

A Celebration of Children's Health and Well-Being



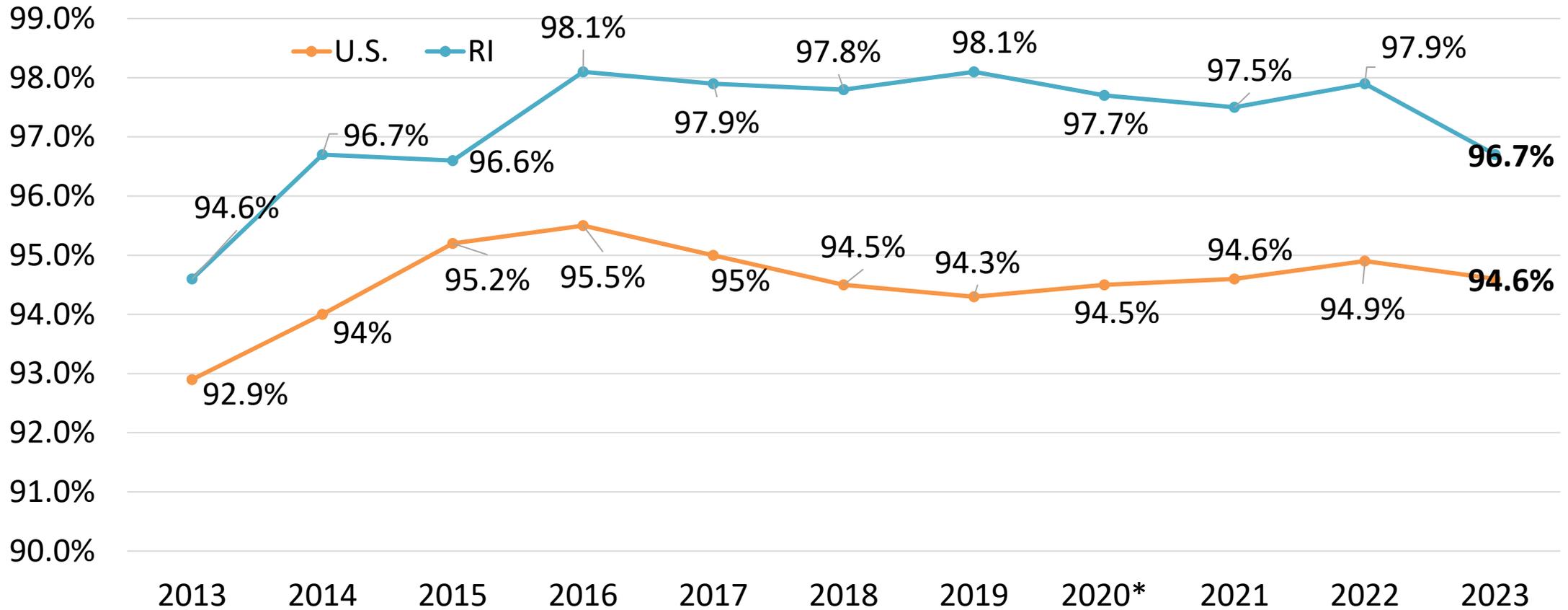
Rhode Island KIDS COUNT

December 2, 2024

#RItCareWorks



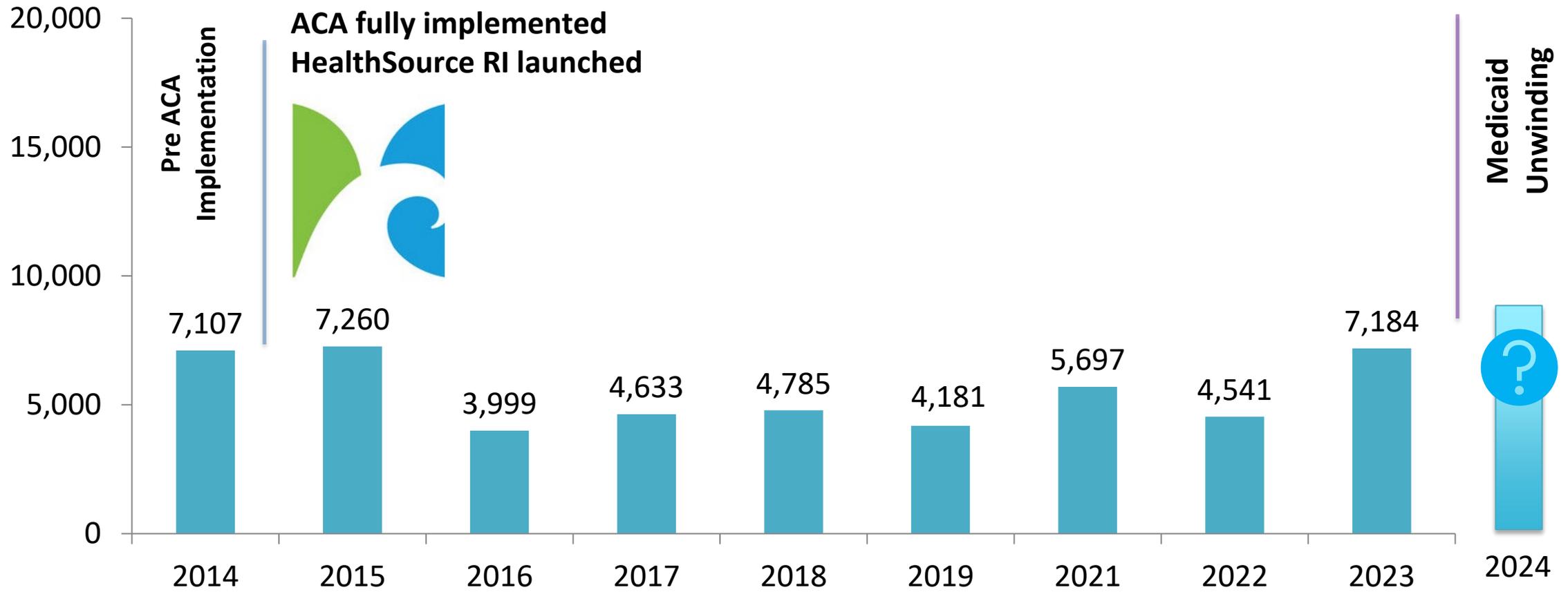
Children with Health Insurance



Source: U.S. Census Bureau, American Community Survey, 2013-2023. Table R2702.

