

RULES AND REGULATIONS
PERTAINING TO THE
COMPREHENSIVE FAMILY LIFE PROGRAM
(R23-13-FAMLIF)

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

DEPARTMENT OF HEALTH

JULY 1990

As Amended:

**January 2002 (re-filing in
accordance with the provisions of
section 42-35-4.1 of the Rhode
Island General Laws, as amended)**

INTRODUCTION

These Rules and Regulations Pertaining to the Family Life Program are promulgated pursuant to the authority conferred under Section 23-13-21 of the General Laws of Rhode Island, as amended, and are established for the purpose of adopting requirements for the implementation of the Family Life Program. The program is designed to provide comprehensive services, including patient education, medical services, and access to safe and effective methods of contraception to Rhode Island citizens who have no health insurance and whose family income is between 100 and 185 per cent of the federal poverty level.

Pursuant to the provisions of Chapter 42-35-(c) of the General Laws, consideration was given to: (1) alternative approach to the regulations; (2) significant economic impact on small business as defined in Chapter 42-35 of the General Laws which may result from the proposed regulations. No alternative approach, duplication, overlap or economic impact was identified based on information available.

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PART I **DEFINITIONS**

Section 1.0 **Definitions**

Wherever used in these rules and regulations, the following terms shall be construed as follows:

- 1.1 "**Act**" refers to Chapter 23-13 of the General Laws of Rhode Island, as amended, entitled "Maternal and Child Health/Crippled Children's Services".
- 1.2 "**Director**" refers to the Director of the Rhode Island Department of Health.
- 1.3 "**Covered Services**" refers to the services provided through the Family Life Program pursuant to statutory provisions of the Act and the Family Life Program Guidelines of the Rhode Island Department of Health.
- 1.4 "**Family Life Program**" refers to educational, counseling, and comprehensive medical and contraceptive services provided pursuant to section 23-13-21 of the Act and designed in accordance with the statutory and regulatory provisions herein, and the Family Life Program Guidelines of the Rhode Island Department of Health.
- 1.5 "**Provider**" refers to those persons participating in the Family Life Program for the provision of covered services.
- 1.6 "**Person**" means an individual, trust or estate, partnership, corporation (including associations, joint stock companies) state or political subdivision or instrumentation of a state.
- 1.7 "**Income**" means the gross annual income of the applicant, and of the applicant's spouse provided they are married and living in the same household.

PART II *GENERAL REQUIREMENTS AND ADMINISTRATIVE PROCEDURES*

Section 2.0 *General Requirements*

2.1 *Recipients of Services:*

2.1.2 In order for a person to participate as a recipient of services under the Family Life Program, he/she must meet the following eligibility criteria:

- a) Be a Rhode Island Resident;
- b) Not eligible for Medicaid;
- c) Be uninsured for services provided;
- d) Have a family income between 100% and 185% of the federal poverty Index (as published in the Federal Register); and
- e) meet other such eligibility criteria as set forth in the Family Life Program Guidelines of the Rhode Island Department of Health.

2.2 *Provider of Services:*

2.2.2 In order to participate in the Family Life Program, a provider must meet the following eligibility criteria:

- a) be located in the state of Rhode Island
- b) be in compliance with the Family Life Program Guidelines; and
- c) provide comprehensive family planning and sex education services as described in Section 3.1 of these regulations.
- d) agree to on-site assessments as described in Section 4.2 of these regulations.
- e) enter into provider agreements, as described in Section 4.0 of these regulations.

Section 3.0 *Provider Requirements:*

3.1 *Basic Services:*

Family Life Program providers are required to adopt policies and procedures which assure the delivery of coordinated, interdisciplinary and comprehensive care in accordance with Rhode Island Department of Health Comprehensive Family Planning Program Guidelines.

3.1.1 The service provider must directly provide medical, social, educational and counseling services; and

3.1.2 The service provider must assure referral and follow-up for services not provided by the

project.

3.1.3 Services provided:

- a) Patient education and counseling on options for timing and spacing pregnancy.
- b) Comprehensive medical services to prevent and control the spread of sexually transmitted diseases.
- c) Access to safe and effective methods of contraception.

3.1.4 Excluded services will include, but not be limited to elective abortion, elective hysterectomy, Level II and Level III infertility related services, and other non-family planning procedures or services.

3.1.5 The "Service Provider" shall make an initial determination, as to the eligibility of the client.

3.2 ***Accessibility of Services***

3.2.1 Family planning providers must plan and conduct community outreach activities to encourage all individuals to seek family planning services and to increase community awareness of the availability of such services. The provider is responsible for assuring that appropriate community organizations, social service agencies, and other health care providers are aware of and actively refer appropriate patients for family planning services.

3.3 ***Comprehensive Initial Family Planning Visit***

3.3.1 If a determination is made that a client is eligible for Family Life Services, that is, he/she fits all the criteria under eligibility, the initial visit should be completed as soon as possible.

The comprehensive initial family planning visit must include at a minimum the following services as detailed in the Comprehensive Family Planning Guidelines:

- a. Complete history;
- b. Patient education/counseling
- c. Physical examination;
- d. Laboratory studies;
- e. Provision of an appropriate family planning method; and
- f. Appropriate referral and follow-up.

