

THE VOICE

OF THE RETIRED PUBLIC EMPLOYEE

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APRIL 2026



TIME TO SHARE PENSION INVESTMENT SUCCESS

12.6% Return Beats 7% Benchmark for 3rd Straight Year

For the 3rd straight year, the Commonwealth's Pension Reserves Investment Trust (PRIT) Fund has beaten its benchmark, adding billions in excess investment gains to the mammoth pension fund, now exceeding \$123 billion in assets. In fact, investment returns over the past decade have consistently produced gains above the state's 7% assumed annual rate of return.

PRIT's assets are managed by the Mass Pension Reserves Investment Management (PRIM) Board.

The timing of the news furthers

the case that it is high time for the investment success of our public pension systems to be properly shared with retirees – the members of the retirement system for whom the pension trust funds are legally established to benefit.

This is particularly true for the retired state employees and teachers, who are members of the State and Teachers' Retirement Systems, and who have not received a COLA base increase since 2012! As our retired state employee and teacher members are well aware, the State/Teacher COLA base has been

stuck at \$13,000 for 14 years and is long overdue for an increase, essentially capping the maximum annual increase at \$390 for these retirees since 2012.

SPECIAL COLA COMMISSION FILES REPORT

A primary objective of the Special COLA Commission was devising the means to fund State/Teacher COLA benefit improvements – both in terms of the traditional COLA base, as well as the

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RETIREES & UNIONS RALLY TO DEFEAT COST SHIFTING

In late February, public retirees and employees achieved a major victory when it comes to the benefits and cost of your health insurance plans.

All the Fiscal Year 27 cost shifting proposals under consideration by the state's Group Insurance Commission (GIC) have been defeated!

This means that for FY27 there will be NO changes to the premium contribution percentage splits for surviving spouses, no change in hearing aid coverage, and no increases in out-of-pocket costs

GIC Premiums Increase 7.5% on Average

– AKA copayments and deductibles.

Representing tens of millions of dollars in new costs for retirees and employees enrolled in the GIC, these proposals were adamantly opposed by our Association, public employee unions, the MA AFL - CIO, scores of legislators, and of course the enrollees who would have been stuck with higher costs and lower quality

insurance benefits.

While these proposals were specific to the GIC, had they been implemented, enrollees in municipal health plans would have also very quickly felt the pinch of higher costs and fewer benefits.

Our combined efforts with labor led to Governor Maura Healey urging the 17-member Commission not to move forward with the proposals. The opposition of Governor Healey, which came after reviewing enrollee impact data and hearing the

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OPEN ENROLLMENT
April 1 - May 1, 2026

PRIT

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newly proposed Enhanced COLA for long-term retirees.

According to Association President Frank Valeri, who served as a Commission member, "The COLA Commission was tasked with three primary objectives:

- Improving the COLA base for members of the State and Teachers' Retirement Systems;
- Addressing the needs of long-term retirees whose pension benefit has been eroded by inflation; and
- Most importantly, devise a means to pay for COLA benefit enhancements."

"For years the main hurdle to improved COLA benefits has been how to pay for it. I believe that the COLA Commission has solved that puzzle with a plan that would share the ongoing investment success of PRIT and our local pension funds. Now is the time to act and share that success. Simply put, retirees can't afford to wait any longer!"

In its report filed in December, the COLA Commission recommends that 10% of annual excess investment gains be set aside to fund COLA improvements. Excess gains are the amount above the assumed rate for annual investment return, which for the State and Teachers' Systems is 7%. **For more on the COLA COMMISSION, see page 5.**



TREASURER JOE CONNARTON
SPEAKING AT TEWKSBURY MEETING

'We cannot overstate the extraordinary success of the PRIT Fund... Every step must be taken to ensure that this success continues and that it benefits the members of the retirement systems.'

MASS RETIREES TREASURER
JOE CONNARTON

PRIT Continues Historic Run: 12.6% Return for CY25

On February 10, the Commonwealth Pension Reserves Investment Management (PRIM) Board formally announced that the pension fund earned a 12.6% investment return in 2025 – far exceeding the 7% assumed rate of return. As of 12/31/2025, the fund held more than a whopping \$123 billion in pension assets under investment.

The balance includes roughly \$90 billion in assets of the State and Teachers' Retirement Systems, nearly \$3 billion of assets of City of Boston Teachers, with the remainder belonging to local retirement systems that invest a portion, if not all municipal pension assets through PRIM.

This past year (2025) marks the third consecutive year with the PRIT Fund exceeding the 7% assumed rate of investment return (9.6% in 2024 and 11.4% in 2023). Averaged together, the fund has exceeded an annualized return of 11% over the past three years.

While the specific gains attributable to the State/Teachers' Systems for 2025 have not yet been determined, we believe the total to exceed \$9 billion for the three-year period. Importantly, had a COLA Reserve Fund already been established, PRIT's excellent 3-year 11% gain would have generated more than \$900 million in excess returns dedicated for State/Teacher COLA improvements – an amount that would more than pay for the entire

cost of the new Enhanced COLA benefit.

PRIT has now beat its assumed rate of return in 8 of the past 10 years and posted a double digit return in 6 of those years. The system's 10-year average return is 8.83%. Since the establishment of the funding schedule in 1987, the system has posted an annualized return of 8.58%, net of fees.

Similar investment results exist across the 102 local retirement systems, the majority of which have some if not all pension assets invested within the PRIT Fund.

The 9-member PRIM Board manages the assets of the PRIT Fund. Executive Director and Chief Investment Officer Michael Trotsky has led the fund for more than 15 years, while State Treasurer and Receiver General Deb Goldberg chairs the Board.

An officer of *Mass Retirees* has held one of the four elected seats (2 members of the State Retirement System and 2 members of the Teachers' Retirement System) on the Board since PRIM's creation in the mid-1980s. Association Executive Vice President Paul Shanley had held one of the two State elected seats prior to his passing in 2025.

Association Treasurer Joseph Connarton is one of two candidates now running for the open seat, with ballots scheduled to be mailed to members of the State Retirement

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UPCOMING SPRING MEETINGS

Here's hoping that spring is just around the corner and with that, *Mass Retirees* will be conducting its full schedule of Spring Meetings. "Please pay particular attention to our new meeting location for our members on the Cape and surrounding region, as well as the new location of the Annual Meeting on the North Shore that's familiar to our members there, namely the Boston Marriott Peabody where we've held several meetings," notes Meeting Coordinator Leo Delaney. "Our plan is to hold the annual meeting in different parts of the state every year."



4.9.26
Leominster, MA
11:00 AM

4.17.26
Natick, MA
11:00 AM

5.8.26
Boston, MA
11:00 AM

6.11.26
Hyannis, MA
11:00 AM

AREA MEETINGS

WHEN: THURSDAY, APRIL 9, 2026, 11:00AM
WHERE: LEOMINSTER-FITCHBURG ELKS LODGE #1237
134 NORTH MAIN STREET, LEOMINSTER, MA 01453

WHEN: FRIDAY, APRIL 17, 2026, 11:00AM
WHERE: NATICK ELKS LODGE #1425
95 SPEEN STREET, NATICK, MA 01760

WHEN: FRIDAY, MAY 8, 2026, 11:00AM
WHERE: FLORIAN HALL
55 HALLET STREET, BOSTON, MA 02122

WHEN: THURSDAY, JUNE 11, 2026, 11:00AM
NEW LOCATION
WHERE: MARGARITAVILLE RESORT
1225 IYANNOUGH ROAD, HYANNIS, MA 02601

**STRIVING
TO KEEP
MEMBERS
INFORMED
& ENGAGED**

**PLEASE
JOIN US!
AND BRING
A GUEST**



4.6.26
1:00 PM

TELE-TOWN HALL

MONDAY, APRIL 6, 2026, 1:00PM

**SPECIAL
GUEST:**



AUTO-CONNECT: At the time of the event *Mass Retirees* members will receive a call from us. Simply answer the call and remain on the line to join the meeting. Members can find the toll-free number for all Town Hall Meetings on your membership card.