*The U.S. Census Bureau urges caution when comparing 2020 experimental data to other years due to low response rate during the COVID-19 pandemic.

Number of RI Children Without Insurance



Cover All Kids

The FY 23 budget restored Rhode Island's policy of allowing all income-eligible children, regardless of immigration status, the ability to enroll in Rite Care.



Covered children can receive preventative medical care, including immunizations, regular developmental screenings, and treatment for childhood illnesses.



Potential for renewed fears of families regarding immigration crackdowns, resulting in fewer children covered.

Return to Normal: Medicaid Redeterminations

Children and families have been continuously enrolled in Medicaid since the beginning of the state of emergency (March 2020).

Starting in December 2023, 75,000 Rhode Island households with children began redeterminations.

A total of 11,649 Rhode Island children lost Medicaid during the renewal process, with almost three quarters (73%) losing coverage for procedural or administrative reasons.

Keeping Kids Covered in RI

✓ 12 Months of Continuous Coverage for Children started January 2024

Next Goal: Multi-Year Continuous Coverage

- Prevents harmful short- and long-term gaps in coverage
- Drives more efficient health care spending -- focused on prevention
- Improves health status and well-being
- Promotes health equity -- Children of Color are more likely to churn on and off
- Supports school readiness



AMERICAN ACADEMY OF PEDIATRICS RECOMMENDED CHECKUPS



1 MO
2 MO
4 MO
6 MO
9 MO
1 YR
15 MO
18 MO

2 YR

2 ½ YR

3 YR

4 YR

5 YR





Rite Care Works

- National model of comprehensive health care for 30 years
- Well-documented positive and sustained outcomes
- Cost-effective investment in RI children and families

Rite Care: High-Quality Care

Rite Care Health Plans Receive Top Ratings

Among Medicaid Health Plans in the U.S. in 2024

 <p>Neighborhood Health Plan OF RHODE ISLAND™</p>	4.5/5.0
 <p>UnitedHealthcare® Community Plan</p>	4.5/5.0
 <p>TUFTS Health Plan</p>	3.5/5.0

Source: 2024 National Committee on Quality Assurance Rankings. 290 Medicaid Health Plans were evaluated and 202 were rated based on clinical performance, member satisfaction, and NCQA Accreditation.

Rlte Care Works for Pregnant People

- **92%** of pregnant women enrolled in Rlte Care received timely prenatal care.
- **Rates of delayed prenatal care are lower** among women with Rlte Care coverage than those who are uninsured.

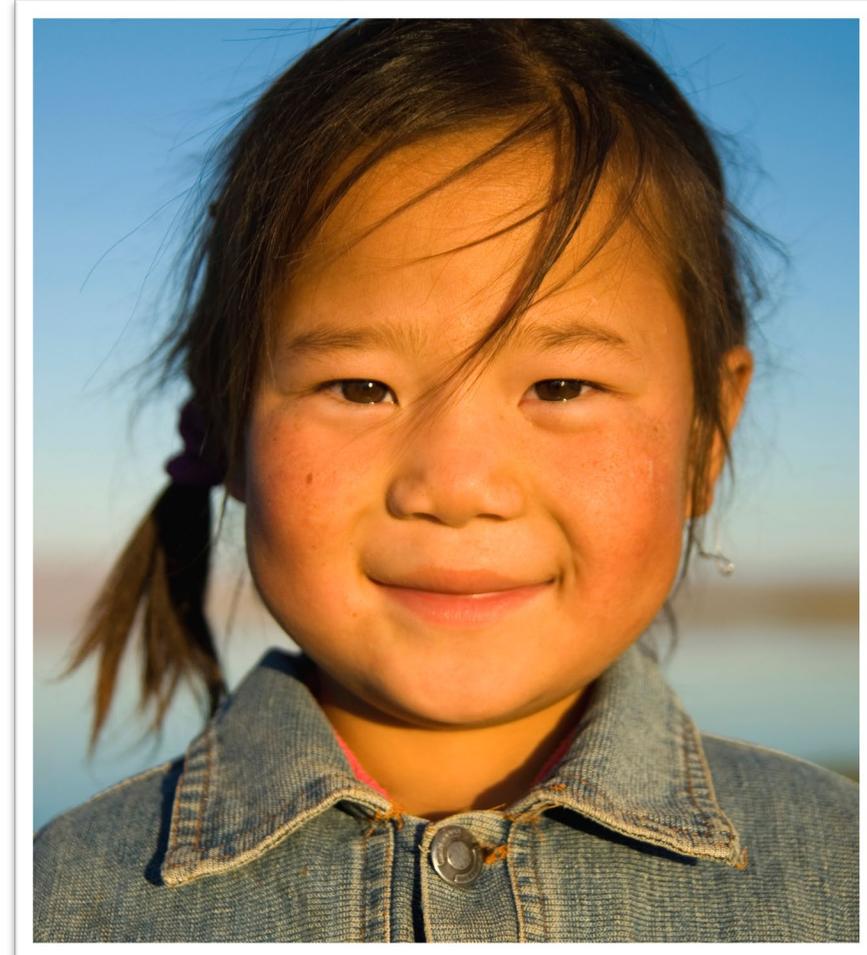


Source: 2023 Child Health Care Quality Measures. (2024). U.S. Department of Health and Human Services. Retrieved November 2024, from data.Medicaid.gov

Rite Care Works for Children

2023 Primary Care Visits

- **73.8%** of children ages 0-15 months
- **68.4%** of preschool and early elementary school-age children
- **63.0%** of all children ages 12-17



Source: *2023 Child Health Care Quality Measures*.(2024). U.S. Department of Health and Human Services. Retrieved November 2024, from data.Medicaid.gov

