

THE VOICE

OF THE RETIRED PUBLIC EMPLOYEE

11 BEACON STREET, BOSTON, MASSACHUSETTS 02108-3024 | (617) 723-7283 | WWW.MASSRETIRES.COM

JULY 2026

HOUSE APPROVES COLA REFORM

Measure Now Before Budget Conference Committee

In what would be the largest change in retirement law surrounding cost-of-living benefits in nearly 30 years, the House of Representatives has passed a COLA Reform initiative within the Fiscal Year 27 state budget.

The initiative, passed by the House in late April, is based on the recommendations of the Special COLA Commission on which Association President Frank Valeri served as an appointee of Governor Maura Healey. It was *Mass Retirees* that called for the creation of the Commission, with the goal of not only improving benefits,

but also developing a new way of funding future COLA increases.

Following the release of the Commission's report in late December, our Association crafted a legislative proposal based on the recommendations contained in the

SUPPORT FROM HOUSE LEADERSHIP



SPEAKER
RONALD MARIANO

MAJORITY LEADER
MICHAEL MORAN

W & M CHAIR
AARON MICHEWITZ

report (see April *Voice*). With the detailed analysis of the Commission serving as a firm foundation, Association leaders presented our COLA Reform initiative to House leaders in March.

Central to the COLA Reform initiative presented by *Mass Retirees*, as well as the proposal passed by the House, are two primary concepts: The creation of a new Enhanced COLA benefit and the establishment of a COLA Reserve Fund.

"For several years we have been working to create a new COLA benefit

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HEALTH CARE AFFORDABILITY & ADVOCACY

Take Center Stage This Spring

This spring has underscored just how rapidly the health care landscape continues to evolve — and why public retirees must have a strong voice.

Over the past several months, *Mass Retirees* has remained actively engaged in statewide conversations surrounding health care affordability, insurance markets, and public sector health coverage. From labor forums

BCBS Labor Forum: Focuses on Affordability and Cost Pressures



with major insurance carriers to statewide policy discussions focused on cost containment and access to care, our Association has continued to advocate for the interests of retirees and employees alike.

In May, Association leadership attended the 2026 Blue Cross Blue Shield of Massachusetts Labor Affairs Forum alongside labor representatives and public sector stakeholders from across the Commonwealth.

Longtime members know that

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COLA

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to help career public employees who have been retired longer than 10 years. As a result of high inflation and rising health insurance costs, these retirees are having a hard time making ends meet,” explains Valeri. “Given the high inflationary period retirees have faced since 2021, the need for improved COLA benefits have never been in doubt. The high hurdle to overcome has always been the cost of improved COLA benefits and how to pay for it within the Commonwealth’s pension funding schedule.

“In addition to focusing on help for long-term retirees, a primary task of the Commission was to develop a new method to pay for improved COLA benefits – whether it be an Enhanced COLA or increasing the traditional COLA base. Through the work of the Commission and the actuarial staff of the Public Employee Retirement Administration Commission (PERAC), I believe that we achieved both primary goals.”

COLA PROPOSAL IN HOUSE BUDGET

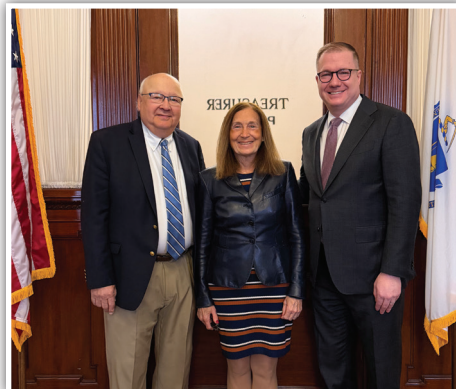
After reviewing our initiative and analyzing the Commission’s report, House leaders opted to include a COLA Reform measure within the FY27 budget proposed by the House Ways and Means Committee in mid-April. The measure was then passed by the House on April 30th. See Page 19 for a summary of its key features.

“Over more than a month’s time, we met and discussed the budget with House Speaker Ron Mariano, Majority Leader Mike Moran, Ways and Means Chairman Aaron Michlewitz, and Republican Leader Brad Jones. Our discussions with them proved invaluable, and we are extremely grateful that COLA reform was included in the Ways and Means budget proposal,”

comments Legislative Chairman Tom Bonarrigo, who leads our advocacy efforts on Beacon Hill. “And, we also thank Public Service Committee Chairs Rep. Dan Ryan and Sen. Mike Brady for their participation in the Special Commission and as always, their continued support in improving retiree COLA benefits.

“The fact that this measure is moving forward now is due to the respect that House leaders have for public retirees and our Association. It is also a testament to the solid work done by the Commission and PERAC to create a viable funding mechanism that will pay for the increased benefits.”

Due to the timing of the budget process in 2026, with the Senate releasing its version of the FY27



**PRESIDENT FRANK VALERI WITH
TREASURER DEB GOLDBERG &
CEO SHAWN DUHAMEL**

budget just days after the House finished its work, there was not proper time for Senate leaders to vet the COLA Reform proposal passed by the House.

Differing versions of the budget, as well as major pieces of legislation, are a normal course of legislative discourse. The FY27 budget is now in conference committee, where three members of the House and three members of the Senate will negotiate a final unified version of the budget to be enacted and sent to Governor Healey.

“It’s understandable that the Senate did not have time to act prior to taking up the budget in mid-May.



HOUSE COLA PROPOSAL *Key Features*

SEE PAGE 19

That said, we have had very productive meetings with the Senate leadership from both parties, including Senate Ways and Means Chairman Mike Rodrigues. As was the case with the House leadership, there seems to be a deep understanding amongst Senate leaders that retirees need help,” said Association CEO Shawn Duhamel. “We’re cautiously optimistic that COLA Reform will have the support of Senate leaders, survive conference committee, and become law in 2026.”

In addition to a series of in-depth meetings with legislative leaders from both parties, Association officials have also met with senior Healey Administration officials and directly with State Treasurer and Receiver General Deb Goldberg.

“Massachusetts retirees deserve financial security that reflects today’s economic realities. I support the House’s inclusion of an enhanced COLA proposal in the FY27 budget and the continued focus on supporting longtime state employees and teachers who have dedicated their careers to public service,” said Goldberg, who chairs both the PRIM Board and State Retirement Board.

COLA RESERVE FUND

A primary task assigned to the 9-member Special COLA Commission was to study and recommend a new funding source to pay for COLA improvements going

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2026-2027 MASS RETIREES MEETING SEASON

BEGINS WITH THE ANNUAL MEETING ON SEPTEMBER 18



9.18.26
Peabody, MA
11:00 AM

Traditionally with our September 18th Annual Meeting in Peabody, *Mass Retirees* kicks off its 2026-2027 Season of in-person area meetings. HERE IS OUR FALL SCHEDULE:

L A S T C A L L

2026 ANNUAL MEETING

DON'T FORGET: MARK YOUR CALENDAR AND NOTE NEW LOCATION IN PEABODY

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

PLEASE JOIN US!

U P C O M I N G I N - P E R S O N

AREA MEETINGS - FALL 2026

A C R O S S T H E C O M M O N W E A L T H

AS CUSTOMARY, WE WILL BE CONDUCTING MEETINGS IN ALL REGIONS ACROSS THE COMMONWEALTH DURING THIS FALL AND POSTING FUTURE MEETINGS ON PAGE 3 OF *THE VOICE*. PLEASE STAY TUNED FOR A FUTURE MEETING IN YOUR AREA.