ADVANCE NOTICE

2026 ANNUAL MEETING (NEW LOCATION)

9.18.26
Peabody, MA
11:00 AM

WHEN: FRIDAY, SEPTEMBER 18, 2026, 11:00AM
WHERE: BOSTON MARRIOTT PEABODY
8A CENTENNIAL DRIVE, PEABODY, MA 01960



MASS RETIREES LEGISLATIVE UPDATE

House Considering FY27 State Budget

State law requires the governor to file a proposed budget for the upcoming fiscal year by the fourth Wednesday in January. This year, Governor Maura Healey filed her Fiscal Year 2027 budget proposal, known as House 2 (H2), on January 28.

The budget process has moved to the Massachusetts House of Representatives, which will release and debate its version in late April. The State Senate typically follows in late May, often during the week leading up to Memorial Day. Differences between the two versions are then resolved by a six-member conference committee before a final compromise budget is sent to the governor for approval prior to the start of the new fiscal year on July 1.

If the governor vetoes a line item or outside section, the Legislature may override those vetoes with a two-thirds vote of both chambers.

PREMIUM CONTRIBUTION SPLITS: GOVERNOR PROPOSES NO CHANGE

Concerns about a slowing economy and potential federal funding cuts have led state leaders to take a more cautious approach to fiscal planning. While some budget tightening occurred in FY26, planning for FY27 has been even more conservative.

These concerns have already influenced discussions surrounding health insurance spending. As we reported earlier (page 1), the Group Insurance Commission (GIC) considered but rejected several proposed plan design changes that would have shifted costs onto retirees and employees for the coming fiscal year (2027).

Importantly, the governor’s H2 proposal did not include additional cuts to the GIC budget and does not propose further benefit or plan design changes. The Administration also chose not to pursue increases in employee premium contribution percentages, a proposal that had been included in last year’s budget but rejected by the Legislature.

H2 maintains the current premium contribution rates for both state employees and retirees and sets the FY27 GIC budget at just over \$2.8 billion. That figure assumed approximately \$100 million in plan design savings. Without those changes, the budget would need to increase to roughly \$2.9 billion to fully fund the program.

STATE & TEACHERS’ FY27 COLA

The governor’s proposal again included a 3% cost-of-living adjustment (COLA) on the existing \$13,000 COLA base for retirees in the State and Teachers’ Retirement Systems.

If approved, FY27 would mark the 28th consecutive year the Commonwealth has granted a COLA to state and teacher retirees. Because each COLA becomes a

permanent part of a retiree’s base pension, the increases compound over time. For example, a retiree who left service in 1998 would have seen their annual pension benefit grow by more than \$10,500 through cumulative COLA adjustments.

This approach differs from many states where COLAs are issued only occasionally as one-time payments rather than permanent increases.

PROPOSED PENSION FUNDING SCHEDULE EXTENDED TO 2039

Massachusetts adopted a formal pension funding schedule in 1987 after decades of underfunding left the Commonwealth with one of the lowest funded pension systems in the nation. The schedule created a long-term plan to eliminate the unfunded liability through a combination of employee contributions, investment returns, and annual state appropriations.

Strong investment returns during the 1990s initially allowed the Commonwealth to accelerate the funding timeline. However, economic downturns—including the early 2000s’ recession and the Great Recession of 2008-2009—required adjustments to the schedule.

In 2010, the Legislature

established 2040 as the statutory funding deadline for all 104 public retirement systems in Massachusetts. The Commonwealth adopted a more aggressive internal target of 2036 for the State and Teachers’ Retirement Systems.

Earlier this year, the Healey Administration proposed to extend that state funding target by three years, moving the deadline to 2039. The adjustment restructures the state’s payment schedule for addressing the systems’ unfunded liability.

As a result, the FY27 pension appropriation would decrease by approximately \$277 million, though

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COLA COMMISSION RECOMMENDS BENEFIT IMPROVEMENTS

Sharing Investment Success With Retirees Key Element

Following more than a year of preparation and work, the Special COLA Commission filed its much-anticipated recommendations and report to the legislature on December 31st.

At the request of our Association, Governor Maura Healey proposed the creation of the Commission within the FY25 State Budget. Once approved by the House and Senate, the 9-member Commission met regularly throughout 2025 to research and develop a series of recommendations to improve the COLA benefit.

The statute creating the Commission outlined three primary objectives: Improve the COLA base for members of the State and Teachers' Retirement Systems; develop a new Enhanced COLA benefit for long-term retirees who were career public employees; and seek an alternative funding method to

pay for improved COLA benefits.

"For Commission members, as well as state policy makers, the question was not whether improved benefits are warranted. The question is how to best address the need to combat inflation, as well as how to pay for the cost of new benefits," said Association President Frank Valeri, who was appointed to the Commission by Governor Healey. "I believe the Commission achieved its mandate by producing workable well-thought-out recommendations, with the data to back up our findings.

"I want to specifically thank Chairman Bill Keefe, who also serves as Executive Director of PERAC, and his staff for efforts they put into the Commission for more than a year. And specifically, without the work by PERAC Chief Actuary John Boorack and his team, none of this would be possible."

In addition to Valeri, the Commission was comprised of the following members:

- **Senator Michael Brady**
- **Erika Glaster**, Executive Director Emerita, Mass. Teachers' Retirement System
- **Doug Howgate**, President, Mass. Taxpayers Foundation
- **Bill Keefe**, Executive Director, PERAC
- **Kathryn Kougias**, Executive Director, State Retirement Board
- **Amelia Marceau**, Assistant Budget Director, Executive Office of Administration and Finance
- **Representative Dan Ryan***
- **Michael Trotsky**, Ex. Director & Chief Investment Officer, PRIM

*Representative Ken Gordon served until March 9, 2025

COLA BASE INCREASE

While stopping short of filing a detailed legislative proposal, the Commission's recommendations address the three elements to its legislative mandate.

Starting with the traditional COLA base, the report begins by acknowledging the fact the State and Teachers' COLA base last increased in 2012, when the base was increased by \$1,000 to its current level of \$13,000. This single increase in the State/Teacher base since 1997 places the maximum annual COLA payment at \$390 – an amount that does not come close to meeting the long-term demands of inflation. As

the report illustrates, had the State/Teacher base been indexed to inflation since 1997, it would be nearly \$19,000 today.

Of the 104 MA public retirement systems, 87 have a COLA base higher than \$13,000. Another 12 systems have a \$13,000 base and just one system (Amesbury) remains at the \$12,000 base set in 1997.

ENHANCED COLA

Next, the Commission closely examined the impact of inflation on long-term retirees, particularly those who were career public employees and thus heavily rely on their public pension as the primary

source of retirement income. Per Massachusetts retirement law, career public employees are identified as those with 20 or more years of creditable service.

The Commission also modeled various eligibility standards based on the amount of one's retirement allowance, whether it be a percentage of the average salary, retirement benefit, or left uncapped and open ended.

In addition, the Commission evaluated the impact of inflation over the period of retirement and determined that the buying power of a retirement allowance "diminished significantly

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MUNICIPAL HEALTH MAJOR DEVELOPMENTS

CHALLENGES GROWING FOR LOCAL PLANS

Coalition Bargaining Remains Mass Retirees Priority

Rising premiums are placing significant financial strain on regional purchasing groups, municipalities, and regional school districts. Many are now considering benefit changes or alternative options. This past summer and fall, we appointed or reappointed approximately 10 retiree representatives to local Public Employee Committees (PECs), the largest number in a decade—to ensure retirees have a voice as these conversations unfold. The request for appointments continues, especially from those member units who are part of the Hampshire County Group Insurance Trust (HCGIT), who voted in late February to implement plan design changes.

In addition to plan design changes, many municipalities chose to join the GIC. On this July 1, the GIC will enroll the largest number of municipal units, 11, in over a decade. For details, see accompanying article on page 7. And, many municipalities continue to explore this option for the future.

Municipal budgets continue to tighten, and with many Proposition 2½ overrides failing, local administrations are increasingly looking to reduce health insurance costs, especially when mid-year premium increases occur. These pressures raise concerns about potential narrowing of provider networks, higher cost-sharing, changes to drug formularies, or shifts in premium splits

for retirees—changes that can often be decided by a select board, city council, or school committee. Such measures ultimately increase costs for retirees and employees and may discourage members from seeking needed care.