Rhode Island's Achievements in Children's Health



Adolescent HPV Vaccination (1st)

Child & Teen Deaths (T-1st)

Infant Mortality (4th)

Children's Health Insurance Coverage
(T-10th)

Rlte Smiles

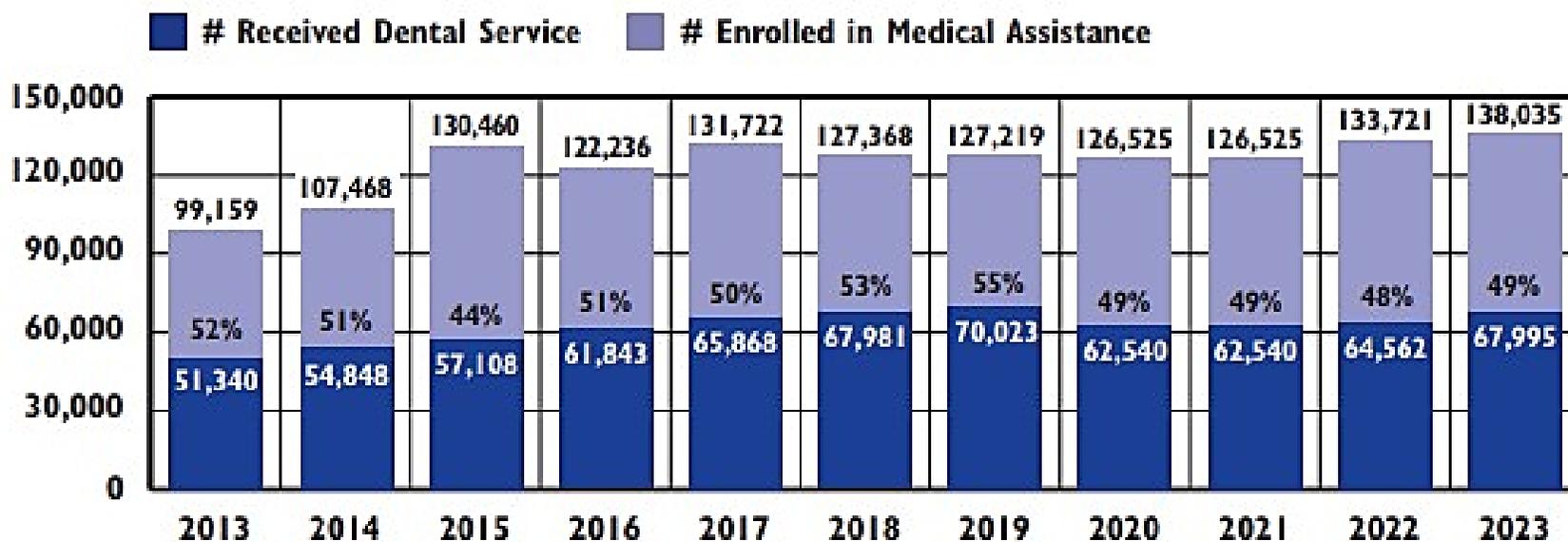
- The number of dentists accepting qualifying children on Medicaid increased from **27** before Rlte Smiles began to **182** one year into the Rlte Smiles program.
- **In FY 2023, there were 471 unduplicated dentists** participating in Rlte Smiles.



Children's Dental Care



Children Under 21 Enrolled in Medical Assistance* Programs Who Received Any Dental Service, Rhode Island, SFY 2013-2023

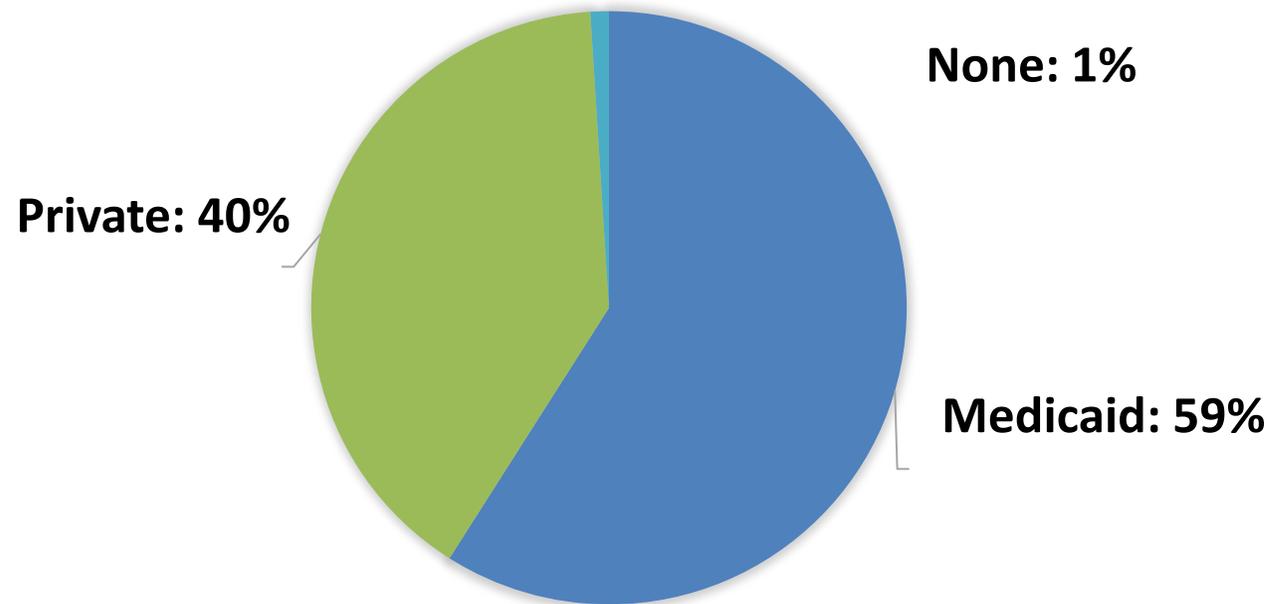


Source: Rhode Island Executive Office of Health and Human Services, State Fiscal Years (SFY) 2013-2023. *Medical Assistance includes RItE Care, RItE Share, and Medicaid fee-for-service.