Section 4.0 ***Provider Agreements:***

4.1 Upon approval of the application of a Provider for Family Life Program Services, said provider must enter into a written agreement with the Director in order to be reimbursed for covered services under the Family Life Program. The terms of such agreement shall include, but not be limited to:

- a) the designation of service(s) to be provided to clients in accordance with Program guidelines.
- b) the responsibility of the Family Life Services provider to deliver services in accordance with prevailing standards of practice.
- c) assurance of compliance with the policies of the Rhode Island Department of Health and Family Life Program guidelines.
- d) provisions for monitoring of services rendered to clients;
- e) provisions for the review of clinical progress notes of services and care rendered to clients;
- f) assurance that personnel and services meet the standards and qualifications as set forth in the Family Life Program Guidelines of the Rhode Island Department of Health;
- g) assurance of referral and follow-up services and coordination of information;
- h) provisions pertaining to assurance of no balance billing for covered services in accordance with section 5.0 herein, and assurance that the payment of the Rhode Island Department of Health Family Life Program represents full and total payment for covered services; and
- i) such other provisions as may be mutually agreed upon by parties involved.
- j) for each client served, the service provider must complete a Clinic Visit Record (CVR), and submit this information for data processing according to the Guidelines for the Family Life Program, issued by the Rhode island Department of Health.

4.2 ***Approval of Providers***

4.2.1 Family Life Providers - The Rhode Island Department of Health, Division of Family Health will conduct on-site administrative, fiscal and clinical evaluations of all providers participating in the Family Life Program. All service providers will be approved for one year of State funding, unless approval is sooner revoked or suspended, and will be eligible to receive reimbursement for services in accordance with these guidelines.

4.2.1 Every provider shall be given notice by the Director or his designee of all the results of an on-site assessment.

Section 5.0 ***Reimbursement of Services***

5.1 The Rhode Island Department of Health, Family Life Program shall reimburse those covered services rendered by providers to eligible recipients of the Family Life Program. Authorized services shall be reimbursed in accordance with the policies and procedures established by the Director.

5.1.1 Payment by the Rhode Island Department of Health Family Life Program shall represent full and total payment for covered services for persons eligible for the program and consistent with the reimbursement policies of the Family Life Program.

- 5.1.2 Uninsured clients of the Program whose documented income is between 100% and 185% poverty are not to be billed for mandated and clinically indicated services. However, services not mandated or clinically indicated may be billed to the client on a sliding fee schedule based on actual cost.
- 5.1.3 Services which may be offset by patient sliding fee schedule may include, but are not limited to:
- a. G.C. Culture for asymptomatic individuals unless clinic prevalence >4%;
 - b. Serology;
 - c. Rubella titre and immunization;
 - d. Pregnancy testing;
 - e. Other screening services as requested (e.g., chlamydia screening, cholesterol screening, etc.); and
 - f. HIV testing and post-test counseling, if no signs or symptoms of HIV infection.

5.2 *AIDS Counseling and Testing*

The primary purpose of offering counseling and HIV antibody testing is to prevent the spread of the virus that causes AIDS, by explaining the meaning and usefulness of HIV antibody test.

Formal risk assessment, HIV testing and counseling shall be offered as required by State and Federal mandate.

PART III ***DENIAL OR TERMINATION OF SERVICES, PRACTICES AND PROCEDURES AND SEVERABILITY***

Section 6.0 ***Denial or Termination of Services***

- 6.1 The Director of Health is authorized to deny participation of a recipient and/or provider, to terminate client and/or provider of services or deny payment for a service for the following reasons:
- (1) failure of the applicant to meet the eligibility requirements of the Family Life Program.
 - (2) failure of the provider to comply with the terms of the agreement;
 - (3) failure to comply with the statutory and regulatory provisions herein; and
 - (4) failure to comply with Family Life Program guidelines.
- 6.2 A proposal to deny, terminate services, or an agreement shall be as follows:
- 6.2.1 Whenever an action shall be proposed to deny eligibility, services, terminate services or an agreement with an applicant or provider, the Director or designee shall notify the applicant or provider in writing, setting forth the reasons for the proposed action, and the provider or applicant shall be given an opportunity for a prompt and fair hearing in accordance with section 42-35-9 of the General Laws of Rhode Island.
- 6.2.2 If the Director, however, finds that public health, safety or welfare of clients requires emergency action and incorporates a finding to that effect in its order, the Director may order summary termination pending proceedings for termination of agreement or services in accordance with sections 42-35-14(c) 23-1-21 of the General Laws of Rhode Island, 1956, as amended.

Section 7.0 ***Rules Governing Practices and Procedures***

- 7.1 All hearings and reviews required under the provisions of Chapter 23-13 of the General Laws, 1956, as amended, shall be held in accordance with the provisions of the Rules and Regulations promulgated by the Rhode Island Department of Health entitled, "Rules and Regulations Governing the Practices and Procedures before the Rhode Island Department of Health".

Section 8.0 ***Severability***

- 8.1 If any provisions of these regulations or the application thereof to any provider or client - shall be held invalid, such invalidity shall not affect the provisions or application of the regulations which can be given effect, and to this end the provisions of the regulations are declared severable.