Overview: Governing Law

A decade ago, steep cost increases led to a constrained bargaining environment that enabled greater cost-shifting onto retirees. That trend has continued, making collective action and a clear understanding of health insurance laws essential. Two statutes govern this landscape:

- MGL 32A, which covers the GIC and is overseen by a 17-member Commission with retiree and employee representation; and
- MGL 32B, which governs municipal health insurance and provides the framework for local bargaining.

Under MGL 32B, coalition bargaining—particularly Section 19 and Sections 21–23—is critical. These sections outline how municipalities negotiate benefit plans, premium contributions, or possible entry into the GIC. They also ensure retirees are represented and protected through the Public Employee Committee

(PEC) structure. Section 3 establishes a local Insurance Advisory Committee (IAC), which reviews proposed changes and advises municipal leaders. The IAC does not serve as a bargaining committee; as such, modifications to plan designs or participation in the GIC cannot be accomplished through this committee process.

Strengthening PECs and coalition bargaining remains a top priority. Active engagement allows communities to address premium pressures early and avoid reactionary decisions that shift costs onto those least able to absorb them. Continued collaboration with GIC leadership, regional purchasing groups, carriers, and labor partners will be essential to finding sustainable, innovative solutions for retiree and employee healthcare.

As a reminder, entry into the GIC is only permitted under MGL 32B Sections 19 or 21–23, which require coalition bargaining and the establishment of a PEC. *Mass Retirees* appoints the retiree representative to each PEC, ensuring retirees have a strong voice in these decisions.

It is important to recognize that MGL 32B Sections 21–23 are accompanied by an additional set of regulatory requirements. These regulations establish specific protocols for notification and documentation that must be adhered to.

LTH INSURANCE DEVELOPMENTS

11 MUNICIPAL AND LOCAL ENTITIES JOINING THE GIC

For the plan year beginning July 1, 2026, the Group Insurance Commission (GIC) will experience its largest influx of local participation in more than a decade. Escalating health insurance premiums and growing pressure on municipal budgets have led many communities to seek cost savings by joining the Commission.

Eight municipalities — Bernardston, Chesterfield, Franklin, Grafton, Leyden, Malden, Oxford, and Southamptton — along with Pioneer Valley Regional School District, Charles River Pollution Control District, and Franklin Regional Council of Governments will enter the GIC.

Six of these entities are leaving the Hampshire County Group Insurance Trust (HCGIT), a joint purchasing group that provides coverage to approximately 73 member units across Hampshire, Franklin, Hampden, and Worcester Counties and insures more than 12,000 active and retired employees and their dependents.

In July 2025, HCGIT reported significant cash flow challenges driven by high-cost medical claims and increased GLP-1 expenditures. The Trust discontinued GLP-1 coverage in October 2025 and implemented an additional 20% premium increase on non-Medicare plans. As a result, several member units chose to join the GIC for the upcoming plan year.

For many members — particularly those enrolled in non-Medicare plans — the GIC’s plan design may represent a meaningful shift in out-of-pocket costs. Retired teachers

from Pioneer Valley Regional School District should be aware that they will no longer participate in the Retired Municipal Teacher pool. Under GIC

rules, they will join the District’s GIC coverage along with other eligible members.

Open Enrollment & Enrollment Resources

Members joining the GIC effective July 1 must select a new plan during the GIC open enrollment period (April 1 - May 1). Open enrollment has been pushed back due to delays in the plan design and rate-setting process earlier this year.

Members should receive detailed information from their local benefits administrators regarding

the enrollment process. The GIC strongly encourages all members to register for the online portal, myGICLink, which can be accessed through the GIC website. The website will also provide access to the annual benefit guides and direct links to each insurance carrier for reviewing plan details, provider networks, and coverage information.

Plan Options Overview

Medicare-Eligible Retirees

The GIC offers four Medicare plan options:

- Wellpoint Medicare Extension
- Harvard Pilgrim Medicare Enhance
- Health New England Medicare Supplemental

These three are traditional Medicare supplemental (indemnity) plans with national provider access.

- Tufts Health Plan Medicare Preferred (Medicare Advantage HMO)
- Members considering the Tufts Medicare Advantage plan should carefully review the provider and hospital network to confirm participation.

Non-Medicare Members

There are eight plan options available:

- National Network: Harvard Pilgrim Access America PPO (the only national network option; important for members residing outside New England and not internationally)
- Broad Network: Wellpoint Total Choice, Wellpoint Plus, Harvard Pilgrim Explorer, Mass General Brigham Health Plan Complete
- Limited Network: Harvard Pilgrim Quality, Wellpoint Community Choice
- Regional Network (Western MA): Health New England

Members are strongly encouraged to carefully review all plan materials, confirm that their current providers and hospital systems are in-network, and understand provider tier placement before making a final selection. Once open enrollment closes, changes cannot be made until the next plan year.

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GIC

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concerns of our coalition, was the final step needed to soundly defeat the cost shifting proposals.

Referencing the GIC's impact analysis the Governor stated: "First, with the benefit of clearer data on member impact, I do not believe

COVERAGE OF GLP-1 FOR WEIGHT LOSS ENDING

However, the February 26 meeting did not result in universal good news. While the Governor opposed cost shifting, she continued to call on the Commission to discontinue coverage of GLP-1 for the treatment of obesity.

Following her statement in opposition to cost shifting, Governor Healey reiterated her request that the GIC discontinue GLP-1 coverage solely for obesity, stating the following: "I hope you will seriously consider one remaining proposal: eliminating GLP-1 coverage for weight loss. This is not a change I take lightly, but it is necessary to curb the unsustainable growth in GIC premiums paid by all state employees. Fewer than 5 percent of GIC members use GLP-1s, yet the projected increases in GLP-1 spending accounted for nearly one-third of the average 11.7 percent premium increase all members experienced this year.

"These pressures are not unique to the GIC. For many public health plans, including MassHealth and municipal plans offered through the Massachusetts Interlocal Insurance Association (MIIA), the cost of GLP-1s has become unsustainable. In fact, this change will bring Massachusetts in line with most other states, more than 35 of which do not cover GLP-1s for weight loss. It is also consistent with decisions made by private insurers in our state, including for example Blue Cross Blue Shield and Point 32 of

this is the right time to increase cost-sharing for members. I, therefore, strongly encourage you to vote against the remaining proposals that would increase out-of-pocket costs. These changes would disproportionately impact low and fixed-income members and retirees who are already facing high costs of food, housing and energy; and could discourage use of cost-saving, preventative care."

Massachusetts, as well as benefit managers such as CVS Caremark.

"Importantly, without action, members are projected to see double-digit average premium increases this year. If adopted, this proposal will reduce that average premium increase to 7.5 percent – representing meaningful annual savings for all members."

Following a lengthy debate, the Commission, by a vote of 10-7, ended coverage of the popular obesity treatment as of July 1, 2026.

To be clear, this decision only applies to non-Medicare plans. Coverage for Medicare enrollees is determined by the federal government. As it now stands, Medicare does not cover GLP-1 medications for weight loss alone. Coverage is only available when very specific FDA approved comorbidities exist, such as sleep apnea, kidney failure, and certain types of cardiovascular disease – to name a few examples.

Medicare is now considering expanded coverage of GLP-1 for the treatment of obesity, but the specific details and timeframe are not yet known.

Planning is currently underway to support members who may be affected by the change in coverage beginning July 1. Key considerations include minimizing disruption for members, providing clear communication, and identifying cost-saving options where possible.

AVERAGE RATE INCREASE OF 7.5%

To be very clear, our Association does not support ANY increases in healthcare costs. There already is a healthcare affordability crisis here in Massachusetts. Any time costs go up, the problem gets worse and the more people suffer to make ends meet.

That said, it was well known that insurance costs were going to rise again this year. The question was by how much and within what capacity – higher out-of-pocket costs, higher monthly premiums, or both.

Once again, the drivers of rising health insurance costs are higher unit costs (prices charged by doctors and hospitals for their services), as well as pharmaceuticals. Except for the Tufts Medicare Advantage plan, the state GIC is self-insured. This means that the Commonwealth assumes the risk of cost overruns. The insurance carriers are paid an administrative fee to run the plans.

As expected, the GIC's insurance premiums will increase by a weighted average of 7.5% across all plans. The GIC offers 7 non-Medicare in-state plans, 1 non-Medicare plan for those living out-side of New England and 4 Medicare plans. The average increase across the 8 non-Medicare plans is 8%, a lower increase than the 9-10% national average in 2026.

