds) in FY 2017.

This article establishes the legal authority for the Secretary of the Executive Office of Health and Human Services to review and coordinate any Medicaid section 1115 demonstration 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. The changes include: Nursing Facility Payment Rates; Beneficiary Liability Collection Enhancements; Medicaid Managed Care Organizations (MCO) – Administrative Rate-Setting; Managed Care Plan Re-procurement; Increase in Long Term Services and Supports (LTSS) Home Care Provider Wages; Integrated Care Initiative (ICI) – Enrollment; Alternative Payment Arrangements; Implementation of Approved Authorities: Section 1115 Waiver Demonstration Extension and Amendments; and Federal Financing Opportunities.

The original Article 07 was moved to the end of the merged article, the changes include removing from the article the proposed:

- Elimination of the Nursing Facility Payment Rates increase;
- Medicaid Managed Care Organizations (MCO) – Administrative Rate-Setting changes;
- Managed Care Plan Re-procurement;
- Integrated Care Initiative (ICI) – Enrollment; and
- Implementation of Approved Authorities: Section 1115 Waiver Demonstration 3 Extension and Amendments.

The Substitute includes the Governor's amendment to add authority to the Rhode Island Medicaid Reform Act of 2008 Resolution to implement the R.I. Health System Transformation Program which will utilize newly authorized federal match for Costs Not Otherwise Matchable (CNOMS) and Designated State Health Programs (DSHPs) to make payments to health care providers participating in Alternative Payment Arrangements including but not limited to accountable entities to accelerate the transformation of Rhode Island's health care system to value based payment.

16 H 7454 Art. 07 AN ARTICLE RELATING TO HEALTH AND HUMAN SERVICES
Rep. Abney Requested by Governor

This article is a joint resolution authorizing the Executive Office of Health and Human Services to undertake various reforms within the Medical Assistance (Medicaid) program. Included in the resolution are measures requiring changes to the Medicaid State Plan, Category II or III changes under the terms and conditions of Rhode Island's Section 1115 Waiver, and/or changes to state rules and regulations.

The annual appropriation bill passed by the General Assembly typically includes an article that provides legal authority for Medicaid initiatives that have budgetary savings associated with them. In recent budgets, this article has also included a series of resolutions that describe changes to the Medicaid program that underlie the budget's appropriation but that do not require statutory action, rather regulatory changes. This article grants OHHS the authority to undertake all actions required to realize the funding levels included in Article 1. Article 9 includes language for the statutory changes needed to implement several of the associated initiatives.

The Governor's budget includes \$8.8 million (\$22.7 million all funds) in savings and recommends expenditure of \$2.0 million in general revenues and (\$4.1 million all funds) for a net savings of \$6.8 million (\$18.6 million all funds) in FY 2017.

This article establishes the legal authority for the Secretary of the Executive Office of Health and Human Services

to review and coordinate any Medicaid section 1115 demonstration 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. The changes include: Nursing Facility Payment Rates; Beneficiary Liability Collection Enhancements; Medicaid Managed Care Organizations (MCO) – Administrative Rate-Setting; Managed Care Plan Re-procurement; Increase in Long Term Services and Supports (LTSS) Home Care Provider Wages; Integrated Care Initiative (ICI) – Enrollment; Alternative Payment Arrangements; Implementation of Approved Authorities: Section 1115 Waiver Demonstration Extension and Amendments; and Federal Financing Opportunities.

House Finance Committee Substitute: Articles 07 and 09 have been merged into a revised Article 07. Changes to the original Articles 07 & 09 follows.

Legislation Committee finds these bills Beneficial

16 S 2426 & H 7154 ACTS RELATING TO STATE AFFAIRS AND GOVERNMENT -- FREEDOM FROM PRONE RESTRAINT ACT

Sen. Goldin & Rep. Canario

This act would prohibit the use of prone restraints in certain facilities; would require training of all service providers in the reduction / elimination of restraint and seclusion, and would create a eighteen (18) member study commission to study prone restraint and training approaches in covered facilities.

This act would take effect upon passage.

The Substitute increases the study commission membership to 20, adding the director of the Community Provider Network of Rhode Island; and a director of a provider of mental health services.