- Forty-nine percent (67,997) of the children who were enrolled in RItE Care, RItE Share, or Medicaid fee-for-service on June 30, 2023 received a dental service during State Fiscal Year (SFY) 2023, a slight increase from last year.

Early Intervention

Health Insurance for Early Intervention Participants, Rhode Island, 2023

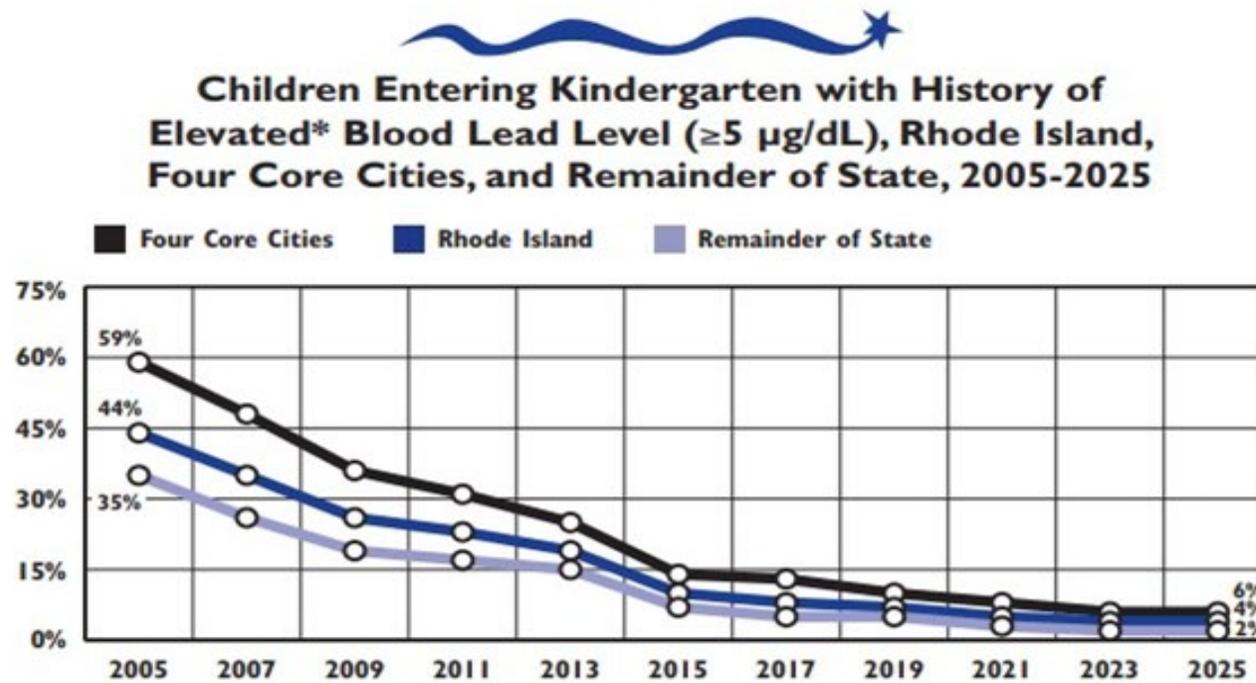


Source: Rhode Island KIDS COUNT analysis of EOHHS Children Enrolled in Early Intervention. June 2023

- In January 2024, 736 children had been waiting for more than 45 days since their referral. In October 2024, 342 children had been waiting for more than 45 days -- a 54% drop in the wait list!

Children with Lead Poisoning

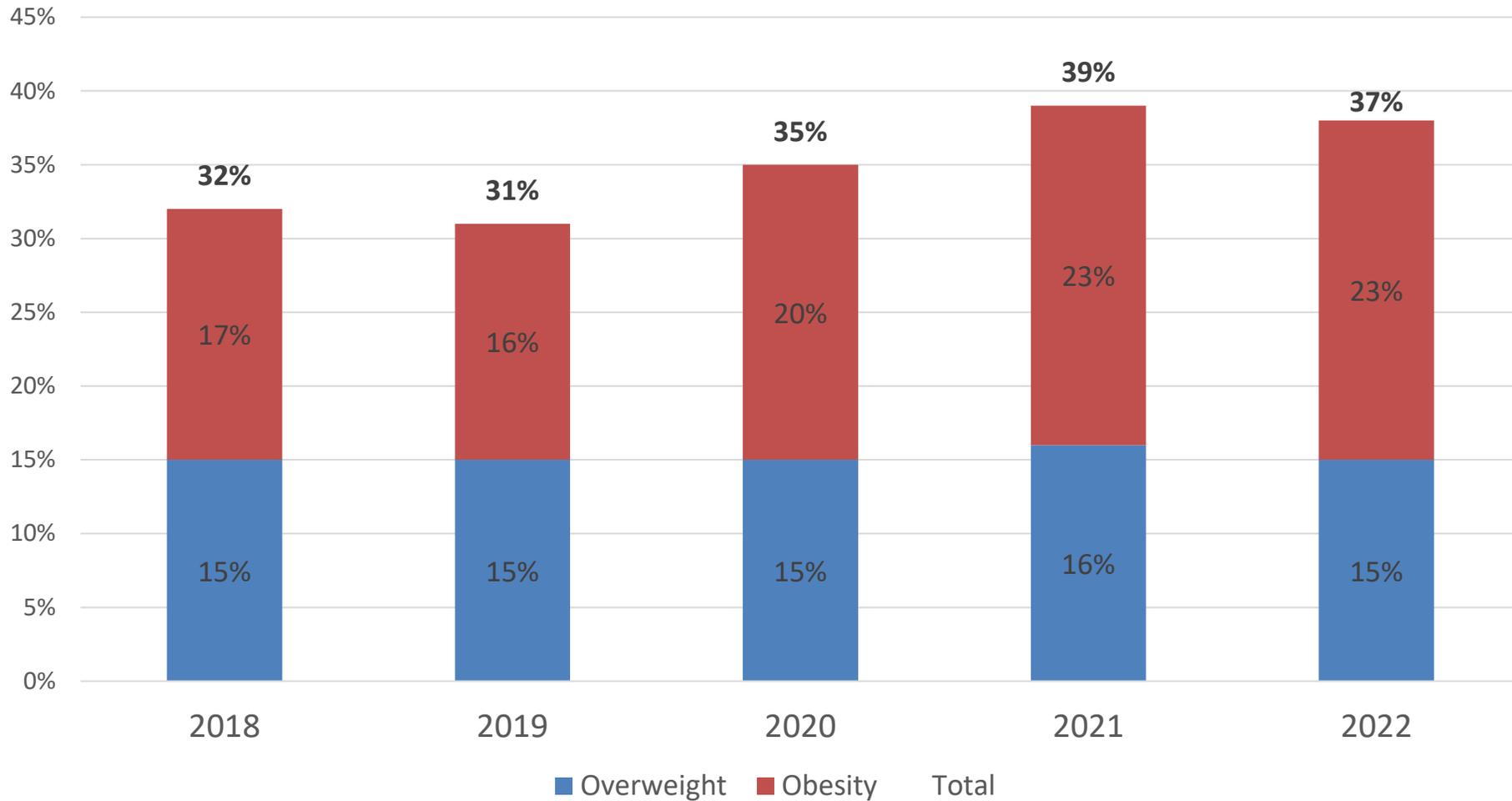
Children Entering Kindergarten with History of Elevated Blood Lead Level (>5 ug/dL)
Rhode Island, Four Core Cities, and Remainder of State, 2004- 2024