Increases for the 4 Medicare plans range from 4% to 7.5%. For the highly popular Wellpoint Medicare Extension Plan, rates will increase 4.5%. Nearly 78,000 enrollees are projected to take part in the Medicare Extension plan for FY27.

We should note that the standard Medicare Part-B premium increased 10% (\$17.90 per month) for a total monthly cost of \$202.90 for 2026. However, the GIC's Medicare plans have far lower out-of-pocket costs than do non-Medicare plans.

While non-Medicare eligible retirees can participate in any of the GIC's non-Medicare plan offerings, Wellpoint's Plus and Total Choice plans remain most popular due to

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PRES. FRANK VALERI & WELLPOINT
GEN. MANAGER DAVID MORALES

OPEN ENROLLMENT: WHAT PLAN WORKS FOR YOU?



*Helpful suggestions from
Wellpoint*

With Open Enrollment – be it with the GIC or at the local level – upon us, members may be facing the pivotal question: What plan is right for me? Now is the perfect time to review your health plan options to ensure you have coverage that meets your needs. To assist members, we reached out to Wellpoint, the largest insurer, by far, of GIC retirees, for helpful suggestions to aid members in answering that question and exploring their options.

Mass Retirees thanks Wellpoint General Manager David Morales and his staff in providing key questions that members may want to consider as they shop for the best health plan value. Here's what they suggested.

1. Is the health plan available where you live? Eligibility for a health plan can differ by residency – be sure the plan is available where you live. If you travel often, check if the plan will provide coverage nationally. Most Medicare Supplement plans available through the GIC offer national coverage, including Wellpoint's Medicare Extension, the most popular plan for Massachusetts state retirees.

2. Are your doctors and hospitals covered? It's important to check if your doctors and hospitals are included in the health plan's network. While a Medicare supplement plan, like those offered by Wellpoint (see page 10) covers virtually all doctors and hospitals, the coverage by a Medicare Advantage (MA) plan may have a limited network of healthcare providers.

3. Are you comfortable electing a primary care provider (PCP)? If you don't feel comfortable selecting a PCP and want broader access, you may prefer a plan that doesn't require one. While we encourage you to work with a PCP, some plans, do not require it.

4. Are you okay waiting for referrals to see a specialist? Most health plans require referrals from your PCP before seeing a specialist. If flexibility is important to you, review this requirement carefully as some plans do not require referrals and give you the flexibility to choose which providers you want to visit.

5. How much will you pay in out-of-pocket costs? Healthcare costs are one of the most pressing concerns for retirees. Calculate what your potential out-of-pocket costs may be by reviewing the monthly premiums, copays, and deductibles. Understanding your costs will help you gain peace of mind.

6. What additional benefits does the plan offer? Some plans offer services to help you proactively manage chronic conditions or specific health issues. For example, *Mass Retirees* was instrumental in fostering the partnership between Wellpoint with Senscio Systems, offering members with two or more chronic conditions a virtual care management program, Ibis, with real-time monitoring and one-to-one monthly support.

In closing, Wellpoint pointed out to us that it's also important to check if the plan offers personalized digital tools and virtual care options to give you easy access to all your plan information and care needs. For example, Wellpoint's Sydney Health app lets members check benefits, claims, and cost share information. Members can also access a live chat feature to connect with customer service for quick answers, download and use digital ID cards, and have a live video visit with board-certified doctors.

"We agree with Wellpoint that annual enrollment is the best time to evaluate your health plan options," adds Association President Frank Valeri. **"This is particularly true for our non-Medicare members who may be presented with a wider range of differing plans.**

"No question that one should be informed when attempting to answer the question what plan is right for them. Here in *The Voice*, our weekly email/video messages and other media outlets, *Mass Retirees* is striving to help our members to reach an informed decision.

"Thank you again David and Wellpoint in this important endeavor. And, we look forward to continuing this work with you at our joint Tele-Town Hall Meeting on April 6th." (See details on page 3.)





GROUP INSURANCE

MONTHLY GIC INSURANCE

NON-MEDICARE RETIREE PLANS

HEALTH PLAN COSTS (INCLUDING \$10,000 BASIC LIFE)	PLAN TYPE	TOTAL MONTHLY PREMIUM		RETIRED ON OR BEFORE (90/10 COV)
		INDIVIDUAL	FAMILY	INDIVIDUAL*
Harvard Pilgrim Access America**	PPO	1,507.55	3,365.26	152.04
Harvard Pilgrim Explorer	POS	1,288.02	3,194.99	130.08
Harvard Pilgrim Quality	HMO	964.22	2,459.37	97.70
Health New England	HMO	899.98	2,164.75	91.28
Mass General Brigham HP Complete	HMO	1,231.34	3,269.31	124.41
Wellpoint Total Choice**	Indemnity	1,822.84	4,055.77	183.56
Wellpoint Community Choice	PPO-Type	901.47	2,250.58	91.43
Wellpoint Plus	PPO-Type	1,158.19	2,771.27	117.10

MEDICARE PLANS FOR RETIREE & SURVIVOR

HEALTH PLAN COSTS (INCLUDING \$10,000 BASIC LIFE)	PLAN TYPE	TOTAL MONTHLY PREMIUM
		PER PERSON
Harvard Pilgrim Medicare Enhance	Supplement	\$502.24
Health New England MedPlus	Supplement	504.18
Tufts Health Plan Medicare Preferred***	Advantage	405.80
Wellpoint Medicare Extension	Supplement	496.47

A SAMPLING OF GIC MEDICARE CO-PAYMENTS

FOR MORE DETAILS, PLEASE REFER TO GIC'S BENEFIT DECISION GUIDE

HEALTHCARE SERVICES	WELLPOINT MEDICARE EXTENSION		HARVARD PILGRIM ENHANCE & TUFTS MEDICARE PREFERRED		HEALTH NEW ENGLAND MedPlus	
	RETAIL	MAIL	RETAIL	MAIL	RETAIL	MAIL
PRESCRIPTIONS						
1st Tier	\$10	\$25	\$10	\$25	\$10	\$25
2nd Tier	\$30	\$75	\$30	\$75	\$30	\$75
3rd Tier	\$65	\$165	\$65	\$165	\$65	\$165
OFFICE VISIT*	\$10		\$15		\$15	
RETAIL CLINIC	\$10		\$15		\$15	
RADIOLOGY	\$0		\$0		\$0	
MENTAL HEALTH*	\$10		\$15		\$15	
	(First 4 visits: \$0 co-pay)					
EMERGENCY ROOM	\$50		\$50		\$50	
	(waived if admitted)		(waived if admitted)		(waived if admitted)	
INPATIENT	None		None		None	

*Telehealth Visits: Co-pay may differ.

CE COMMISSION

RATES EFFECTIVE JULY 1, 2026

OPEN ENROLLMENT
April 1 - May 1, 2026

RETIRED BEFORE JULY 1, 1994 (90/10 COVERAGE)	RETIRED AFTER JULY 1, 1994 & BEFORE FEBRUARY 1, 2010**** (85/15 COVERAGE)		RETIRED ON OR AFTER FEBRUARY 1, 2010**** (80/20 COVERAGE)		MUNICIPAL RETIREES (FULL MONTHLY COST + Admin. Fee)	
	FAMILY*	INDIVIDUAL*	FAMILY*	INDIVIDUAL*	FAMILY*	INDIVIDUAL
337.81	228.05	506.71	304.07	675.61	1,511.32	3,373.67
320.78	195.12	481.17	260.16	641.56	1,291.24	3,202.98
247.22	146.55	370.83	195.40	494.43	966.63	2,465.52
217.76	136.92	326.63	182.56	435.51	902.23	2,170.16
328.21	186.62	492.32	248.83	656.42	1,234.42	3,227.48
406.86	275.35	610.29	367.13	813.71	1,827.40	4,065.91
226.34	137.14	339.51	182.85	452.68	903.72	2,256.21
278.41	175.65	417.61	234.20	556.81	1,161.09	2,778.20

RETIRED ON OR BEFORE JULY 1, 1994 (90 / 10 COVERAGE)*	RETIRED AFTER JULY 1, 1994 & BEFORE FEBRUARY 1, 2010**** (85 / 15 COVERAGE)*	RETIRED AFTER FEBRUARY 1, 2010**** (80 / 20 COVERAGE)*	SURVIVOR NO BASIC LIFE (90 / 10 COVERAGE)	MUNICIPAL RETIREES (FULL MONTHLY COST) PER PERSON
51.50	\$77.26	\$103.01	\$50.22	\$503.50
51.70	77.55	103.40	50.42	505.44
41.86	62.79	83.72	40.58	406.81
50.93	76.39	101.85	49.65	497.71

IMPORTANT REFERENCE INFORMATION

*Premiums listed include the state retiree cost for Basic Life Insurance. Based upon your retirement date, the basic life costs \$1.28 (10% of the total life premium), \$1.92 (15%) and \$2.56 (20%).

