



African American Innovation

RE: Statement on Proposed Medicaid Changes to CHW Reimbursement and the Impact on Justice-Involved CHWs

To Whom It May Concern,

BLM RI African American Innovation, stands in strong opposition to Medicaid reimbursement changes that would unjustly harm Community Health Workers (CHWs) with CORI (Criminal Offender Record Information) histories. These proposed changes, while perhaps rooted in the intent to strengthen oversight, risk deepening structural inequities and dismantling hard-won progress made by formerly incarcerated individuals who have reclaimed their place as trusted leaders in their communities.

CHWs with CORI backgrounds are often uniquely qualified to serve vulnerable populations, particularly in communities most affected by poverty, incarceration, addiction, and systemic racism. Through lived experience, rehabilitation, and service, these individuals have not only transformed their own lives, they have become pillars of community healing, outreach, and empowerment.

The current proposals to limit or restrict Medicaid reimbursement based on CORI status undermine:

- **Workforce equity** by penalizing CHWs who have already overcome barriers to employment.
- **Community trust** by displacing workers who reflect the lived realities of the populations they serve.
- **Health equity** by removing frontline advocates who connect marginalized individuals to life-saving care and services.

We must not allow bureaucratic policies to erase the human stories of redemption, resilience, and social contribution. Many CORI-affected CHWs employed through programs like CORE, Community Health Network have demonstrated accountability, compassion, and professionalism. Their work should be recognized, not discarded.

We call on state and federal Medicaid policymakers to:

- **Protect the employment and reimbursement eligibility of CHWs with CORI histories** who have met training and performance standards.
- **Ensure all CHW oversight reforms include an equity and racial justice lens**, particularly in screening and employment policy.
- **Invest in second-chance workforce development** by supporting CHW employers who provide opportunities to justice-involved individuals.

It is both unjust and counterproductive to penalize CHWs for past convictions when their present work is rooted in healing, prevention, and justice. Any effort to increase oversight must be paired with protections that prevent the exclusion of competent and committed individuals who have earned their role in society.

We urge Medicaid administrators and policymakers to listen to these voices and preserve the integrity of a CHW workforce that reflects the full spectrum of our communities.

In short, we ask that any changes to CHW reimbursement be approached with equity, transparency, and care. CHWs are not just health workers, they are justice workers. Their ability to continue serving should not be compromised in the name of reform.

In solidarity,

BLM RI African American Innovation

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