Source: Rhode Island Department of Health, Healthy Homes and Childhood Lead Poisoning Prevention Program, Children entering kindergarten between 2005 and 2025. *Elevated blood lead level of $\geq 5 \mu\text{g/dL}$.

- 2.4% (595) of the Rhode Island children entering kindergarten in the Fall of 2025 who were screened had confirmed elevated blood lead levels of $\geq 5 \mu\text{g/dL}$.

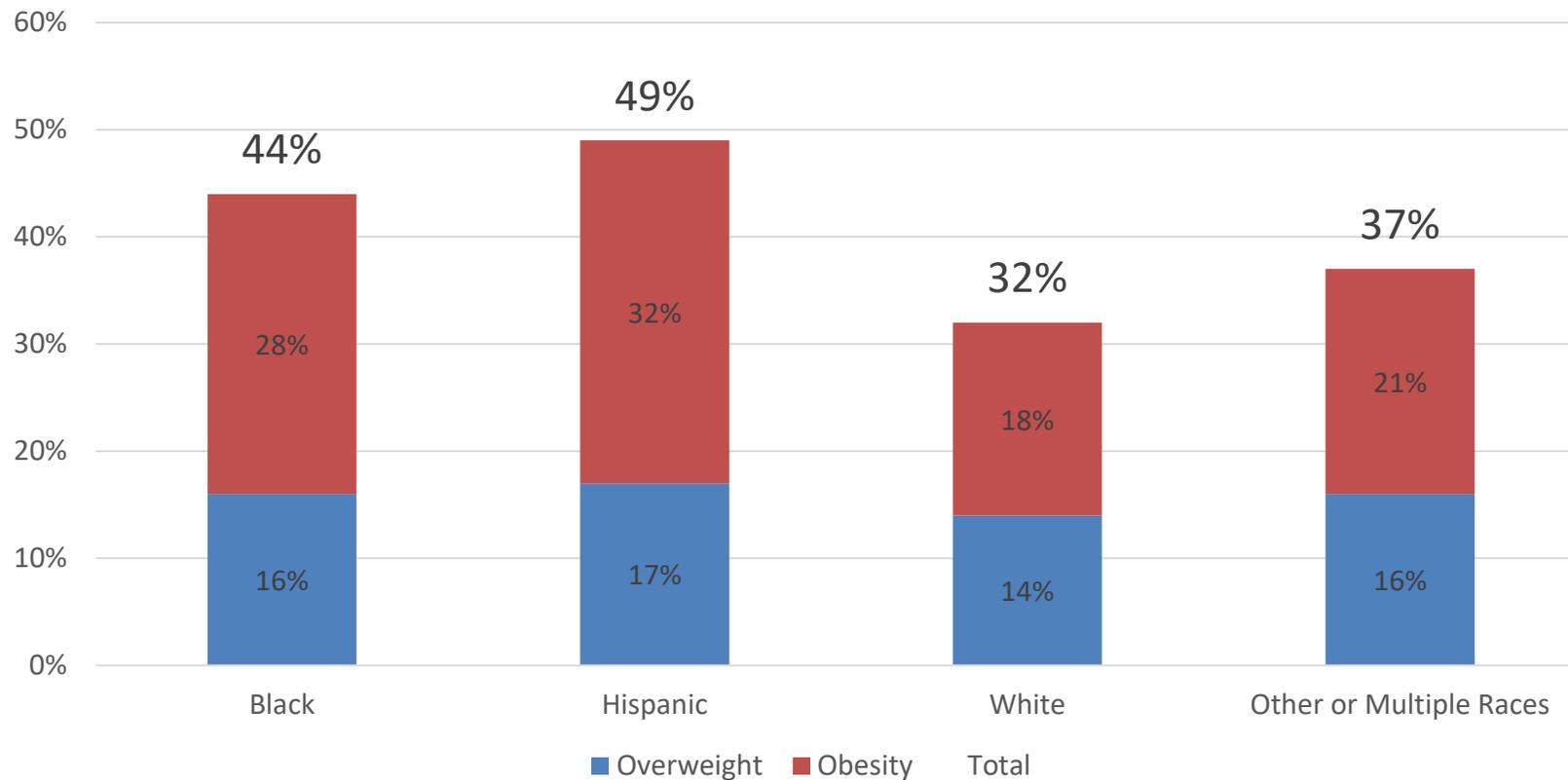
Childhood Overweight and Obesity



Source: Brown University School of Public Health analysis of 2018-2022 BMI clinical and billing records of children ages 2 to 17 in Rhode Island collected by the Department of Health. Some percentages may not total due to rounding.