**Wellpoint Total Choice is offered only to retirees/survivors who are not enrolled in Medicare and reside either in New England (MA, CT, RI, NH, ME, & VT) or internationally. Harvard Pilgrim Access America is offered to retirees/survivors who are not enrolled in Medicare and reside outside New England (MA, CT, RI, NH, ME, & VT) and not residing internationally.

***Tufts Medicare Preferred is the only Medicare Advantage Plan offered by the GIC.

****If application to retire was filed after 10/01/09, also subject to 80/20.

PREMIUM PAYMENT: Premiums are effective beginning July 1, 2026 and will be deducted from June 2026 pension checks (one month in advance).

MUNICIPAL RETIREES: For municipal retirees enrolled in the GIC, the percentage of retiree premium contribution is determined locally. Amounts shown here are the total premium charged to the retiree and municipality, plus the administrative fee of 0.25%.

SURVIVORS: With the overwhelming majority of surviving spouses enrolled in Medicare, we have not included survivor non-Medicare rates within these charts. State survivors contribute 10% of the total monthly premium (without Basic Life).

RETIREE DENTAL PLAN: For FY27 the Retiree Dental Plan rates are: \$30.10 for an individual and \$72.55 for a family. State retirees and survivors in the Plan pay 100% of the monthly premium. Municipal rates are \$30.18 for an individual and \$72.73 for a family.

KEY HEALTH INSURANCE TELEPHONE NUMBERS

- GROUP INSURANCE COMMISSION**
617-727-2310
- WELLPOINT**
800-442-9300 (MEDICARE)
833-663-4146 (NON-MEDICARE)
- CVS CAREMARK / SILVERSCRIPT**
877-876-7214
- GIC RETIREE DENTAL PLAN**
833-442-0411
- MEDICARE**
800-633-4227
- SOCIAL SECURITY**
800-772-1213
- STATE RETIREE VISION PLAN**
833-442-0411

PRIT

CONTINUED FROM PAGE 2 ►

System in March. As the former Chair of the Cambridge Retirement System and the retired Executive Director of the Public Employee Retirement Administration (PERAC) we believe that Joe Connarton is uniquely qualified to represent state retirees and employees on PRIM and help ensure that the ongoing success of the fund continues to benefit enrollees. We respectfully request that those who are members of the state retirement system carefully consider casting your vote for Joe.

“We cannot overstate the extraordinary success of the PRIT Fund in both the short and long-term basis. The Commonwealth went from being among the worst funded systems in the late 1980s to now being amongst the best funded and well run in the country,” said Connarton. “Every step must be taken to ensure that this success continues and that it benefits the members of the retirement systems,

for whom these trust funds were created to benefit. It can’t be overlooked that this is retirees and employee’s money.”

MAJORITY OF SYSTEMS NEAR FULL FUNDING

What this means is that the health of our 104 public retirement systems is excellent. All systems are well on pace to achieve fully funded status by the statutory deadline of 2040 – if not sooner.

In very basic terms, fully funded status means that the retirement system has enough assets on hand to pay the accrued benefits owed to all retired and active members of the respective retirement system. It is an open debate amongst actuaries and public pension officials as to what exactly constitutes “full funding”; with a growing consensus that an 80% funded status or above is the mark of a very well-funded system.

Not including the 2025 investment gains, of our 104 systems, 6 are currently at or above 100%

funded. Another 16 systems are between 90-99% funded, 21 80-89% funded, and 32 between 70-79% funded. In total, 75 systems are above 70% fully funded – without the inclusion of the 2025 investment gains.

While the State and Teachers’ Retirement Systems are revalued each year, based on the returns from the previous year, the 102 local systems are revalued every two years. That means that the funded ratios of municipal retirement systems often lag two years behind based on available data.

As of 1/1/2025 the State Retirement System was 73.9% funded, with the Teachers Retirement System 63.3% funded. Historically, the funded levels of the two systems have remained roughly 10 percentage points apart. Currently, there is a proposal to extend the Commonwealth’s pension funding by 3 years to 2039, reducing the State’s scheduled budget appropriation for FY27 by some \$277 million. (For more on this, see pg. 4)

GIC

CONTINUED FROM PAGE 8 ►

their broad or open networks. Harvard Pilgrim Explorer and MGB Complete HMO are also popular choices amongst retirees, given the plans’ broad networks.

Health New England continues to offer a regional plan, that tends to be popular in western Massachusetts.

Lower cost alternatives are the GIC’s 2 narrow network plans Wellpoint Community Choice and Harvard Pilgrim Quality.

Non-Medicare eligible GIC enrollees who legally live outside of New England must enroll in the one national plan offered by the state, Harvard Pilgrim Access America. Wellpoint’s Total Choice Plan is available for those non-Medicare eligible retirees living outside of the United States.

Medicare enrolled retirees can choose from the three Medicare

supplement plans offered by the GIC.

Please note, enrollees traveling outside of Massachusetts or the New England area are fully covered for emergency care.

For the Retiree Pay-All Dental Plan, rates will increase just 1.5%. Currently, just over 47,000 state and local retirees participate in the Altus Dental Plan.

GIC OPEN ENROLLMENT BEGINS APRIL 1

GIC Annual Enrollment begins on April 1st and runs through May 1st. We strongly advise members to carefully review your plan options and look beyond the cost when choosing the plan that is best for you. Whichever plan you choose, make sure that your doctors and related hospitals are covered. For instance, you do not want to choose a narrow network plan that does not

include your physician – because if you do, you may be faced with significant out-of-pocket costs.

“With Governor Healey’s help, retirees and active employees avoided a major increase in costs for FY27. However, if we do not collectively find a way to reform the systemic drivers of healthcare costs, we will be right back here again next year facing even higher costs,” said *Mass Retirees* CEO Shawn Duhamel. “When the Governor called Frank Valeri and I following the GIC’s vote, we made it clear to her that we cannot allow that to happen. Something must give and that is not forcing those who can least afford it to pay more.”

Mass Retirees will continue to closely monitor developments stemming from the newly formed Healthcare Affordability Task Force, which is expected to report cost containment recommendations to the Governor in June.

LOCAL BOARDS CONTINUING TO INCREASE THEIR COLA BASE

Annually we list the COLA bases for the 102 local retirement systems. Since local boards can approve a COLA up to July 1, we routinely wait to publish the COLA base list in the October issue of *The Voice*.

But, in the meantime, local boards – 8 in number as we went to press – have been adopting higher FY2027 bases. In fact, when we were going to press with last October’s (2025) *Voice*, the Marlborough Retirement Board notified us that it was increasing its COLA base to \$15,000.

According to the Board, they were able to obtain approval of the \$15K base (up from \$14K) by the City Council and also from PERAC. It took effect last October.

We take note that Association member Gregory Brewster, who is retired from the city’s police department, chairs the Marlborough Board.

In addition to Marlborough, we know that at least seven other retirement boards will be increasing their COLA base since our report last October. They include: Berkshire County with 29 towns and several local districts/authorities, going from \$16K to \$17K; Chicopee from \$16K to \$18K; Danvers from \$13K to \$14K; Lowell from \$17K to \$18K; and Mass Housing Finance Agency from \$20K to \$21K; and Winchester from \$14K to \$16k. While Danvers increased its base effective this March, the other base increases will be take effect this July.

More recently we were notified by the Brockton Retirement Board that they have unanimously adopted a comprehensive schedule that will eventually raise the current \$14K COLA base to \$20k as of July 1, 2031.

Its decision was approved by the city.