9.25.26
Westport, MA
11:00 AM

WHEN: FRIDAY, SEPTEMBER 25, 2026, 11:00AM
WHERE: WHITE'S OF WESTPORT
66 STATE ROAD, WESTPORT, MA 02790

10.2.26
Plymouth, MA
11:00 AM

WHEN: FRIDAY, OCTOBER 2, 2026, 11:00AM
WHERE: HOTEL 1620
180 WATER STREET, PLYMOUTH, MA 02360

10.22.26
Pittsfield, MA
1:00 PM

WHEN: THURSDAY, OCTOBER 22, 2026, 1:00PM
WHERE: HOLIDAY INN & SUITES BERKSHIRE
ONE WEST STREET, PITTSFIELD, MA 01201

10.23.26
West Springfield, MA
11:00 AM

WHEN: FRIDAY, OCTOBER 23, 2026, 11:00AM
WHERE: STORROWTON TAVERN & CARRIAGE HOUSE
1305 MEMORIAL DRIVE, W SPRINGFIELD, MA 01089

10.30.26
Auburn, MA
11:00 AM

WHEN: FRIDAY, OCTOBER 30, 2026, 11:00AM
WHERE: AUBURN ELKS LODGE 2118
(TO AVOID CONGESTION, PLEASE USE HANDICAPPED ENTRANCE)
754 SOUTHBRIDGE STREET, AUBURN, MA 01501

STRIVING TO KEEP MEMBERS INFORMED & ENGAGED

LEGISLATIVE & BUDGET ACTIVITY

Picks Up On Beacon Hill

As the Legislature moves toward the close of formal sessions later this summer, activity surrounding both retiree health care and public pension legislation has accelerated significantly over the past several weeks.

This spring has brought movement on several bills filed or supported by *Mass Retirees*, along with continued debate over health care access, affordability, and retiree protections within the FY27 state budget process.

One important development came from the Joint Committee on Public Service, which favorably released legislation, **H.2890**, filed by Representative John Lawn (D-Watertown) dealing with municipal insurance brokers and consultants. The proposal would increase transparency surrounding the work performed by brokers and consultants involved in public employee and retiree health care plans and would prohibit an entity from serving as both broker and consultant within the same municipality. It has now advanced to the House Committee on Bills in Third Reading.

Also before the Third Reading Committee is **H.2799**, legislation filed by Representative Michael Day (D-Stoneham) that would protect existing municipal retirees from increases to their health insurance contribution percentages after retirement. The bill reflects a long-standing priority of our Association and mirrors protections that

have existed for state retirees for decades.

As health care costs continue to rise, protecting retirees from unexpected contribution increases remains an increasingly important issue in cities, towns, school districts, and other local governmental entities across Massachusetts.

Meanwhile, the State Senate recently adopted an amendment to its version of the FY27 budget, filed by Senator Cindy Friedman (D-Arlington) that seeks to preserve access to out-of-network health care coverage for Group Insurance Commission (GIC) enrollees receiving care here in Massachusetts. The amendment received broad bipartisan support in the Senate and reflects growing concern surrounding network adequacy and access to specialized providers.

Mass Retirees, along with labor and retiree allies, has continued to advocate strongly on this issue as concerns surrounding health care access remain front and center for many GIC members and retirees.

Several other health care-related amendments drew significant attention during the budget debate. Amendments seeking to restore GIC coverage for GLP-1 medications prescribed for weight loss were ultimately not adopted. *Mass Retirees* also monitored and supported additional language related to protections for out-of-network health care access for GIC enrollees.

In addition to the health care and budget activity, several other bills supported by *Mass Retirees* continue moving through the legislative

process.

Legislation providing relief for certain Option B and C retirees who retired prior to July 1, 2004 remains before the House Ways and Means Committee. The bill seeks to address longstanding inequities created when the Commonwealth updated outdated mortality tables in 2004, resulting in improved benefit calculations only for future retirees.

The Association also continues advocating for legislation allowing surviving spouses who receive municipal or public retiree health insurance coverage to remarry without losing their health care benefits. Current law, much of which dates back decades, can terminate eligibility for certain surviving spouses upon remarriage. The proposal is now before the Committee on Health care Financing.

Veterans legislation filed this session would increase the annual Veterans Bonus for eligible public retirees from the current maximum of \$300 to \$1,000 annually. The benefit has remained unchanged since the 1950s despite significant increases in health care and living costs over that time. Both House and Senate versions of the bill remain under review before the Legislature's Ways and Means Committees.

Another proposal before the Senate would increase the minimum monthly survivor pension benefit paid to certain surviving spouses of vested active public employees who pass away prior to retirement. The legislation would raise the current minimum benefit from \$500 to \$750 per month.



REP. JOHN LAWN
(D-WATERTOWN)



SEN. CINDY FRIEDMAN
(D-ARLINGTON)



REP. MICHAEL DAY
(D-STONEHAM)

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CONNARTON WINS IN LANDSLIDE



Elected to State's PRIM Board ★★★★★

Mass Retirees Treasurer Joseph Connarton has secured a landslide victory to represent his fellow state retirees on the Pension Reserves Investment Management (PRIM) Board. Support from retirees resulted in Connarton securing 61% of the vote.

"I want to start by thanking my fellow retirees and active state

employees for your support. Ensuring that the success of our pension fund continues and that your pension assets are used for your benefit is why I ran," said Connarton. "Now I cannot wait to get to work on your behalf."

Connarton, who retired as executive director of the Public Employee Retirement Administration Commission (PERAC), will join the PRIM Board on July 1 to begin a three year term. The nine member PRIM Board, which is chaired by State Treasurer Deb Goldberg, next meets in August.

"Starting on day one, Joe will be

a true asset to PRIM. Due to his experience as the head of PERAC and having served as chair of the Cambridge Retirement System, I cannot think of anyone else who has brought this level of expertise to the Board," comments Mass Retirees President Frank Valeri, who also serves as an elected member of the State Retirement Board. "I also want to thank our State Retiree members and thousands of others for turning out in support of Joe. Our Association has held a seat on PRIM since it was created in 1984. This is important work and having a voice at the table is vital to our members."

SENATE APPROVES POST RETIREMENT EARNINGS LIMITS

Mass Police Association Initiated Amendment

The State Senate has approved an increase in post-retirement work earnings limits. If passed into law, the measure will mark the first increase in the limit since 2014.

Initiated by the Mass Police Association (MPA) and supported by Mass Retirees, the increase was unanimously approved by the 40-member Senate as an amendment to the FY27 State Budget. The amendment was sponsored by Senator Michael Moore (D-Worcester).

Moore's amendment increases the earnings limit by \$10,000 a year.

As was the case the

last time the limit was increased in 2014, the driving force behind the issue was MPA Executive Director Jim Machado. A long-time close friend, ally, and now member of Mass Retirees, Machado is a retired Fall River police sergeant and former Public Employee Retirement Administration (PERAC) Commissioner.