Childhood Overweight and Obesity

Racial and Ethnic Disparities



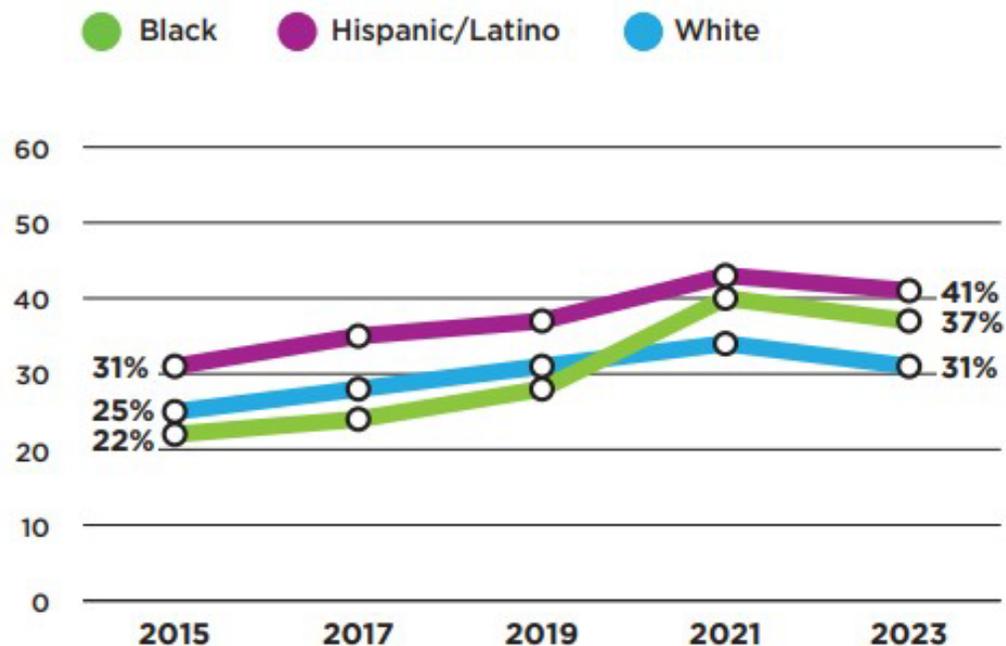
Source: Brown University School of Public Health analysis of 2022 BMI clinical and billing records of children ages 2 to 17 in Rhode Island collected by the Department of Health. Some percentages may not total due to rounding.

Children's Behavioral Health

- There has been a dramatic, continuing increase in the behavioral health needs of children and youth. The COVID-19 pandemic escalated and furthered this crisis.
- Progress includes
 - *Implementation & continued funding of Mobile Response Stabilization Services*
 - *Medicaid reimbursement for school-based mental health services*
 - *Eight Certified Community Behavioral Health Clinics across the state*
 - *Extension of RI MomsPRN and PediPRN*

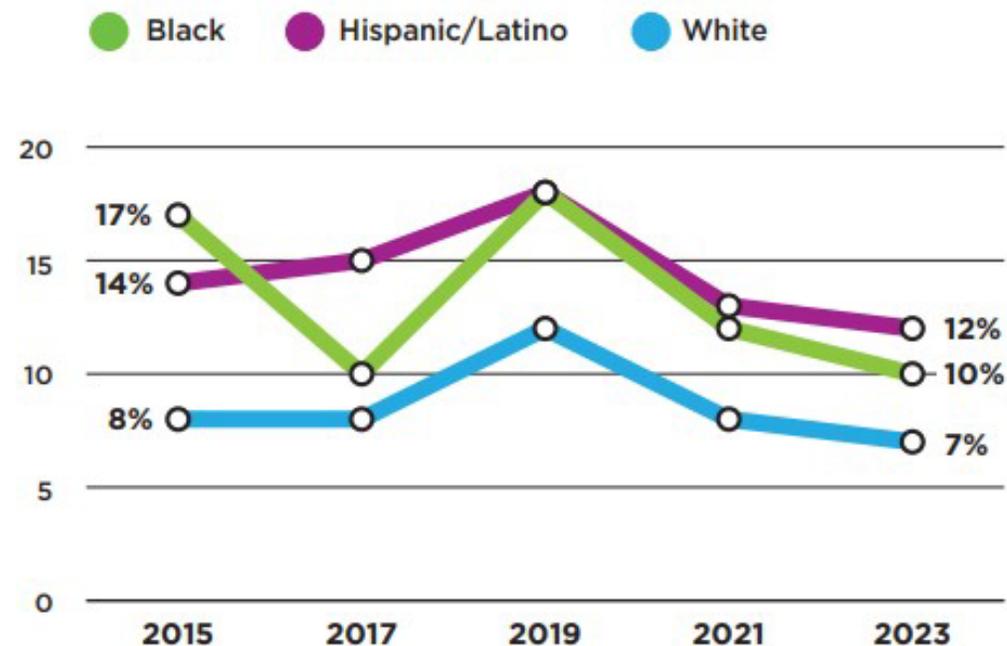
Suicidality Among Rhode Island High School Students, 2015-2023

FEELINGS OF SADNESS OR HOPELESSNESS AMONG HIGH SCHOOL STUDENTS, RHODE ISLAND, BY RACE AND ETHNICITY, 2015-2023



Source: Rhode Island Youth Risk Behavior Survey, 2015-2023.