Beginning this July, Brockton will be increasing its base by \$1,000 increments in each of the 6 consecutive years, beginning this July at \$15K until it reaches a \$20K base.

ASSOCIATION MEMBERS ON LOCAL BOARDS

It’s noteworthy that two members of the (5-member) Brockton Board belong to *Mass Retirees*. It is chaired by longstanding *Mass Retirees* member Bill Farmer who has worked with Association officials throughout his public service career and now in retirement.

That also holds true for retired Fire Lieutenant Archie Gormley who serves as one of the Board’s two elected members and has been a strong ally of the Association going back to when he was active firefighter and union official. Upon retiring, Archie became a *Mass Retirees* member.

“We should also recognize that Association members serve on the other boards mentioned here,” points out Association President Frank Valeri. Lowell stands out with three Association members on the 5-member Board – William Desrosiers, Robert Littlefield (both elected members and from the Lowell Fire Department) and Michael Brennan who serves as the Board’s 5th member.

When Berkshire County voted last year for a \$17K COLA base, both elected members belonged to the Association - Timothy Sorrell, retired Lansboro police chief, and Mark Bashara whose term ended this past January (see page 16). And,

an Association member serves on: Chicopee – Tim O’Shea (Fire), and Winchester – Thomas Tracy (former Watertown city auditor) who serves as Winchester’s 5th member.

“These retirement boards and their members deserve recognition for their successful efforts in improving the COLA,” sums up Association President Frank Valeri.

“When in 2010 we successfully enacted the local option law allowing for these increased COLA bases, we envisioned that it would be an ongoing process that retirement boards could implement at any time. All these boards, having increased their base more than once, are prime examples of that.”

HIGHER FY27 COLA BASES

(Compiled since October 2025)

SYSTEM	NEW BASE
Berkshire County	\$17,000
Brockton	\$15,000
Chicopee	\$18,000
Danvers	\$14,000
Lowell	\$18,000
Marlborough	\$15,000
MHFA	\$21,000
Winchester	\$16,000

COLA

CONTINUED FROM PAGE 5 ►

after 10 years due to inflation and it is then that an Enhanced COLA should be implemented.”

Recognizing the continued erosion of pension buying power as a retiree ages, the Commission recommends that the Enhanced COLA benefit be implemented in tiers. For example, higher benefit levels being applied after 10, 15, and 20 years of retirement.

Mass Retirees also envisions that the new Enhanced COLA benefit would apply to the 102 local retirement systems through the local option process, which requires approval by both the local retirement board and local legislative body. This process is standard for local adoption of any new retirement benefits.

COLA RESERVE FUND

Fulfilling the third element of its mandate (how to pay for new benefits), the Commission has recommended the creation of a COLA Reserve Fund. The fund would then be drawn upon to pay for increases to the COLA base and the new Enhanced COLA benefit.

A portion of excess investment gains would be set aside in the COLA Reserve Fund but continued to be invested alongside all the Commonwealth’s pension fund assets. The Commission recommends that 10% of investment gains above the Commonwealth’s 7% assumed rate of return be dedicated to pay for future COLA improvements.

“Going back to the creation of the COLA benefit in the late 1960s, the challenge has always been how to pay for the benefit. When our public retirement systems went from pay-as-you-go to a funding schedule-based approach in the late 1980s, the question of how to pay for new benefits became harder to answer. The fact that billions in unfunded

liabilities had to be paid off made the situation that much more difficult,” explains *Mass Retirees* CEO Shawn Duhamel. “Unlike Social Security and other federal benefits, public retirement systems must be funded for both current and future retirees. Benefits granted today will, in most cases, also be provided to future retirees. This is why setting aside a small portion of excess investment gains is so important. It provides a dedicated self-sustaining funding source to pay for COLA benefits.”

“With the State and Teachers’ Retirement Systems in excellent fiscal condition and the PRIT Fund continuing to perform extraordinarily well, now is the time for much needed COLA reform. After all, these trust funds were created to solely benefit public retirees. And the money invested in these trusts belongs to retirees and employees. Retirees should share in the success of these systems. It is the right thing to do,” comments Association Treasurer Joe Connarton, who previously served as Executive Director of PERAC.

MASS RETIREES COLA REFORM INITIATIVE

KEY PROPOSALS: SEE PAGE 15

Our Association has drafted a COLA Reform Initiative based on the Commission’s report and recommendations. Our hope is that the measure will be passed into law this year.

Central to our proposal is the use of excess investment gains to fund both increases in the traditional COLA base and the new Enhanced COLA benefit. Based on the Commission’s recommendation, we have proposed using 15% of the excess gains from 2025 as seed money to establish the Enhanced COLA benefit for State and Teacher Retirees. In subsequent years, 10% of excess gains would be routinely earmarked for the COLA

Reserve Fund.

In 2025, the Commonwealth’s PRIT Fund earned a 12.6% investment return – a full 5.6% beyond the system’s 7% annualized assumed rate of return. As we point out in our cover story on page one, the historic long-term success of PRIT continues. Investment returns have exceeded benchmarks in 8 of the past 10 years, with double digit returns having been achieved in 6 of those years.

Next, we have formulated an Enhanced COLA benefit for long-term retirees utilizing the data contained within the Commission’s report. Our plan calls for a new benefit to be paid in addition to the traditional COLA for those career employees who have been retired for 10 or more years, with a pension benefit less than 80% of the average salary for the retirement system. As of 1/1/25, the average salary of a state employee was \$84,500 and \$85,600 for teachers.

The Enhanced COLA would have three tiers based on years retired: \$100 (10); \$200 (15); \$300 (20). Like the traditional COLA, the Enhanced benefit would become a permanent part of the retirees’ pension to be paid annually.

For the State and Teachers’ COLA base, the Association proposes the base be increased to \$16,000. Subsequent increases would occur on a more regular basis, utilizing the COLA Reserve Fund.

“The cost of these proposed benefit improvements is a major consideration. There is no question that COLA improvements are long overdue, but it would be irresponsible for us to propose an unrealistic initiative that is not financially stable and therefore unlikely to be passed into law,” said Legislative Chairman Tom Bonarrigo. “The full cost of the Enhanced COLA is approximately \$640 million. A \$3,000 increase in the COLA base adds some \$1.8 billion in unfunded liability to the system. By using 15% of the 2025 gains, we can

CONTINUED ON PAGE 19 ►



MASS RETIREES COLA REFORM INITIATIVE

KEY PROPOSALS HIGHLIGHTED

(See accompanying text, Page 14)



STATE & TEACHERS' RETIREMENT SYSTEMS:

Note: The first four of the Association proposals listed below are reflective of the major recommendations by the Special COLA Study Commission.

- Creates COLA Reserve Fund for future state/teacher COLA benefit payments and liabilities.
- Requires that ten percent (10%) of PRIT's Excess Investment Income (Gains) in a Calendar Year be transferred into the COLA Reserve Fund.
- Triggers an increase in the State/Teachers' COLA base in \$1K increments based upon the funds available in the COLA Reserve Fund.
- Creates an Additional (Enhanced) Benefit that becomes a permanent part of the pension for certain eligible state and teacher retirees who retired before July 1, 2020 and been retired for at least 10 years. In addition, the state/teacher retiree must have at least 20 years of creditable service and receive a pension less than 80% of the system's average employee/teacher salary. If the retiree satisfies these conditions, there are three (3) levels of Enhanced Benefit increases based upon the number of years that a retiree has been retired:

- For 10 or more years, the Enhanced Benefit is \$100 annually;
- For 15 or more years \$200 annually; and
- For 20 or more years \$300, annually,
- With 1/12 of the benefit being added to the monthly pension check

- Increase the current \$13,000 state/teacher COLA Base to \$16,000
- For one-time only, requires that 15% (not 10%) of PRIT's CY25 Excess Investment Gains be transferred to the COLA Reserve Fund.

LOCAL RETIREMENT SYSTEMS:

Note: In its recommendations, the Special COLA Study did not address local retirement systems since the legislative authority for its study was restricted to the state and teachers' retirement systems only. That said, *Mass Retirees* expanded its COLA Reform Initiative to include local retirement systems by way of local option.

- Elect to Create a COLA Reserve Fund by adopting the enabling legislation that allows local retirement to do so (Local Option).