16 S 2499 AN ACT RELATING TO INSURANCE -- OFF-LABEL USES OF PRESCRIPTION DRUGS

Sen. Walaska Requested by Attorney General

This act would provide that no health insurer issuing a policy which provides coverage for prescription drugs shall exclude coverage of any drug used for the treatment of disabling or life-threatening chronic disease on the grounds that the drug is considered "off-label" in that the drug has not been approved by the FDA for that indication, provided that the drug is recognized for treatment of that indication in one of the standard reference compendia, or in the medical literature.

This act would take effect upon passage.

The Substitute A inserts the same phrase "or disabling or life-threatening chronic disease" in all relevant paragraphs.

The Substitute B This act would define "peer-reviewed medical journals" and would provide that no health insurer issuing a policy which provides coverage for prescription drugs shall exclude coverage of any drug used for the treatment of disabling or life-threatening chronic disease on the grounds that the drug is considered "off-label" in that the drug has not been approved by the FDA for that indication, provided that the drug is recognized for treatment of that indication in one of the standard reference compendia, or in the medical literature.

16 S 2853 H 7835 ACTS RELATING TO STATE AFFAIRS AND GOVERNMENT -- GOVERNOR'S WORKFORCE BOARD RHODE ISLAND

Sen. Goodwin & Rep. McEntee Requested by Department of Labor and Training

This act would amend the composition of the governor's workforce board by adding one additional employer seat and one seat representing the office of rehabilitation services in the department of human resources.⁷

This act would take effect upon passage.

The Substitute would correct the name of the "department of human resources" to the department of human services".

The Floor Amendment would adjust the Terms of office and voting provision to reflect the increase in membership.

16 S 2898 & H 7866 ACTS RELATING TO BUSINESSES AND PROFESSIONS -- THE RHODE ISLAND HEALTH INFORMATION EXCHANGE ACT OF 2008

Sen. Miller & Rep. Coughlin Requested by Office of Health and Human Services

This act would allow persons authorized by a patient to gain access to that patient's confidential health care information from the health information exchange. This act would also allow health plans: (1) To send information to the health information exchange; and (2) To receive information to which they are already legally entitled from the health information exchange for care coordination and management.

This act would take effect upon passage.

Legislation Committee finds these bills Beneficial if amended

16 S 2373 & H 7329 ACTS RELATING TO PUBLIC UTILITIES AND CARRIERS - RHODE ISLAND PUBLIC TRANSIT AUTHORITY

Sen. Pichardo & Rep. Naughton

This act would provide that the governor's appointments to the RIPTA authority shall include a regular user of fixed-route RIPTA transportation and also a disabled person.

⁷ Currently the "one person with a disability", required by the existing law, also works at the Office of Rehabilitation Services.

This act would take effect upon passage.

Transmitted to Governor

Legislation Committee finds this bill Beneficial

16 H 7616 AN ACT RELATING TO HEALTH AND SAFETY -- INSURANCE--MENTAL ILLNESS AND SUBSTANCE ABUSE

Rep. Bennett

This act would require comprehensive discharge planning for patients treated for substance use disorders and would require insurers to cover medication-assisted addiction treatment including methadone, buprenorphine, and naltrexone.

This act would take effect upon passage.

The Substitute Alexander Perry and Brandon Goldner Act requires comprehensive discharge planning for patients treated for substance use disorders, opioid overdoses, and chronic addiction and would require insurers to cover medication-assisted addiction treatment including methadone, buprenorphine, and naltrexone.

16 H 7283 AN ACT RELATING TO CRIMINAL OFFENSES - WEAPONS

Rep. Amore

This act would prohibit any person convicted of a misdemeanor offense under §12-29-2 1 (a crime involving domestic violence) from purchasing, owning, transporting, carrying, or possessing any firearm. Offenses punishable as petty misdemeanors would be excluded from this prohibition. Further, it would provide that those people who have had their convictions expunged, set aside, or who have had their civil rights restored would not be considered a prohibited person under this chapter.

This act would take effect upon passage.

The Substitute requires that any person convicted of a felony domestic offense be ordered by the court to surrender all firearm(s) in their possession, care, custody or control to either the state or local police, or federally licensed firearms dealer and that they file proof of surrender of those firearms with the court having jurisdiction over the case.

16 H 7816 & S 2755 ACTS RELATING TO BUSINESSES AND PROFESSIONS - PHARMACIES

Rep. Serpa & Sen. Coyne

This act would add biological products and interchangeable biological products to the medications pharmacies may dispense, and would regulate the procedures for dispensing and substitution.