SUICIDE ATTEMPTS AMONG HIGH SCHOOL STUDENTS, RHODE ISLAND, BY RACE AND ETHNICITY, 2015-2023



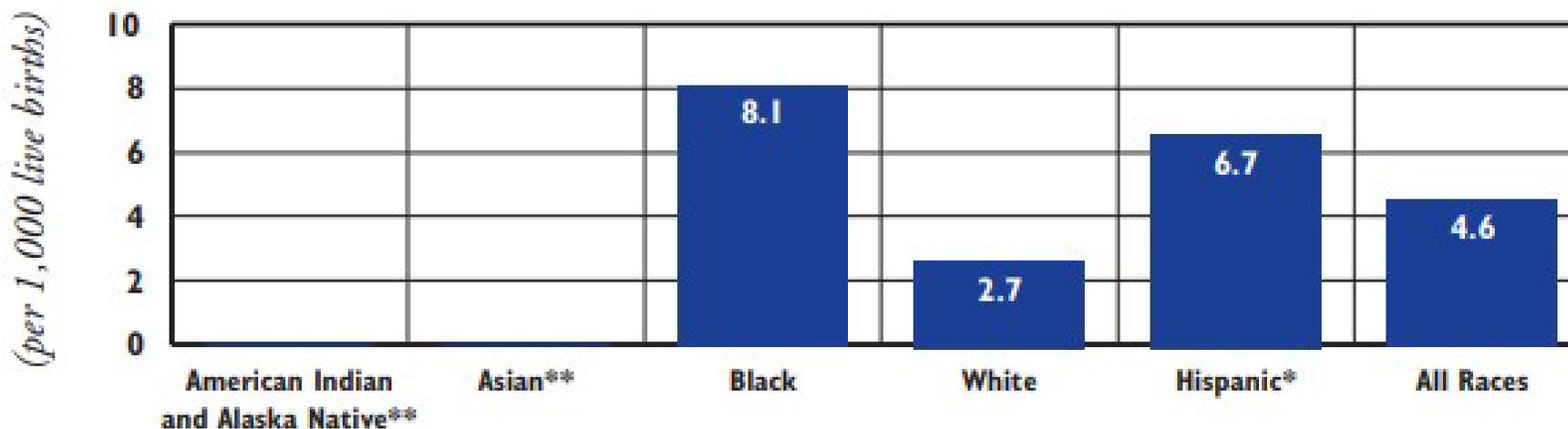
Source: Rhode Island Youth Risk Behavior Survey, 2015-2023.

Health Outcomes, by Race and Ethnicity, Rhode Island

	ALL RACES	AMERICAN INDIAN/ ALASKA NATIVE	ASIAN	BLACK	HISPANIC	NATIVE HAWAIIAN/ OTHER PACIFIC ISLANDER	WHITE
Children Without Health Insurance	2.1%	NA	8.1%	4.0%	2.4%	NA	0.8%
Women with Delayed or No Prenatal Care	15.8%	26.0%	16.3%	21.7%	18.2%	*	12.9%
Low Birthweight Infants	7.7%	8.5%	8.9%	11.4%	8.3%	*	6.6%
Infant Mortality (per 1,000 live births)	4.6	*	*	8.1	6.7	0.0	2.7
Any Infant Breastfeeding	76%	65%	82%	69%	70%	73%	79%
Combined Overweight and Obesity	37%	NA	NA	44%	49%	NA	32%

Racial and Ethnic Disparities in Infant Mortality

Infant Mortality Rate per 1,000 Live Births by Race/Ethnicity,
Rhode Island, 2018-2022



Source: Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2018-2022 *Hispanic infants can be of any race. **Rate or percentage is too unstable to report.

- Between 2018 and 2022, the Rhode Island infant mortality rate was 4.6 per 1,000 births.
- The Black infant mortality rate is the highest of any racial or ethnic group even after controlling for risk factors such as socioeconomic status and educational attainment. Structural racism as well as exposure to discrimination and racialized stress negatively impact birth outcomes for Black women and their babies.

Racial and Ethnic Disparities in Maternal Mortality and Morbidity

Nationally, Black women are over 2.5 times more likely than white women to die of pregnancy-related complications.

In 2022, the Rhode Island severe maternal morbidity rate was 86.5 per 10,000 hospital deliveries.

Black (124 per 10,000) and Hispanic (106 per 10,000) women had higher rates of maternal morbidity than white women (73 per 10,000) between 2018 and 2022.

Perinatal Doula Services are now eligible for reimbursement through both Medicaid and private insurance and is an important strategy for addressing the Black maternal morbidity and mortality crisis. Another strategy is to improve the capacity of our provider workforce- particularly midwives.

Root Causes of Disparities in Maternal and Infant Health: A Legacy That Continues to Harm Rhode Island's Children and Families

Health care only accounts for 10-20% of an individual's overall health outcomes and is just one of the social determinants of health, which is defined as the conditions and environments where people are born, live, learn, work, and play that greatly impact health outcomes.¹⁵ These social determinants of health, including economic stability, education access, neighborhood and the built environment, and social context account for over 80% of health outcomes.¹⁶ Disparities in social determinants of health can be traced back to the founding of the United States and continue to impact the longstanding racial and ethnic disparities in health, including maternal and infant health.¹⁷ Removal of Native Americans from their lands and use of Africans as enslaved labor prevented the country's first People of Color from fully participating in the economy while simultaneously building wealth for the country and its white citizens. Racism became an economic tool infused into laws, policies, and practices that have harmed Asian, Black, Latinx, Native American and low-income white people for centuries.^{18,19,20} Unequal access to economic opportunities, stability, and growth impacts educational access, environmental conditions and well-being.

Importance of Economic Security

- **Children in poverty, especially those who experience poverty in early childhood and for extended periods**, are more likely to have physical and behavioral health problems, experience hunger, difficulty in school, become teen parents, and earn less or be unemployed as adults.
- People with low incomes are the most likely to be uninsured; some cannot afford the cost, some do not have access to coverage through their employers, and others do not have access to employer-based coverage due to job loss.

Importance of Healthy Housing and Community

- **Healthy housing (homes that are safe, affordable, well-maintained and stable)** supports the well-being and health of children and families and protects them from environmental hazards and injury while unsafe housing can intensify these conditions.
- There are disparities in the resources available in different Rhode Island communities and neighborhoods. Each of these factors in a family's environment can impact their health and well-being. The inequities in these factors (**green space, air pollution, noise pollution, and safety**) stem from historical policies (e.g., redlining and urban planning policies)

Importance of Safety and Gun Violence

In Rhode Island between 2018 and 2022, there were:

- **147 emergency department** visits among children and youth attributed to firearms
- **17 hospitalizations** among children and youth attributed to firearms
- **11 deaths** of children and youth attributed to firearms

2021 was the deadliest year for gun violence in U.S. history, and firearm related injuries remain **the leading cause of death in the U.S. among children and youth ages one to 19**, surpassing motor vehicle deaths.