The amendment is subject to negotiations within the House/Senate conference committee, which is now underway, due to the measure having been included within just the Senate version of the FY27 budget. We anticipate the



SENATOR MICHAEL MOORE (D-WORCESTER)



JIM MACHADO WITH SEN. MICHAEL RODRIGUES (D-WESTPORT) (2025 ANNUAL MEETING)

"This amendment is a sensible step to allow retirees some relief from inflationary pressures".

JIM MACHADO

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Health Care

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Mass Retirees has maintained a close working relationship with Blue Cross Blue Shield of Massachusetts for decades. The annual Labor Forum provides an important opportunity

for labor leaders, advocacy organizations, and insurers to discuss the growing challenges facing health care coverage and affordability.

A central theme throughout this year's forum was the continued escalation of health care costs and the impact those increases are having on both premiums and out-of-pocket

expenses for retirees and working families.

BCBS President and CEO Sarah Iselin spoke extensively about affordability pressures, rising provider costs, and the growing need for systemic reforms aimed at controlling spending while preserving quality care.

Among the issues discussed at the Forum were:

- Rising hospital and provider costs
- Ongoing contract disputes between insurers and hospital systems
- Prescription drug spending increases
- Greater transparency and standardization in medical records and insurance systems
- The long-term sustainability of employer-sponsored health plans

These discussions are particularly important for public retirees because the Commonwealth and most municipalities operate self-insured plans. Simply put, increases in provider and pharmaceutical costs directly affect premiums, plan design, and retiree out-of-pocket expenses.

Mass Retirees Joins HPC Advisory Council Healthcare & Ret. Advocacy Dir. Nancy McGovern Appointed

This spring also marked the beginning of a new two-year term for the Massachusetts Health Policy Commission (HPC) Advisory Council. The HPC is the state agency tasked with monitoring health care spending trends, reviewing major market changes, and developing policy recommendations designed to improve affordability, transparency, and access to care across Massachusetts.

We are proud to report that our own Nancy McGovern was appointed to serve on the Advisory Council for the 2026–2027 term.

This appointment ensures that public retirees and public employees have a direct voice in state-wide health policy discussions at a time when health care affordability remains one of the most pressing financial concerns facing retirees on fixed incomes.

Mass Retirees emphasized that approximately 250,000 public retirees across Massachusetts rely on either GIC or municipal retiree health plans, with many covered through Blue Cross Blue Shield of Massachusetts plans. In addition,



NANCY MCGOVERN WITH GIC EXEC. DIR. MATT VENO AT COUNCIL MEETING

our Association continues to advocate not only for retirees, but also for active public employees who often lack representation in broader state-wide health policy discussions.

During the Council's opening discussions, we raised several concerns directly impacting our members, including the growing burden of prescription drug costs, the complexity of navigating insurance systems, and the long-term sustainability of public sector health coverage.

Underlying all of these discussions is one important reality: health care costs in Massachusetts continue to rise well above the state's own benchmark for sustainable growth. Those increases disproportionately affect retirees and individuals living on fixed incomes.

As these conversations continue in the months ahead, *Mass Retirees* will remain actively engaged and continue reporting back to members on developments that may impact retiree health coverage, affordability, and access to care.

The Council's early discussions have focused heavily on several major policy areas, including:

- Rising hospital and provider prices
- Prescription drug affordability
- Market consolidation within the health care industry
- Access to primary and behavioral health care
- Consumer transparency and navigation challenges within insurance systems

MUNICIPAL HEALTH INSURANCE ACTIVITY INTENSIFIES ACROSS THE COMMONWEALTH

Rising Costs Continue to Drive Local Discussions and Plan Changes

This spring has seen a significant increase in municipal health insurance activity across Massachusetts, as rising health care costs and ongoing budget pressures continue to impact municipalities, regional purchasing groups, and school districts. Communities across the Commonwealth are actively evaluating health insurance plan changes, premium contribution adjustments, and alternative coverage options as they attempt to manage escalating costs.

Mass Retirees has remained actively engaged as municipalities increasingly examine strategies to address growing health care expenditures. Over the past several months, the Association has participated in a growing number of local discussions involving plan design modifications, carrier changes, and possible entry into the state’s Group Insurance Commission (GIC).

Some of the communities and entities engaged in health insurance discussions or implementing changes this year are:

- :: Belmont
- :: Greenfield
- :: Hampshire County Group Insurance Trust
- :: Littleton
- :: Methuen
- :: North Attleboro
- :: Norwell
- :: Peabody
- :: Rockland
- :: Sharon
- :: Wachusett Regional School District

In some cases, municipalities adopted plan design changes intended to reduce costs, while others pursued broader restructuring efforts, including changing carriers or moving to entirely different plan offerings.

In many of these communities, *Mass Retirees* has been directly involved in discussions at the bargaining table, serving as both a resource and support system for our appointed retiree representatives and our labor partners as they navigated increasingly complex health care and budget challenges. As health care discussions become more technical and financially driven, ensuring retirees have informed representation and access to reliable information remains a critical priority for the Association.

Many municipalities are facing difficult financial realities. Health care costs continue to rise at rates that outpace local revenue growth, while broader fiscal pressures — including failed Proposition 2½ overrides in some communities — are forcing local officials to closely examine employee and retiree benefit costs. In many communities, these discussions are occurring alongside broader budget concerns involving schools, public safety, and municipal services.

Regional purchasing groups and municipal plans are also continuing to experience pressure from increased prescription drug spending, provider reimbursement growth, and high-cost claims. These

challenges are prompting communities to revisit long-term health care strategies and evaluate additional cost containment measures. At the same time, some municipalities continue to explore the GIC as a future option for managing health care costs.

While each community faces unique circumstances, the overall trend is clear: health care affordability remains one of the most significant financial challenges facing municipalities, retirees, and employees alike. Decisions made at the local level can directly affect retirees through increased deductibles, copayments, coinsurance, prescription costs, narrower provider networks, or higher premium contribution percentages.

Mass Retirees continues to closely monitor activity across the state and remains committed to ensuring that retiree concerns remain part of these conversations. The Association will continue working with municipalities, labor organizations, regional purchasing groups, carriers, and state leaders to encourage sustainable solutions that balance fiscal realities with the health care needs of retirees and employees.

As discussions continue throughout the year, retirees are encouraged to remain informed and engaged. And, please stay in contact with the Association regarding developments within their communities.

Post-Retirement Earnings

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committee completing its work and recommending a final unified budget in early July.

“Retirement earnings has always been a priority for me. This amendment is a sensible step to allow retirees some relief from inflationary pressures. I am hopeful the conference committee will concur with the Senate,” said Machado.

GROWING IMPORTANCE

An issue of growing importance and overall interest to retired public employees is that of post-retirement work. Whether for economic reasons, to stay active or to fulfill specific public service needs, a greater number of retirees are opting to work in retirement than ever before.

While public retirees are allowed to work in a post-retirement job, certain restrictions apply depending on the type of work and/or the type of pension a retiree is receiving. The restrictions can restrict both the hours and earnings of a retiree in a calendar year.

Superannuation (regular non-disability pension) retirees are allowed to work without any limits in a private sector or federal job, as well as for a state or municipal government outside of Massachusetts. Disability retirees are restricted in their earnings in a calendar year regardless of the source of earned income.

All public sector retirees, regardless of pension type, are restricted when it comes to public sector work here in MA either for the state or local government. Again, the restriction applies to both hours and earnings in a calendar year. Hours are restricted to 1,200 a year and were last increased in 2023 – averaging 23

hours per week annually.