This act would take effect upon passage.

The Substitute expands on the definition of "Interchangeable biological product" by adding "lists of licensed biologic products with reference product exclusivity and biosimilarity or interchangeability evaluations". It also authorizes "The pharmacist will make a biological product selection from approved interchangeable prescription biological products, which shall be less expensive to the patient in accordance with §21-31-16.1(b)." The pharmacist is allow to dispense the product when prescribe in writing or orally and the product information is available on a computerized system.

The Substitute also deletes the phrase "shall pass the savings on to the ultimate consumer".

The Floor Amendment clarifies that the "approved interchangeable prescription biological products" are products in accordance with §21-31-16.1(g).

§21-31-16.1(g) Biological product selection, was new language in the original bill and remains unchanged "The director shall permit substitution of a less expensive biological product, as defined in §5-19.1-2, for a prescribed biological product only if said less expensive biological product is an interchangeable biological product as defined in §5-19.1-2. The director shall maintain on the Rhode Island state department of health website, a link to the current list of each biological product determined by the United States Food and Drug Administration to be an interchangeable biological product."

16 H 8035 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- GOVERNOR'S WORKFORCE

BOARD RHODE ISLAND

Rep. Amore

This act would require the governor's workforce board to expand job and career opportunities for individuals with intellectual and developmental disabilities. In addition, it would add representatives from the department of behavioral healthcare, developmental disabilities and hospitals to the advisory committee of the state career pathways systems.

This act would take effect upon passage.

The Substitute adds "and other significant disabilities" On page 5 line 27-28 when referring to the distribution of funds for adult training activities.

16 S 2356 AN ACT RELATING TO HEALTH AND SAFETY -- INSURANCE--MENTAL ILLNESS AND SUBSTANCE ABUSE

Sen. Miller

This act would require comprehensive discharge planning for patients treated for substance use disorders and would require insurers to cover medication-assisted addiction treatment including methadone, buprenorphine, and naltrexone.

This act would take effect upon passage.

The Substitute added a new number iii to discharge planning in Section 1 page 1. "(iii) Attempting to notify the person(s) listed as patients' emergency contacts and 14 recovery coach before discharge". Also added a clause under (D) Recovery Coaches at the bottom of page 3 which states "Also added is a clause under (D) Recovery Coaches at the bottom of page 3 which states "If the clinically appropriate in-patient and out-patient services for the treatment of substance use disorder, opioid overdose, or chronic addiction are not immediately available, the hospital, health care clinic, urgent care center, and emergency room diversion facility shall provide medically necessary and appropriate services until the appropriate transfer of care is completed."

The Substitute also changed the title by adding "THE ALEXANDER C. PERRY ACT"

The Floor Amendment changed the title by adding "AND BRANDON GOLDNER" and delaying the effective date from September 1, 2016 to January 1, 2017. It also adds "(i) That with patient consent, each patient presenting to a hospital or freestanding emergency care facility with indication of a substance use disorder, opioid overdose, or chronic addiction shall receive a substance abuse evaluation, in accordance with the standards in subsection (a)(4)(ii) of this section, before discharge. Prior to the dissemination of the standards in subsection (a)(4)(ii) of this section, with patient consent, each patient presenting to a hospital or freestanding emergency care facility with indication of a substance use disorder, opioid overdose, or chronic addiction shall, receive a substance abuse evaluation, in accordance with best practices standards, before discharge;"

Legislation Committee finds these bills Beneficial if amended

16 H 8056 & S 2579 ACTS RELATING TO BEHAVIORAL HEALTHCARE, DEVELOPMENTAL DISABILITIES AND HOSPITALS

Rep. Casey & Sen. Lynch Prata

This act would amend the law on the department of behavioral healthcare, developmental disabilities and hospitals to allow the authority to certify recovery housing facilities and programs for residential substance use treatment. In addition, after October 1, 2016, only certified recovery housing would be eligible to receive funding to deliver recovery-housing services.

This act would take effect upon passage.

The Substitute A/1 would authorize the department of behavioral healthcare, developmental disabilities and hospitals to certify recovery-housing facilities directly or through a contracted entity, subject to appropriations, using National Alliance for Recovery Residences (NARR) standards. This act would further provide that, in accordance with a schedule to be determined by department regulations, all referrals from state funded facilities would be to certified houses, and only certified recovery housing would be eligible to receive funding to deliver recovery-housing services.