Importance of Early Childhood

- **Insurance coverage through infancy and early childhood** sets children up for success, allowing them to receive their routine screenings and immunizations.
- **Affordable, high quality child care** helps families achieve economic security and promotes child and family well-being.
- Early intervention and early learning **support our youngest children and their families** to succeed.
- **Promoting mental health** in very young children ensures they can learn, develop, and thrive, socially and academically.

Moving Forward

Close racial/ethnic disparities across health indicators with a focus on **Black maternal and infant morbidity/mortality**

Support policies and implementation of a comprehensive system to **address the children's mental health crisis**

Invest in social drivers that **impact** children's well-being (affordable and safe housing, safe communities, education, and more)

Invest in a **culturally competent and diverse workforce**

Ensure that families have access to a range of birth and perinatal care options **to meet their needs**

Support **our youngest population (Birth-5)** during critical time of development to have the **Right Start**

Policy Priorities

Health

- **Expand families' birth options and improve birth outcomes:** Expand Medicaid coverage of Certified Professional Midwives (CPMs) and Licensed Midwives (LMs) and provide with limited prescriptive authority to appropriately care for birthing families

Child Welfare and Juvenile Justice

- **Protect Children's Rights:** Prohibit the questioning of a juvenile suspected of delinquent or criminal behavior unless the parent or guardian is present
- **Developmentally Appropriate Justice:** Establish a minimum age of incarceration
- **Community Alternatives to Formal Court Hearings:** Increase access to Juvenile Hearing Boards

Policy Priorities

Education

- **Student Voice:** Make the student representative on the Council on Elementary and Secondary Education a voting member

**In Coordination with the Anti-Racist Education Policy Collaborative*

- **Address Children's Mental Health Crisis:** Provide dedicated funding to schools to hire and retain school social workers

**In Coordination with the RI Afterschool Network*

- **Out-of-School Time:** Increase access to affordable high-quality Out-Of-School Time programs that give youth the skills they need to succeed in the workforce.

Policy Priorities

Economic Well-Being

**In Coordination with the Raising RI Coalition*

- **End Deep Child Poverty:** Improve the RI Works Program by updating the cash assistance benefit annually to ensure children do not live in deep poverty, increasing child support pass through, and restoring eligibility to legal permanent residents
- **Interrupt Cycle of Poverty:** Establish baby bonds for RI Works newborns

Policy Priorities

Early Childhood Development*

**In Coordination with the Right from the Start Campaign*

-  **Adopt Continuous Medicaid Coverage for Infants and Toddlers Under Age 3:** Ensure infants and toddlers have access to appropriate medical care and screenings
-  **Stabilize and Expand Access to Affordable, Quality Child Care:** Remove the child support enforcement requirement; make the Child Care for Child Care Educators Program permanent and remove the household income limit; continue the Child Care Wage\$ pilot program in Rhode Island; update provider rates for all ages of children receiving child care assistance; join 16 states that meet or exceed the federal standard for family income eligibility for CCAP; enact the **revenue for Rhode Islanders** fair tax strategy; close the wage gap for RI Pre-K and Head Start

Policy Priorities

Early Childhood Development*

**In Coordination with the Right from the Start Campaign*

-  **Improve Paid Family Leave:** Increase the wage replacement level and length of paid family leave to the 12-week minimum benchmark
-  **Ensure Young Children Have Access to Pediatric Care:** Provide a pediatric Medicaid rate increase
-  **Improve the Economic Security of Families with Young Children:** Increase Rhode Island's refundable Earned Income Tax Credit; support Federal efforts to expand the Child Tax Credit and make it fully refundable

Policy Priorities

Early Childhood Development*

**In Coordination with the Right from the Start Campaign*

-  **Fix Early Childhood Special Education Systems:** Add Early Intervention staff to the Child Care for Child Care Educators program to recruit and retain qualified Early Intervention staff; create and fund a community-led task force to develop a comprehensive plan to provide all children birth-age 4 with high quality early childhood IDEA services
-  **Invest in Maternal, Infant, and Early Childhood Mental Health:** Permanently fund MomsPRN and PediPRN; develop and fund an infant early childhood mental health professional hub

Policy Priorities

Early Childhood Development*

**In Coordination with the Right from the Start Campaign*

-  **Fund Family Home Visiting:** Re-examine Medicaid fee-for-service strategy recently adopted to fund family home visiting programs; meet federal match requirements for general revenue spending on evidence-based family home visiting
-  **Raise more state general revenues** to fund early childhood programs

Policy Supports

Rhode Island KIDS COUNT also strongly supports:

- Create a **dual language program fund** to be administered by RIDE
- Provide financial incentives, such as loan forgiveness and scholarships to support strategies to **increase the number of Educators of Color**
- Provide funding to sustain **Mobile Response Stabilization Services**
- Increase funding for the **higher education incentive grant**
- Extend the **Foster Care Youth Scholarship** pilot program at Rhode Island College.
- Establish a public-private working group to **redesign a full continuum of mental and behavioral health services** for children
- **Healthy School Meals for All**

Policy Supports

Rhode Island KIDS COUNT also strongly supports:

- **Commonsense gun safety laws**
- **Amend the Rhode Island Constitution** so all Rhode Islanders must be provided with an education that is adequate and so this right is judicially enforceable.
- **Eliminate payday lending**
- Expand the use of **Equity Impact Statements** in budget and legislative proposals
- Expand the supply of **safe, healthy, and affordable homes**
- Eliminate barriers to voter participation by allowing **same-day voting**

Rhode Island KIDS COUNT
One Union Station
Providence, RI 02903
(401) 351-9400
www.rikidscount.org

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#RItCareWorks

