

CONCISE EXPLANATORY STATEMENT

In accordance with the Administrative Procedures Act, R.I. Gen. Laws § 42-35-2.6, the following is a concise explanatory statement:

AGENCY: Executive Office of Health and Human Services

DIVISION: Medicaid

RULE IDENTIFIER: 210-RICR-10-00-3

RULE TITLE: Medicaid and Children's Health Insurance Program (CHIP) Non-Financial General Eligibility Requirements

REASON FOR RULEMAKING: This amendment makes changes to the citizenship and immigration status requirements included in state Medicaid regulations to align with new federal limitations, established in Section 71109 of House Resolution 1 (H.R.1), Pub. L. No. 119-21, codified at 42 U.S.C. § 1396b(v)(5). The new federal restrictions took effect nationwide on October 1, 2026. This amendment also makes technical edits and organizational changes to improve clarity.

ANY FINDING REQUIRED BY LAW AS A PREREQUISITE TO THE EFFECTIVENESS OF THE RULE: N/A

TESTIMONY AND COMMENTS: EOHHS received one comment on the proposed rule. EOHHS did not make changes in response to this comment. The comment and EOHHS response are detailed below.

Comment #1:

**Mark Adelman, Esq., Director, Public Policy and Federal Advocacy
Government Relations, Brown University Health
Submitted on September 21, 2026, and September 23, 2026**

- **Public Comment:** *Given that the federal funding restriction takes effect October 1, 2026, but comments on the proposed rule remain open until October 17, when will the new eligibility restrictions actually be applied to current beneficiaries and new applicants? Specifically, will current beneficiaries retain full Medicaid coverage until the rule is finalized and they receive any required individual notice?*

- **EOHHS Response:** The new federal restrictions took effect nationwide on October 1, 2026. Current beneficiaries impacted by the new federal restrictions received multiple advance notices from their HealthyRhode account or by mail between July and October 2026. Individuals determined to be ineligible due to their immigration status received a Benefits Decision Notice informing them of their coverage termination, which was effective October 1, 2026. EOHHS also provided information about the changes on its website and encouraged partners and providers to share information about the new federal restrictions prior to implementation.
- **Public Comment:** *How will services provided between October 1 and the date an individual's full Medicaid coverage is formally terminated be reimbursed? Will EOHHS confirm that providers will be paid for services rendered while the individual remains enrolled and that neither EOHHS nor Medicaid managed care organizations will subsequently recoup those payments based on the October 1 federal effective date?*
 - **EOHHS Response:** As noted above, the new federal restrictions were implemented nationwide on October 1, 2026. Coverage for individuals who do not meet the new federal restrictions was terminated effective October 1, 2026.
- **Public Comment:** *Our understanding is if someone is seen in the [emergency department] for an emergency that will be covered. Is this correct? How do they determine if it is an emergency by location (care took place in the emergency room) or by diagnosis code? As you know, often patients will go to the [emergency department] feeling they have an emergency but will have a diagnosis that doesn't support an emergency.*
 - **EOHHS Response:** As stated in Section 3.7(F) of the proposed and final rule, under federal law, Emergency Medicaid is provided to individuals who meet all criteria for Medicaid coverage except for citizenship and immigration status. Individuals who no longer qualify for Medicaid based on their citizenship or immigration status may be eligible for Emergency Medicaid, provided they meet all other Medicaid eligibility factors and meet the specific criteria for Emergency Medicaid. An emergency department visit alone is not sufficient to qualify for Emergency Medicaid. Documentation of an emergency medical condition is required.

CHANGE TO TEXT OF THE RULE: EOHHS made one change in the text of the final rule. EOHHS corrected the Subchapter title, which in the proposed rule was “N/A.” The final rule uses the correct Subchapter title for this Part, which is “General Provisions.”

REGULATORY ANALYSIS: This update is required to align with new federal limitations. Other technical revisions are expected to clarify current practice. In the development of this proposed adoption, consideration was given to: (1) alternative approaches; (2) overlap or duplication with other statutory and regulatory provisions; and (3) significant economic impact on small business. No alternative approach, duplication, or overlap was identified based upon available information. For full regulatory analysis or supporting documentation contact the agency staffperson listed above