If a local system elects to create a COLA Reserve Fund, it is obligated to transfer a 10% minimum of its Excess Investment Income (Gains) into the Fund.

- Elect to Create an Additional (Enhanced) Benefit by adopting the enabling legislation that allows local retirement to do so (Local Option).

If a local system elects to create the Enhanced Benefit, it will be subject to same eligibility criteria and additional benefit payments as the state and teachers' retirement systems.

RETIREMENT BOARDS

ELECTIONS & APPOINTMENTS

Adams- Retired Selectman **George Haddad** was declared reelected to the **Adams Retirement Board** as he was the only candidate nominated. The Board members declaring the election were **Patricia Wol**, Library Director **Holli Jayko***, Natick Board Administrator **Beth Matson** and the ex-officio member is currently vacant. The Adams Board administrator is **Bill Flynn**.

Amesbury – Treasurer/Collector **Donna Cornoni*** was reelected to the **Amesbury Retirement Board**. In addition, recently retired Board Administrator **Kevin Caira** was also elected to replace retired Purchasing Agent **Shaunna Ring**. The other Board members include, **Marisa Batista**, **Craig Bailey**, and **David Van Dam** who also serves as the Haverhill Retirement Board executive secretary. The recently appointed Amesbury Retirement Board administrator is **Laura Angus**.

Berkshire County – Retired Lanesboro Police Chief **Mark Bashara** was not reelected to the **Berkshire County Retirement Board** in a highly contested election. **Bashara** received 320 votes, however, was defeated by the Great Barrington Town Treasurer **Alicia Dulin** who received 346 votes. The other members on the Board include **Michael Ovitt***, Stockbridge Treasurer **Erika Oleson**, Lanesborough retired Police Chief **Timothy Sorrell** and former State Representative **Wm. "Smitty" Pignatelli** as the Board's fifth member. The Berkshire County Board executive director is **Sheila LaBarbera**.

Bristol County - **William M.**

Downey was reelected to the **Bristol County Retirement Board** as he received 612 votes to defeat Bristol County retiree **Maria Gomes**, who received 345 votes. **Mr. Downey** is a retired Easton Fire captain, a *Mass Retirees* member and has just been elected to his thirteenth term. Other members on the Board include retired Somerset Fire Chief **Stephen Rivard** who also serves as the *Mass Retirees Southeastern VP Executive Board* member, **Christopher Saunders***, **John Saunders**, and **Christine DeFontes**. **Roxanne Donovan** is the Retirement Board's executive director.

Danvers – Longtime fifth member of the **Danvers Retirement Board**, **Steve Swanson**, did not apply for reappointment and Board members appointed **Vincent Malgeri, Esq.** as his replacement. **Malgeri** also serves as the fifth member on the **Essex Regional Retirement Board**. The Board members making the appointment were **Heather Russo**, **Rodney Conley**, **Dan Hagan** and **Joseph Collins***. The Board's administrator is **Cory Grace**.

Greenfield – **Deborah Frentzos** was reappointed to her second term as the **Greenfield Retirement Board's** fifth member. Deborah is the retired Franklin County Retirement Board assistant director. The other Board members include, the Board's retired Administrator **Marianne Fiske**, retired Firefighter **William Devino***, **Katherine Cabrera-Velaz**, and Firefighter **Kyle Phelps**. **Shari Hildreth** is the Greenfield Retirement Board's administrator.

Hampshire County – **Joe Cook**

was reappointed to his second term on the **Hampshire County Retirement Board** as their fifth member. Other Board members include, **Jennifer LaFountain**, **Sean Mangano**, **Jane Wolfe**, and **Patrick Brock***. The Board's longtime administrator is **Mary Baronas**.

MassPort Authority – Both incumbent elected members, **Betsy Taylor** and **Jon G. Turco**, were unopposed and reelected to the **MassPort Authority Employee's Retirement Board**. The other members declaring the election were **John Prancevicius, CPA**, **Michael Grieco** and **Paul Hanley, Esq.***. The director of retirement is **Irene Moran**.

Newburyport - **Newburyport Retirement Board** members declared Firefighter **Jeffrey Cutter*** reelected, without opposition, to his fifth term. **Jeff Cutter** also serves as an executive board member of the **Mass Association of Contributory Retirement Systems, (MACRS)**. The other Board members include, **Amy Sarro**, **John Moak**, retired Firefighter **Joseph Spaulding** and **Larry Giunta**. The Newburyport Retirement Board director is **Elena Kothman**.

Newton - **Kelly Byrne**, retired Board director, was reelected to the **Newton Retirement Board** as she received 750 votes to defeat DPW retiree **Douglas Bartley** who received 118 votes. Other members on the Board include, Comptroller **Stephen Curley**, **Anthony Logalbo**, **Lisa**



JEFF CUTTER
NEWBURYPORT

CONTINUED ON PAGE 19 ►



CHANGES TO BCBS LABOR AFFAIRS TEAM

Steve Dion Named Director



STEVE DION
BCBS LABOR AFFAIRS DIRECTOR

As longtime *Mass Retirees* members know, the Association’s close working relationship with Blue Cross and Blue Shield of Massachusetts dates back nearly to our founding in 1968. Through the decades that followed, the state’s best-known health insurance company has not only provided our enrolled members with excellent benefits, but the team at BCBS MA have been consistent partners for our Association.

Our direct point of contact within BCBS is through the company’s Labor Affairs Division. For decades, *Mass Retirees* leadership has held seats on the BCBS Labor Advisory Committee and actively participates in the several forums held by the company each year.

One unique aspect of BCBS MA as a company is the longevity of its workforce. A case in point is the recent retirement of Labor Affairs Director Chris May, who retired in January after 34 years with the company.

“While I’m very happy for Chris, I’m sad to see him go. Chris May was one of the first people from BCBS that I met when I came

on board with *Mass Retirees* in 1994. He’s been a friend and close partner for the past 31 years,” said CEO Shawn Duhamel. “Thankfully, Blue Cross has a deep talent pool to draw from in terms of internal promotions. We’re thrilled that Steve Dion has been promoted to Director. Not only has Steve been with the company for more than 26 years, but he also brings deep knowledge of the municipal health insurance market to his new position.”

“Steve Dion and I have worked together on a wide range of municipal health insurance issues over many years. Steve and the entire Blue Cross team have been an important resource for our local retirees serving on Public Employee Committees,” adds *Mass Retirees* Healthcare and Retirement Advocacy Director Nancy McGovern. “We can’t be happier for Steve with his well-deserved promotion. Given the pressure on the health insurance marketplace and amount of local activity on potential plan changes, we now rely on BCBS more than ever to be there for our members.”



CHRIS MAY WITH ASSOCIATION CEO SHAWN DUHAMEL

Leg. Update

CONTINUED FROM PAGE 4 ►

the state will still contribute more than \$5.1 billion toward pension funding this year. Annual contributions will then continue to increase by 4% each year through FY2039.

More Importantly, this change does not reduce pension benefits and does not allow funds to be

withdrawn from the retirement system. By law, pension assets can only be used to pay retirement benefits and administrative costs.

LOOKING AHEAD

While an extension would be largely driven by budget considerations, it also opens the door to broader discussions about the long-term structure of the pension funding schedule and potential opportunities

to improve retiree benefits, including COLA policy.

Despite economic uncertainty, the financial health of Massachusetts’ public retirement systems remains strong. All 104 retirement systems across the Commonwealth continue making steady progress toward the statutory 2040 full-funding deadline, now just fourteen years away.

ASSOCIATION HEALTHCARE SURVEY HIGHLIGHTS MEMBER EXPERIENCE

In February, the Association conducted an online healthcare survey to better understand members' experiences with insurance coverage, healthcare access, and costs. A total of 3,390 members responded, with more than 65 percent of responses submitted on February 6 and the remainder through February 12.

*THANK YOU FOR PARTICIPATING,
YOUR INPUT IS INVALUABLE.
STAY TUNED TO OUR NEXT ONLINE
SURVEY FOR YOUR THOUGHTS ON
CONTROLLING COSTS.*

The survey confirms that the vast majority of respondents are Medicare-eligible retirees, representing 84 percent of participants. Most respondents are covered by the state's Group Insurance Commission (GIC), accounting for 76 percent of members, while 22 percent are insured through a local municipal plan.