The earnings limit formula applies to both superannuation and disability retirees. It is the difference between what a retiree’s former job now pays (currently,

in the year in question) and their current pension – plus an additional \$15,000. For example, if your former job currently pays \$80,000 and your current pension is \$56,000 then the difference between the two is \$24,000. You would then add an additional \$15,000 to that amount for a total annual earnings limit of \$39,000.

Public retiree work restrictions have been on the books in MA dating back to the creation of the public retirement systems in the early 1900s. Originally, except for jury service, public retirees could not hold any public sector job within MA whatsoever. Over the decades the restrictions have been loosened, in large part to reflect the modern needs of our workforce and a population that is living longer.

However, public policy sentiment continues to restrict both the hours and earnings for post-retirement public sector work, as well as all earned income of disability retirees.

That said, since the last increase in the earnings limit having occurred in 2014 – before the high inflationary period retirees are still experiencing – we believe that it is time for an increase. Thankfully others agree.

“We are very grateful that our friend Jim Machado and the MPA have once again taken the lead on this issue. With a growing number of public retirees being recruited to return to part-time public service to fulfill important needs, modernizing the retirement law to reflect the demands of today’s society is important,” comments *Mass Retirees* President Frank Valeri, who also serves as an elected member of the State Retirement Board.

Mass Retirees has conveyed our strong support for this measure to the House leadership and the six conferees now negotiating a final FY27 State Budget. Our hope is to see this passed in 2026, helping to provide some additional relief to retirees.

“We are very grateful that our friend Jim Machado and the MPA have once again taken the lead on this issue. With a growing number of public retirees being recruited to return to part-time public service to fulfill important needs, modernizing the retirement law to reflect the demands of today’s society is important,” comments Mass Retirees President Frank Valeri, who also serves as an elected member of the State Retirement Board.

FRANK VALERI
MASS RETIREES PRESIDENT

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UPDATE

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LOCAL COLA BASE INCREASES

ELEVEN MORE SYSTEMS

Since our last report in the April *Voice*, we have eleven more local retirement systems that have increased their COLA Base. It's noteworthy that for all of them it wasn't their first time doing so.

Chaired by retired Deputy Fire Chief and Association member Mark Devine, Westfield raised its base from \$13K to \$14K. Hampshire County did likewise, with a new \$14K base this coming July. Already at \$14K, Revere will be raising its base to \$15k.

Upping its base by \$2K, New Bedford and Winthrop have adopted a new \$16K base, while North Adams went a step further, voting a \$4K increase to a \$17K base. Another system going to a \$17K base is Natick that had been at \$15K.

We're also pleased to report that there are two new members of the "20K Club." Greater Lawrence Sanitary District (GLSD) raised its \$18K base to \$20K. And, just before press time, we received good news from Salem.

"While we were putting the

finishing touches on this *Voice*, Salem Retirement Board elected member Bob Callahan, a retired police captain, let me know that the City Council had approved the Board's increase of the COLA base to \$20K – a whopping \$5,000 increase over its current \$15K base," reports President Frank Valeri.

"I'm proud to say that both Bob and Sally Hayes, the Board's other elected member, belong to the Association. And, the GIC's Executive Director Matt Venio, with whom we have a solid working relationship, also serves on the Board as its fifth member. Thank you all for this significant (and permanent) COLA boost to the pensions of your city's retirees and survivors."

Wellesley went even further when its town meeting approved an incremental approach over the next four fiscal years. Beginning this July, the COLA Base will be \$22K for Wellesley retirees, nearing the average Mass. Social Security benefit. Over the succeeding three fiscal years, the base will be increased in \$1K increments until it reaches \$25k

on July 1, 2029.

Just like Wellesley, the City of Newton has adopted the incremental approach in raising its current \$15K base. Beginning this coming fiscal year (FY27), the Newton base will be \$16K. Then in each of the next two fiscal years (FY28 & FY29), the base will be raised in \$1K increments so that beginning July 1, 2028, Newton retirees and survivors will be entitled to a \$18K base.

"As we did with the systems highlighted in our April *Voice*, we also applaud these eleven for what they have achieved, namely increasing their COLA base," comments President Frank Valeri. "And, we're confident the list will grow before July 1."

Reminder: Our next (October) *Voice* will include a complete report on the COLA base for each of the Commonwealth's 104 retirement systems.

SYSTEMS INCREASING COLA BASE*

GLSD	\$20K	Newton	\$16K	Wellesley	\$22K
Hampshire Cty	\$14K	North Adams	\$17K	Westfield	\$14K
Natick	\$17K	Revere	\$15K	Winthrop	\$16K
New Bedford	\$16K	Salem	\$20K		

*Since our report in the April *Voice*.



GROUP INSURANCE IMPORTANT NEWS

GIC'S GLP-1 CHANGES & MEDICARE'S NEW "BRIDGE" PROGRAM

WHAT MEMBERS NEED TO KNOW

Major changes are coming to GLP-1 medication coverage for both GIC and Medicare members, particularly for medications prescribed for weight loss and obesity

management. While some of the GIC changes have already been outlined, details surrounding Medicare's new "GLP-1 Bridge" demonstration program are still being finalized at the federal level as we went to press.

IMPORTANT NOTE: The information below reflects what we know at press time and remains subject to change as additional guidance is released.

NON-MEDICARE GIC MEMBERS

For non-Medicare GIC members, coverage for GLP-1 medications prescribed solely for obesity will end on June 30, 2026. In addition, the current prescribing arrangement through Vida Health will also end at that time.

Beginning July 1, members seeking these medications will need to work directly with their regular health care provider. Prescriptions will require prior authorization through CVS Caremark.

The Vida Health program itself is not going away. Members will still be able to access behavioral coaching, weight-management support, and registered dietitian services through Vida — just without the prescribing component.

MEDICARE GIC MEMBERS

Medicare GIC members will have a longer transition period. Current GIC coverage for GLP-1 medications prescribed for obesity will continue through December 31, 2026.

After that point, coverage under GIC plans will generally continue only for members who meet CMS-approved clinical criteria. Members

seeking additional information about eligibility requirements should consult CMS guidance and materials provided by the GIC. At the same time, Medicare is introducing a new pathway that may provide access to these medications for certain beneficiaries.

Coverage will remain available for:

- Members using GLP-1 medications for diabetes treatment
- Members with a BMI of 27 or higher who also have an FDA-approved comorbidity

MEDICARE PROPOSED "GLP-1 BRIDGE" PROGRAM

In what could become an important development for many retirees, Medicare is expected to launch a temporary demonstration initiative known as the Medicare GLP-1 Bridge Program beginning July 1, 2026.

At this point, however, many operational details of the program are still being developed and finalized by Medicare and participating plans. As a result, eligibility

requirements, participating medications, costs, and administrative processes could still change before implementation.

Based on current information, the program is expected to provide eligible Medicare Part D beneficiaries access to certain weight-loss GLP-1 medications for a flat copay of approximately \$50 per month.

At this time, the medications expected to be included are:

- Wegovy (injectable and tablet forms)
- Zepbound (KwikPen only)
- Foundayo

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CE COMMISSION DEVELOPMENTS

NEW SPECIALTY DRUG PROGRAM & OUT-OF-NETWORK COVERAGE CHANGES

Two significant changes to Group Insurance Commission (GIC) health benefits will take effect on July 1, 2026, impacting how certain

specialty medications are covered and how out-of-network medical services are reimbursed.