Substitute A/2 eliminates the wording "Subject to appropriation", requiring the department to undertake certification even if no additional funding is provided.

16 S 2168 & H 7056 ACTS RELATING TO EDUCATION - SCHOOL COMMITTEES AND SUPERINTENDENTS

Sen .Pichardo & Rep. Diaz

This act would direct all school superintendents to review discipline data for their school district, to decide whether there is an unequal impact on students based on race, ethnicity, or disability status, and to respond to any disparity. Every school district would submit a report to the council on elementary and secondary education describing any action taken on the disparity. All such reports shall be public records. Also, student suspensions would not be served out of school unless the student's conduct meets certain standards or the student represents a demonstrable threat to students, teachers or administrators.

This act would take effect upon passage.

The Floor Amendment changes the annual reporting of disparities and the actions has been taken to address the disparity; to a report if a disparity exists describing the conduct of the student, the frequency of the conduct, prior disciplinary actions for the conduct, any other relevant information and corrective actions to address the disparity.

16 S 2460 AN ACT RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Sen. Miller

This act would require all health insurance providers that provide prescription coverage to provide coverage for opioid antagonists (overdose preventive medicine), and all devices and services related to the use thereof. This would apply to nonprofit hospital service corporations, nonprofit medical service corporations and health maintenance organizations.

This act would take effect on January 1, 2017.

The Substitute requires all health insurance providers that provide prescription coverage include coverage for generic opioid antagonists (overdose preventive medicine), and devices. It would permit prior authorization for non-generic forms of opioid antagonists and devices. This act would apply to nonprofit hospital service corporations, nonprofit medical service corporations and health maintenance organizations.

The Floor Amendment deletes "as permitted by Rhode Island Admin. Code 31-2-9"

Passed in Concurrence

Commission Supports as amended

16 S 2294 AN ACT RELATING TO INSURANCE -- DRUG COVERAGE

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

This act would require any health care insurance company to notify authorized prescribers, network pharmacies, and pharmacists at least sixty (60) days' prior to removing a prescription drug from its plan's formulary, or making any change in the preferred or tiered cost-sharing status of a covered prescription drug. Any health care insurer must provide direct written notice to affected subscribers at least sixty (60) days prior to the date the change becomes effective; or at the time an affected subscriber requests a refill of the prescription drug, provide such subscriber with a sixty (60) day supply of the prescription drug under the same terms as previously allowed, and written notice of the formulary change.

This act would take effect on January 1, 2017.

The Substitute requires accident and sickness insurers, nonprofit hospital, medical and dental service corporations and health maintenance organizations to give thirty (30) days' notice to authorized prescribers by established communication methods and by updating available references and web-based publications before making any change in preferred or tiered cost sharing status of a covered drug. Any drug deemed unsafe by those entities or by the Food and Drug Administration may be removed immediately without prior notice.

Legislation Committee finds these bills Beneficial if amended

16 S 2502 AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT - DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES

Sen. Miller

This act would require the DCYF to transition from child placement in group homes to child placement in foster care. It would also require the DCYF to submit to the house and senate finance committees, annual reports which would include such details as the number of children in foster care and those in group homes and the costs associated with those placements, as well as recommendations for placement and options to pay for certain services for children and families.

This act would take effect upon passage.

The Substitute strikes the words "and preferences" from line 16. The sentence now reads: "On or before October 1, 2016, the department of children, youth, and families shall recommend the allocation of existing resources as needed to ensure that those children in need of residential care, including foster homes and support services receive them in the least restrictive setting appropriate to their needs."

	<p>MOTION: To: recommend Sarah Everhart Skeels be appointed to the Governor's Workforce Board. Motion moved by LW, seconded by JR, passed abstained SES</p>
	<p><i>4:55 Agenda for the Next Meeting, Rosemary Carmody, Interim Chair</i></p> <p>Purpose/Goal: To set the agenda for the next meeting.</p> <p>Discussion: Executive Committee meeting are on the 3rd Mondays 4 - 5 PM: 08/29th (Annual Meeting Planning) and 12/05th (winter fellowship interviews).</p>
	<p><i>5:00 Adjournment, Rosemary Carmody, Interim Chair</i></p> <p>MOTION: To adjourn at 5:54 PM Motion moved by LW, seconded by JD, passed unanimously</p>