Encouragingly, most respondents report that healthcare costs have not prevented them from receiving care. Ninety-two percent said they had not avoided medical care due to out-of-pocket costs during the past year, and 97 percent reported they have not carried unpaid medical debt within the last five years.

When it comes to prescription medications, 78 percent of respondents obtain their prescriptions at

retail pharmacies, while 22 percent utilize mail-order services.

The survey also asked members about their use of healthcare services. While emergency room visits averaged one to three visits in the past year, responses suggest that urgent care centers are increasingly being used as an alternative to the emergency room for non-emergency situations.

Members were also asked what factors are most important when choosing a health insurance plan. Two themes clearly stood out: access to care and affordability. Respondents emphasized the importance of maintaining access to doctors, specialists, and hospitals while keeping costs manageable.

When asked where improvements are most needed, healthcare costs were the most frequently

mentioned concern, particularly the price of prescription drugs, copayments, and treatment expenses. Some respondents also raised concerns about network limitations and coverage levels within dental plans.

The survey also included questions related to hearing aid coverage, where responses indicated that nearly three-quarters of respondents reported never utilizing hearing aid benefits, while smaller percentages reported replacing hearing aids every one to two years.

These results provide valuable insight as the Association continues its advocacy work on behalf of retirees, particularly in areas related to healthcare affordability, access to providers, and prescription drug costs.

Health Ins.

CONTINUED FROM PAGE 7 ►

Association Guidance

Transitions of this scale can feel overwhelming, particularly for retirees and members who have been enrolled in the same plan structure

for many years. We strongly encourage members to take the time to review all plan materials carefully, compare out-of-pocket costs, and confirm provider participation before making a final decision.

As always, the Association will continue to monitor this transition and advocate for members' interests. While we do not enroll members

directly, we are available to provide general guidance and help members understand the broader structure of the GIC plans so they can make informed decisions.

If you have questions about how this change may impact you, please do not hesitate to reach out.

Elections

CONTINUED FROM PAGE 16 ►

Maloney, Esq. and **Thomas Lopez. Barbara O'Brien** is the Retirement Board's director.

Norfolk County – The Norfolk County Retirement Board declared that **Josephine Shea** was reelected to the Board as she was the only candidate to file nomination papers. It is Shea's twelfth term as elected member. The other Board members, who declared Shea's reelection are, Norfolk County Treasurer **Michael Bellotti***, retired Sharon Firefighter **Ed Little**, retired Randolph Town Administrator **Paul Connors** and Walpole Town Treasurer **Lisa Sinkus. Kathleen Kiely-Becchetti, Esq.** is the board's executive director, former president of the **Mass. Association of Contributory Retirement Systems (MACRS)** and fifth member on the **Watertown Retirement Board.**

Reading – Firefighter David



TOM ROSS
SOMERVILLE

Gentile was reelected without opposition to his 4th term on the **Reading Retirement Board.** Board members making the declaration were, **Sharon Angstrom***, Town Clerk **Laura Gemme**, retired Woburn Firefighter **William Sweeney** and Police Officer **Richard Abate.** The recently appointed Retirement Board administrator is **Elaine Kelly.**

Somerville – Firefighter Tom Ross was declared reelected by the **Somerville Retirement Board** members without opposition. This will be Ross' fifth term as one of the elected members of the Board. The other Board members are, **Edward Bean*, Michael Mastrobuoni**, retired Deputy Fire Chief **John Memory** and **David Castellarin.** The Board's executive director is **Michael Pasquariello, CPA.**

Taunton – Mayoral appointee,

Gill Enos, was replaced by Taunton CFO **Patrick Dello Russo** on the **Taunton Retirement Board.** Fifth member **Barry Amaral** was replaced by retired Braintree Finance Officer **Edward Spellman Jr.** who is also a Braintree Retirement Board member. The other board members are, **Ian Fortes**, retired Police Detective **Dennis Smith*** and retired Fire Lieutenant **Thomas Bernier.** The Retirement Board's executive director is **Paul Slivinski.**

Worcester Regional – June Hubbard-Ward, a Worcester County retiree, was declared elected by the **Worcester Regional Retirement Board** as she was the only nominated candidate. The Board members making the declaration were, Chairman **Kevin Blanchette***, Dudley Treasurer **Richard Carmignani**, retired County Treasurer **Michael Donoghue** and **Michael DeVito.** The Board's executive director is **Rachel Grimaldi.**

*denotes chair

COLA


CONTINUED FROM PAGE 14 ►

fully fund the Enhanced COLA and cover the initial cost of the base increase – while the Commonwealth continues to fully fund its obligations

to the retirement systems.

“With the proposed goal of being fully funded in 2039, the state's pension appropriation for FY27 is \$5 billion. Another \$3 billion is being spent to fund the GIC. While there are limits to how far benefits can

reasonably be increased at once, if our plan is implemented it will put the systems on track to routinely improve COLA benefits going forward. The investment success will finally be shared with all of us.”



REMEMBERING OUR DEPARTED MEMBERS

Visit In Memoriam On Association Website

In memory of our members who have recently passed away, *Mass Retirees* maintains a tribute to them, *In Memoriam*, on its website: www.massretirees.com

Our tribute includes simply the member's name, as well as their hometown and former public service. It will be updated on a quarterly basis.

MASS RETIREES
The Voice of the Retired Public Employee

WEP & GPO REPEALED!!!

IN MEMORIAM
IN HONOR AND MEMORY OF MEMBERS LOST
(As of 12/25/25)

In honor and memory of Mass Retirees members who have recently passed away, we offer this tribute to them – their names, addresses and former public service.

We extend our deepest sympathy to their families.

AGUIRRE, JOHN – Plantation, FL (Epsom Public Dept.)
 ALLIEN, DEAN M. – Taunton, MA (Boston School Dept.)
 ALTMAN, BARBARA A. – Barrington, IL (Labor Management Board)
 AULT, JOHN J. – Wayland, MA (Arlington Retiree)
 AUGERMAN, PHYLLIS – Westbrook, MA (Lottery Commission Survivor)
 AUSTIN, MARIE G. – Ashburnham, MA (State Retiree)
 AZZARITO, CAROLE – Haverhill, MA (Haverhill Teacher)
 BARNATHER, EVA J. – Ansted, ME (W. Springfield Teacher)
 BAZINET, RUTH E. – Underdage, MA (Dep. Public Health)
 BEARSHAGAR, PAUL E. – Grafton, MA (Mass Highway)
 BELMONTI, JOSEPH A. – Peabody, MA (Dewey Teacher)
 BENNETT, ARTHUR H. – Baitoven, MA (Dartmouth Teacher)
 BIANCELLI, JOSEPH J. – Walpole, MA (Prohibition Dept. Survivor)
 BLAIR, BARBARA – St Simons Island, GA (Silver Lake BSD Teacher)
 BOWSHETT, VINCENZO R. – Weymouth, MA (Boston Teacher)
 BOWEN, MARY L. – Longmeadow, MA (Amherst Teacher)
 BRANDI, CAROL C. – Alva, FL (Seamspool Retiree)
 BRANDON, ROBERT – Haverhill, MA (Haverhill Teacher)
 BREGOLA, JOHN R. – Braintree, MA (Braintree Teacher)



RETIRED STATE COUNTY AND MUNICIPAL EMPLOYEES
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BILL FLIPPIN, *V. Pres., Eastern District*
STEVE RIVARD, *V. Pres., Southeastern District*
ROBERT POWILATIS, *V. Pres., Plymouth Cape/Islands*
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LARRY SULLIVAN, *Executive Board*
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THE VOICE

April 2026

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We Support Our Troops.



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Founded in 1968, *Mass Retirees* is the only state-wide nonprofit association representing ALL retired Massachusetts public employees. In addition to advocacy and serving as an information resource, we are also a membership-service organization.

If our members have questions or need help with a retirement related issue – such as health insurance claims disputes – *Mass Retirees* is here for you!

We also offer an Associate Member program for those active Massachusetts public employees nearing

retirement. *Mass Retirees* is a unique source of valuable information and news that can help you to better prepare for retirement.

A *Mass Retirees* membership is just **\$46** a year. Associate Members can subscribe to our newsletters, emails and other publications for an annual cost of just **\$19.99**.

Join today by using the appropriate QR code as a retiree or active employee or at the addresses below:



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