While many members may not notice any immediate impact, those

who take specialty medications or receive care from out-of-network providers should take time to understand the changes and any actions that may be required.

NEW PRUDENTRX SPECIALTY DRUG PROGRAM



The GIC will launch the **PrudentRx Specialty Drug Program** on July 1, as part of the FY27 plan design changes approved earlier this year.

The program is intended to help reduce out-of-pocket costs for certain high-cost specialty medications by coordinating available manufacturer assistance programs. Members whose medications qualify for the program will generally pay **\$0 out of pocket** for those prescriptions once enrolled.

Importantly, **the program does not apply to Medicare-enrolled retirees.** Instead, it applies to active employees and retirees who are not yet enrolled in Medicare and who take eligible specialty medications.

According to information provided by the GIC, eligible members will receive communications directly from **CVS Caremark** and **PrudentRx** with information about enrollment and next steps. Members who do not enroll in the program may be subject to higher coinsurance costs for medications that are included in the program.

Because members are routinely

advised to be cautious when receiving unsolicited calls or requests for personal information, it is worth noting that communications regarding this program are expected to come directly from CVS Caremark, the pharmacy benefit manager for GIC health plans, and PrudentRx. **Members who have questions or concerns about any communication they receive should contact CVS Caremark directly at 1-877-876-7214 before providing personal information.**

Mass Retirees will continue to monitor the rollout and share additional information as it becomes available.

OUT-OF-NETWORK REIMBURSEMENT CHANGES

The GIC will also implement a new standardized reimbursement methodology for covered out-of-network medical services beginning July 1.

For members who receive care from providers participating in their health plan's network, this change is not expected to have any impact. In-network providers will continue to offer the lowest out-of-pocket costs and the highest level of coverage available under a member's plan.

The change primarily affects situations where members who receive covered services from

providers who do not participate in their health plan's network. The GIC will standardize reimbursement rates for out-of-network medical services effective July 1, 2026.

Massachusetts law continues to provide important protection against balance billing in many emergency situations and certain non-emergency circumstances. These consumer protections help shield patients from unexpected medical bills when care is received from an out-of-network provider without the patient's knowledge or choice.

As always, members are

encouraged to confirm that a physician, hospital, specialist, or facility participates in their health plan's network before scheduling non-emergency services. Taking a few minutes to verify network participation can help avoid unnecessary costs and ensure access to the full benefits available under a member's health plan.

As additional information becomes available, *Mass Retirees* will continue to keep members informed about these and other changes affecting retiree health coverage.

RETIREMENT BOARDS

ELECTIONS & APPOINTMENTS

Cambridge – Retired Deputy Fire Chief **Francis E. Murphy III*** was reelected to a sixth term on the **Cambridge Retirement Board**, defeating **Christian Abney** by 789 votes to 142. Retired City Auditor **James Monagle** was also reelected,



FRANCIS MURPHY
CAMBRIDGE



JAMES MONAGLE
CAMBRIDGE

unopposed, to a second term as the Board's other elected member. Before retiring, **Monagle** served on the Board as the ex-officio member. The Board's other members are current City Auditor **Joe McCann**, **Michael Gardner**, and **Nadia Chamblin-Foster**. The Board's executive director is **Chris Burns**.

Clinton – Retired Police Lieutenant **Joseph P. Casasanto** was



JAMES CASASANTO
CLINTON

unopposed and declared reelected to his seventh term on the **Clinton Retirement Board**. Board members declaring the election were **Diane Magliozzi**, **David Baird**, Police

Officer **James McNamara** and **Paul Cheubini***. The Board's retirement administrator is **Patty Hazel**.

Concord – The Concord members voted to reelect Fire Lieutenant **Brian Whitney**, who received 186 votes to defeat retired Police Officer **Kevin Walsh** who received 151 votes. The other Board members include **Richard Delorey**, **Jennifer Barrett**,

retired Firefighter **Peter Fulton*** and **Eric Macy**. **Jill Hersey** is the Concord Retirement Board director who recently replaced long-time director **Linda Boucher**.

Easthampton – **Donald Emerson***, retired police captain, was unopposed and declared re-elected to the **Easthampton Retirement Board** for his sixth term. The remaining members are Treasurer **Emily Russo**, Auditor **Hetal Petal**, retired Fire Chief **David Mottor**, and **Phillip Campbell**. The Easthampton Retirement administrator is **Kymme Wood**.

Everett – Mayor **Robert Van Campen** named Special Assistant to the Mayor **Christopher Connolly** as his appointment to replace **Keith Slattery** and Interim Auditor **William Fowler** to replace **Eric Demas** as ex-officio member to the **Everett Retirement Board**. The other members on the Board include, **Maria Bussell**, Firefighter **William Pierce*** and **Peter Cocciardi, CFP**. **Bob Shaw** is the **Everett Retirement Board** director.

Framingham – Mayor **Charlie Sisitsky** named **Brian Turbitt** as the City's chief financial officer. The other members include, **Richard Howarth, Jr***, retired Firefighter **Joseph Fonseca**, **Keith Rovinelli** and Walpole Police Officer **John White, Jr.** **Frank Pettengill** recently replaced **Laurie Lizak** as the Board's executive director.

Gardner – **Denise Merriam*** was declared reelected to her thirteenth term and retired Fire Captain **Robert Newton** declared reelected to his sixth term to the **Gardner Retirement Board**. The other members making the declaration were **Karen Butler**, **Jacob Cormier** and retired Police Chief, **David Walsh**. The Gardner Retirement Board administrator is

Cheryl Bosse.

Haverhill - Retired Deputy Chief of Police **Anthony Haugh*** was unopposed and declared reelected to his second term on the **Haverhill Retirement Board**. The other board members making the election declaration were **Angel Perkins**, **Richard MacDonald**, **Pamela Carr** and **James Cleary III, Esq.** **David Van Dam** is the Board's Administrator.

Webster – Town Clerk **Robert Craver*** was unopposed in his reelection and declared the winner as such by the remaining **Webster Retirement Board** members. The other members making the declaration were **Timothy Bell**, retired Town Clerk **Eleanor Doros**, retired Police Detective **James Hoover** and **Brian Perry**. The Board's retirement administrator is **Kristin LaPlante**.

West Springfield – After 9 years of service, **Dan Marini** chose to step down as the **West Springfield Retirement Board's** fifth member. The Board appointed **Michael Begley**, investment consultant for Clark Capital Management Group with more than 25 years of industry experience. Board members making



MICHAEL BEGLEY
WEST SPRINGFIELD

the appointment were **Sharon Wilcox***, **Thomas Cummings**, **Gwen Keough**, retired Fire Chief **William Flaherty**. The West Springfield Retirement director is **James Lovotti**.

Weymouth – Firefighter **Jeff Wall** was elected to fill the long-time elected Board member **Richard Hayes'** seat and the Board's new ex-officio member is Assistant

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MASS RETIREES DENTAL PLAN SURVEY

KEY FINDINGS FROM MEMBERS

The Association recently conducted a comprehensive dental plan survey to better understand the experiences, concerns, and priorities of retirees and active public employees regarding their dental coverage. We were very encouraged by the strong response, with more than 1,300 individuals participating in the survey from communities across Massachusetts and from retirees living out of state.

The survey examined several areas related to dental coverage, including how members access their plans, overall satisfaction with coverage, the features members value most, and the challenges many continue to face when seeking dental care. Respondents represented a broad cross-section of retirees and employees covered through both the state's Group Insurance Commission (GIC) and local or municipal retiree plans.

Of the 1,345 individuals who responded to the survey question regarding coverage, a significant majority indicated that they currently participate in a retiree dental plan. Additionally, among the 1,131 respondents who answered the residency question, most reported living in Massachusetts, while others reported residing in neighboring states such as New Hampshire, Maine, Rhode Island, and Vermont, as well as retirement destinations including Florida.

The survey also highlighted the diversity of coverage options utilized by members. Among respondents, 1,056 individuals identified whether

they receive dental coverage through the GIC or a local or municipal plan. Of the 951 respondents enrolled through the GIC, participants identified themselves as state retirees, local or municipal retirees, or active employees. Members with local or municipal coverage reported participation in a variety of plans and carriers, including Delta Dental, Altus, Blue Cross Blue Shield of Massachusetts, Cigna, MetLife, and several other providers.

More than 1,075 respondents shared whether they were enrolled in an individual or family dental plan, demonstrating broad participation across different household coverage types. Overall, responses indicated that many retirees and employees believe their dental coverage generally meets their needs. Among the 1,072 respondents who answered the satisfaction question, many reported positive experiences with their plans over the past 12 months.

When asked what they valued most about their coverage, respondents most frequently cited affordable premium rates, broad provider networks, manageable out-of-pocket costs, customer service, and the ability to maintain access to trusted dental providers. These findings suggest that stability, affordability, and provider access remain critically important to retirees and public employees.

At the same time, the survey highlighted several ongoing concerns that continue to impact members. Among the 1,064 respondents who identified challenges with their

dental plans, the most common concerns included rising out-of-pocket expenses, annual maximum benefit limits that many felt no longer reflect the true cost of dental care, and difficulties accessing providers who participate in their plans. Respondents also expressed concerns regarding reimbursement rates paid to dentists and the growing challenge of finding providers willing to accept certain plans.

The survey further underscored the importance of dental coverage as a key component of retirement security and overall health.

For many retirees living on fixed incomes, affordable access to preventive and restorative dental care remains essential to maintaining both health and financial stability.

Wrapping up the survey and its findings, our Healthcare and Retirement Advocacy Director Nancy McGovern had the following to say: "We appreciate everyone who took the time to participate and share their experiences. The information gathered through this survey provides valuable insight that will help guide our ongoing advocacy efforts and future discussions surrounding retiree dental benefits, affordability, and access to care.

"As health care and benefit costs continue to evolve, ensuring that retirees and public employees maintain meaningful and affordable dental coverage will remain an important priority for the Association."

COLA

CONTINUED FROM PAGE 2 ►

forward.

Dating back to the first COLA law in the late 1960s, the main challenge in increasing benefits has been paying for the new benefit. As reported in our recent “History of the COLA” article, funding became even more of a hurdle following the establishment of modern pension funds in the 1980s, which ended pay-as-you-go pension funding policies across the country. This means that each unplanned increase in benefits must be both accounted for and funded within the system’s pension funding schedule.

Under the COLA Reform proposal passed by the House, 10% of annual excess investment gains (above the assumed annual rate of return, which is set at 7% for the State and Teachers’ Retirement Systems) will be earmarked to fund the Enhanced COLA and future increases in the traditional COLA base. While the COLA Reserve Fund does earmark a small portion of assets for the sole purpose of improved COLA benefits, the Fund itself is simply an accounting mechanism that does not change investment operations or policy. All assets will continue to be invested by the PRIM Board or the relevant local retirement system (through local acceptance).

The most important point to remember when it comes to this new policy is that it ensures that when the pension fund does well, that success will be shared directly with retirees through improved COLA benefits. This is a significant change in the state’s pension law, which previously rolled 100% of excess investment gains into the pension fund.

ENHANCED COLA FOR LONG-TERM RETIREES

Creating an Enhanced COLA benefit has also been a recent goal of our Association, as we frequently

“We believe the COLA Reform measure passed by the House strikes the right balance between fiscal responsibility and putting these trust funds to work for retirees.”

CEO - SHAWN DUHAMEL

hear from long-term retirees struggling to make ends meet. The general concept that grew into the Enhanced COLA proposal was initiated by a conversation with former Boston Mayor Marty Walsh, during our Association’s advocacy work involving an increase in the City of Boston’s COLA base a decade ago.

The suggestion of then Mayor Walsh planted the seed with then newly elected Association President Valeri, who has focused on the creation of such a benefit ever since.

Using career public employment as a starting point, the Special Commission recommended the following criteria which is incorporated in the House proposal: A minimum of 20 years creditable service; retired for more than 10 years; receive a pension that is less than 80% of the average active employee salary for the system from which you are retired. Accidental and ordinary disability retirees are eligible regardless of years of service. Surviving spouses are also eligible, if their respective spouse would have met the eligibility criteria.

When establishing the eligibility criteria, the Commission recognized that most retirees with fewer than 20 years of creditable service have substantial private sector work history, qualifying them for larger Social Security benefits and, in many cases, private sector retirement benefits. Career public employees receive smaller Social Security benefits (if any) and rely more heavily on their public pension as a result.

To make sense of the pension criteria we are providing the following example: In 2024 the average State employee salary was \$84,500 and Teacher salary \$85,600. Therefore, retirees meeting the criteria with an annual pension of less than \$67,600

and \$68,480 respectively would be eligible for the Enhanced COLA. The earnings threshold will increase with the respective average salaries in each retirement system.

Under the proposal, the Enhanced COLA provides the additional annual benefit at three different thresholds. **For details, see pg. 19 Key Features.**

It is important to point out that, like the traditional COLA benefit, each Enhanced COLA benefit becomes a permanent part of a retiree’s pension. As we have previously reported, the cumulative nature of the COLA is a benefit secured by *Mass Retirees* in the mid-1970s and remains somewhat unique to Massachusetts. In most other jurisdictions the COLA is treated as a fixed one-time bonus and is often capped at a few hundred dollars annually.

Under the language contained in the House’s proposal, the Enhanced COLA would take effect on January 1, 2027. As this is a new benefit with a unique eligibility criterion, implementation of the Enhanced COLA is going to take some time. This is similar to the delay in the implementation for the state’s Basic Life Insurance benefit, which was passed into law in 2024 but did not take effect until 2025. As with any new benefit, implementation challenges are to be expected.

As is the case with the COLA Reserve Fund, adoption of the new Enhanced COLA benefit is also local option.

COLA BASE FOR STATE AND TEACHERS’ RETIREMENT SYSTEMS

The one main difference in policy between the initiative developed between our Association and that proposed by the House is an increase in the COLA base for the State and

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JIM VIEIRA WITH PRESIDENT. FRANK VALERI (2024 ANNUAL MTG)

REMEMBERING MIDDLESEX VP JIM VIEIRA

Celebrating His Life in Public Service

Metropolitan District Commission. Following his retirement, Jim served as the fifth member on the Medford Retirement Board. He had served on the Board for the past 25 years and during his tenure was also an active member of the Mass Association of Contributory Retirement Systems, as an Executive Board member. Jim also held the position of Seargent at Arms for the Association.

“Having known Jim personally and professionally for decades during our careers in public service and throughout our retirement years, I’ll miss him as a friend who I could always turn to for sound advice and very much appreciated his sincerity and his respect for others,” comments President Frank Valeri.

Vieira, an Air Force veteran, who has remained active in local veteran affairs, served as past Commander of the Medford Post 45 American Legion. He also served as Grand Knight and as the Faith Navigator for the Knights of Columbus - Medford Council #141, and maintained countless other dutiful achievements.

James was very proud of his Cape Verdean and Native American heritages, his score on the golf course, and foremost, his family.

Jim married the love of his life Joyce A. (Gonsalves) Vieira with whom he shared 55 years of marriage, and was a devoted husband and father in raising their two daughters, Lori and Michelle and blessed with several loving grandchildren.

We’re saddened to report that our **Middlesex District VP Jim Vieira** passed away on May 11, 2026. Jim Vieira was elected Middlesex District Vice President at the Association’s 2024 Annual Meeting.

Jim came to the Association after an outstanding 30 career in public service, retiring as the Director of Human Resources of the Commonwealth’s



PAC FUNDRAISER: ANOTHER SUCCESS

THANK YOU TO THOSE WHO DONATED

During this spring fundraising drive, members demonstrated their generosity to the request for donations by the Association’s political committee, the Retired Public Employees PAC. “Thanks to those members who voluntarily donated to the PAC’s work,” adds its Treasurer Shawn Duhamel. “They have never failed to answer the call, making this drive another success.”

While organized and maintained separately from *Mass Retirees*, the PAC contributes significantly to the Association’s overall mission, furthering its legislative and educational/information programs. “As you can see from this issue of *The Voice*, we’re facing major health care and COLA challenges,” continues Duhamel.

“*Mass Retirees* success on these and other public retiree issues depends on both a strong and engaged membership, as well as having the financial resources required to win the anticipated fights. And, the PAC plays an essential role in that regard.”

Least we forget, this is an election year for the State Legislature. In addition to being used to support candidates who stand with public retirees, the PAC is also tapped to fund membership engagement and outreach. Facilitating our Area Meetings is just one example.

The fact remains that a well-funded PAC gives us the ability to fight for you and win. It goes hand-in-hand with a strong, informed, and engaged membership.



REMEMBER: It’s never too late to donate and help. So please consider doing so. There are **3 ways you can donate:**

1. Mailing your check payable to: the *Mass Retirees PAC*, at **11 Beacon St, #309, Boston, MA 02108;**
2. Online at: **www.Massretirees.com/pac**
3. or using the QR Code shown above.

And, thank you in advance for your donation.

COLA

CONTINUED FROM PAGE 14 ►

Teachers' Retirement Systems. Set at \$13,000 since 2012, our initiative sought to increase the base to \$16,000 starting in July 2026 (FY27).

To do so, the Commonwealth would have to upfront the \$1.8 billion in unfunded liability and hundreds of millions in new annual costs carried by the new benefit level. Each \$1,000 increase in the State/Teacher COLA base carries a price tag of \$600 million in total liability – a cost similar to the total cost of the Enhanced COLA.

Given the costs involved, the House opted to focus on establishing the Enhanced COLA benefit as soon as possible – a benefit geared toward helping those most in need. For FY27, State and Teacher Retirees will receive a 3% COLA on the current \$13,000 base.

However, the reform measure sets a new process for increasing the State/Teacher COLA base in \$1,000 increments utilizing the COLA Reserve Fund. Once the Reserve contains sufficient funds to cover the

full upfront cost of each incremental increase, the COLA base will be increased accordingly.

As contained in the appendix of the Special Commission's report, had the Commonwealth dedicated 10% of excess gains toward the COLA starting in 2014, the Reserve Fund would have held a balance of more than \$4 billion by 2024 – an amount sufficient to fund a \$19,000 State/Teacher COLA base in perpetuity.

At the local level, the COLA base has been set by a vote of the retirement system and the respective legislative body since 2010. The average local COLA base is now just over \$17,000 with a number of systems approving increase for FY27 (see related story, pg. 9).

Like the State and Teachers' Retirement Systems, the composite analysis provided by PERAC of the 102 local retirement systems demonstrates that 10% of excess investment gains dedicated to a COLA reserve fund from 2014-2024 represents the cost of a \$7,000 increase in the average local COLA base during the same period.

"The funding progress of our 104 public retirement systems over the past 41 years has been extraordinary. Not accounting for 2025, which was another year of double-digit investment returns, a growing number of systems are at or quickly nearing fully funded status. It is about time that retirees are allowed to share in this success," points out Valeri. "I want to take a moment to thank PERAC Executive Director Bill Keefe, who chaired the Special Commission, and his staff for the hard work they put into the report and recommendations. Especially, the proposal would not have come together without the input of Chief Actuary John Boorack and PERAC Assistant Deputy Director Patrick Charles."

Duhamel adds, "We believe the COLA Reform measure passed by the House strikes the right balance between fiscal responsibility and putting these trust funds to work for retirees."

After all, these funds were created for the exclusive benefit of the public retirees who have paid into the retirement system and earned a reliable pension benefit."

GLP-1

CONTINUED FROM PAGE 10 ►

Ozempic is not expected to be included, as the program is focused

specifically on weight management rather than diabetes treatment.

POTENTIAL ELIGIBILITY REQUIREMENTS

While final details are still being released, Medicare beneficiaries are expected to need enrollment in a Medicare Part D plan and prior authorization from their physician, demonstrating one of the following:

- A BMI of 35 or higher
- A BMI of 30 or higher with qualifying conditions
- A BMI of 27 or higher with pre-diabetes or certain cardiovascular conditions

Members already taking these medications may be able to qualify using the BMI they had when treatment began, even if they have since lost weight.

WHAT MEMBERS SHOULD DO NOW

Non-Medicare GIC members currently receiving GLP-1 medications through Vida Health should contact their primary care physician or specialist soon to ensure continuity of

care before the July 1 transition.

Medicare GIC members still have coverage through the end of 2026, but it is a good idea to begin discussing the potential Medicare

GLP-1 Bridge Program with your health care provider now to determine whether you may qualify if and when the program moves forward.

We will continue monitoring these developments closely and provide updates as additional information becomes available, provide updates in our weekly emails, hotline messages and our other media outlets.

MEDICARE DRUG PRICE NEGOTIATIONS PROGRESSING

Earlier this year (January *Voice*) we reported on the status of the Medicare Drug Price Negotiation Program that is administered by the federal CMS (Centers for Medicare & Medicaid Services). Briefly we highlighted CMS's final implementation of the 1st cycle drug prices, that took effect this past January, and its announcement of the negotiated maximum fair price (MFP) for the 15 drugs included in the 2nd cycle that will be effective this coming January (2027). Please refer to our January *Voice* for a complete listing of the 25 drugs in the 1st and 2nd cycles.

Since then the CMS has implemented the program's 3rd cycle of 15 drugs, with a 4th cycle also planned. Among the factors for selecting a drug in the program is determining whether no generic or biosimilar competition exists. Also, CMS ranks negotiation-eligible drugs according to the highest total expenditure for drugs payable under Medicare Part B and/or Part D.

Listed here are the 15 drugs whose MFP are now being negotiated between CMS and the participating drug manufacturers, along with the commonly treated conditions for which the drug is prescribed and the drug's manufacturer. Some have familiar names such as Trulicity, Botox and Rexulti.

It must be noted that CMS lists a 16th drug, Tradjenta, that was originally negotiated as part of the program's 2nd cycle. It is now being renegotiated in the 3rd cycle.

As done in the 1st and 2nd cycles, CMS has conducted extensive data

CMS DRUG NEGOTIATIONS: 3RD CYCLE

SELECTED DRUGS

DRUG NAME	COMMONLY TREATED CONDITIONS	PARTICIPATING MANUFACTURER
Anoro Ellipta	Chronic obstructive pulmonary disease	GlaxoSmithKline
Biktarvy	Human immunodeficiency virus type 1 infection	Gilead Sciences
Botox; Botox Cosmetic	Chronic migraine; Overactive bladder; Spasticity; Other movement disorders	AbbVie
Cimzia	Crohn's disease; Plaque psoriasis; Psoriatic arthritis; Rheumatoid arthritis	UCB
Cosentyx	Plaque psoriasis; Rheumatoid arthritis	Novartis Pharmaceuticals
Entyvio	Crohn's disease; Ulcerative colitis	Takeda Pharmaceuticals
Erleada	Prostate cancer	Janssen Biotech
Kisquali	Breast cancer	Novartis Pharmaceuticals
Lenvima	Thyroid cancer; Endometrial cancer; Liver cancer; Kidney cancer	Eisai
Orencia	Psoriatic arthritis; Rheumatoid arthritis	Bristol-Myers Squibb
Rexulti	Major depressive disorder; Schizophrenia; Agitation due to Alzheimer's disease	Otsuka Pharmaceuticals
Tradjenta	Type 2 Diabetes	Boehringer Ingelheim Pharmaceuticals
Trulicity	Type 2 Diabetes; Cardiovascular disease	Eli Lilly
Verzenio	Breast cancer	Eli Lilly
Xeljanz; Xeljanz XR	Psoriatic arthritis; Rheumatoid arthritis; Ulcerative colitis	PF PRISM CV
Xolair	Asthma; Chronic spontaneous urticaria	Genentech

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SUPREME COURT ALLOWS CMS PROGRAM TO CONTINUE UNABATED

Since the federal Inflation Reduction Act (IRA) was enacted in 2022, we have been reporting on the campaign in the courts, being waged by “Big PhRMA” (Pharmaceutical Research and Manufacturers of America) to dismantle the CMS Drug Price Negotiation Program.

PhRMA’s arguments, including that the law violated the industry’s free speech and due process rights,

have been largely unsuccessful, forcing the drug manufacturers to petition the U.S. Supreme Court to hear their arguments.

This past May, the Supreme Court refused to take up separate appeals brought by six drug manufacturers - AstraZeneca, Boehringer Ingelheim, Bristol Myers Squibb, Jansen, Novartis and Novo Nordisk. It means that the favorable decisions

by the lower federal courts remain in full force and effect, allowing the Program to continue unabated.

According to Association Counsel Bill Rehrey, “This decision by the Supreme Court effectively closes off the industry’s best remaining path to dismantling the Program through the courts. This is a major victory for all who are seeking solutions to lower drug prices.”

CMS

CONTINUED FROM PAGE 17 ►

and information gathering from the public as well as the participating drug companies. This included multiple patient-focused and clinical-focused public engagement

sessions, as well as optional meetings between CMS and participating drug companies.

As we went to press, CMS will be sending an initial offer of the MFP for each drug to the participating drug manufacturer who will then have to accept CMS’ initial offer or

propose a counteroffer. If a counteroffer is made, negotiations continue through the summer, with CMS issuing its final MFP offer by September 30th.

For updates, please look to our weekly emails, hotline messages and other media outlets.

Legislative

CONTINUED FROM PAGE 4 ►

Finally, with the House and Senate completing their respective budget debates, negotiations have moved into the conference committee process, where differences between the two budget proposals, including COLA Reform (see Page 1) will be resolved before a final FY27

BUDGET CONFERENCE COMMITTEE UNDERWAY

budget is sent to the Governor.

Both the House and Senate versions include funding for the annual 3% COLA for state and teacher retirees, continued funding for the GIC, and implementation of the Commonwealth’s new triennial pension funding schedule. These major items need not be resolved

in conference and will be included in the House/Senate compromise budget.

As always, the Association will continue monitoring legislative and budget developments closely throughout the summer and will keep members informed as activity continues on Beacon Hill.

Elections

CONTINUED FROM PAGE 12 ►

Treasurer **Debra Tingus**. The remaining members are **Gregory Hargadon**

and **Barbara Costa**. Due to the recent passing of retired Fire Chief **Joe Davis**, there is a vacancy for one of the elected positions. **Chief Davis** was the first elected member serving on the Board since 1986.

The Board’s retirement director is **Ed Masterson**.

*denotes chair

COLA REFORM PASSED BY HOUSE

FOR ACCOMPANYING
TEXT SEE PAGE 1 ►

Key Features

- **Creates Cost-of Living Reserve Fund** (“Reserve Fund”) for future state/teacher COLA benefit payments and liabilities.
Local Option: Allows a local retirement system, with the approval of its local legislative body, to create a Reserve Fund
- **Requires that ten percent (10%) of PRIT’s Excess Investment Income (Gains)** for the state/teachers’ retirement systems in a Calendar Year be transferred into their Reserve Funds.
If a local system elects to create a Reserve Fund, it is obligated to transfer a 10% minimum of its Excess Investment Income (Gains) into its Fund
- **Creates an Additional (Enhanced) Benefit** 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.

Accidental/Ordinary Disability Retirees & Survivors are eligible: **See Details On Page 14**

The Enhanced Benefit becomes a permanent part of a retiree’s pension.

Local Option: Allows a local retirement system, with the approval of its local legislative body, to create the Enhanced Benefit, subject to the same eligibility criteria and additional benefit payments as the state and teachers’ retirement systems.

- **Triggers an increase in the State/Teachers’ COLA Base in \$1K increments** based upon the funds available in their Reserve Fund.

PLEASE VISIT MASS RETIREES WEBSITE

SPRING MEETINGS HIGHLIGHTED & OBITUARY LIST UPDATED



According to Meeting Coordinator Leo Delaney, our Spring area meetings produced a strong member turnout (see photo from the Florian Hall meeting this May). You can see what he means by visiting the Association website and enjoying the photo spreads from each meeting.

Also, we have updated our tribute to our members who have recently passed away. Again this tribute will be updated quarterly.

Visit www.massretirees.com and click either **EVENTS** or **IN MEMORIAM**



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THE VOICE

July 2026

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We Support Our Troops.



NOT A MASS RETIREES ASSOCIATION MEMBER?

Join today using the links below!

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:



RETIREES



EMPLOYEES

Retirees join today at www.MassRetirees.com/join
Active employees can become an Associate Member at www.MassRetirees.com/subscribe

Or join by mailing us at: Mass Retirees, 11 Beacon Street, Suite 309, Boston, MA 02108