

# MassHealth Member Advisory Committee (MAC)

## Meeting 6 (virtual)

December 2, 2025, from 12:00 pm to 2:00 pm

### Attendance

- 16 out of 17 MAC members were in attendance
- MassHealth: Jarred Damico, Malinda Ellwood, Viveka Prakash-Zawisza, Celia Segel
- UMass Chan Team: Hilary Deignan, Cassidy DiRamio, Catie Geary, Jennifer Hitchcock, Olivia O'Brien

### Welcome and Housekeeping

#### MAC Meeting Schedule

- Meeting #7 will be on Tuesday, February 24<sup>th</sup>, from 12pm to 2pm in Westborough.
- This meeting will be in-person (with the option to join virtually if preferred).
- MassHealth will follow up with information about meeting logistics.

MassHealth Educational Opportunities:

- The MassHealth 101 session in October was well-attended by MAC members.
- MassHealth will continue to work with the MAC to identify additional education topics that would be helpful to cover.

#### Meeting 5 Reflection Survey Results

- Survey feedback from Meeting 5 was very positive.

#### *Response to MAC Feedback*

- MassHealth will begin holding optional “debrief” drop-in sessions the week after each MAC meeting.
- MassHealth will continue to work with the MAC to maintain the right balance of information-sharing, learning opportunities, and discussion in each meeting.
- MassHealth proposes that the MAC continue discussions around customer service and disability at a future meeting.

## Objectives for Meeting 6

1. Understand the potential impact of the One Big Beautiful Bill Act (OB3) on MassHealth and discuss initial ideas for implementation and communication.
2. Learn about the most recent MassHealth Program Advisory Committee (MPAC) and MassHealth Delivery System Reform Advisory Committee (DSTAC) meetings attended by MAC representatives.
3. Review lessons learned from the MPAC and DSTAC meetings, identify next steps for stakeholder engagement, and discuss potential agenda items for 2026.

## Impact of the One Big Beautiful Bill Act (OB3)

All state Medicaid programs, including MassHealth, are required to implement new federal policy changes included in the One Big Beautiful Bill Act (OB3). Most changes go into effect in phases between October 2026 and October 2028.

Jarred Damico, Deputy Chief Operating Officer, gave an overview of OB3's potential impact on MassHealth members, with a focus on coverage changes for certain immigrants, work requirements, and 6-month renewal requirements. MassHealth is currently working to develop thoughtful implementation strategies while awaiting further direction from the Centers for Medicare and Medicaid Service (CMS).

Moving forward, MassHealth shared three guiding principles for implementation:

1. helping eligible members keep their coverage,
2. coordinating closely with stakeholder and community groups, and
3. complying with federal law.

MassHealth also reiterated that members should continue to get care, refill prescriptions, and go to appointments. Members will hear directly from MassHealth before anything changes about their coverage.

## Discussion

Most of the initial discussion focused on work requirements:

- Preliminary implementation efforts are underway to meet required timelines, but MassHealth is waiting on additional federal guidance in many areas.
- Early estimates indicate that more than three hundred thousand MassHealth members will likely be impacted by these requirements.

- Some populations will not be affected by work requirements, for example, children, people age 65+, people with a disability, pregnant individuals, and individuals who are “medically frail.”
  - MassHealth will share more on impacted populations when available.
- MAC members were supportive of MassHealth’s plans to use electronic verification processes whenever possible to verify members’ compliance.
- MAC members would like to see a clear exemption process (for example, for a member who became injured and unable to work).
  - MassHealth is still awaiting more clarification from CMS, but anticipates that there may be pathways to seek, e.g. a hardship exception.
- MassHealth continues to be in communication with CMS about timelines as well as the need for further guidance.

### *Feedback from Communities on OB3*

Many MAC members reported concern and confusion in their communities about the impact of OB3, including general fears about losing benefits. Members are also anxious about current or prospective care being interrupted (e.g., some people are hesitant to take time to set up provider relationships now when they may be disrupted in the future).

Generally, the MAC felt that the implementation update shared by MassHealth was helpful in addressing many of their concerns, and emphasized the importance of ongoing communication from MassHealth to members.

MAC members also stressed the importance of sensitivity when framing the potential impact of OB3 on communities, including:

- Acknowledging that even seemingly minor policy changes can create real challenges for members and their families
- Being cognizant of certain terms that may have unintended negative connotations, for example, “Substance Use Disorders (SUD)” should be used in place of “drug addiction”
- References to “cost-sharing” should be reframed as “cost-burdens”
  - More should also be done to educate members on industry terminology, for example, helping individuals understand the differences between terms like cost-sharing, co-pays, co-insurance and deductibles.

### *Discussion: Member Outreach and Communications*

*MAC members suggested communicating with MassHealth members as early as possible to help combat confusion and allay fears about losing benefits:*

- MAC members acknowledged the continued uncertainties around implementation as well as potential challenges associated with communicating the complexity and nuances of the new policy changes, but many felt it was important to get communication out to help build trust and promote transparency.
- Messaging should be simple and frank: MassHealth should be upfront on aspects of implementation that are unknown or dependent on forthcoming federal guidance.
  - Communications should reference the [MassHealth Federal Updates and Impact | Mass.gov](#) page to help members stay informed as policies evolve.
- Everyone also has a responsibility to continue messaging their communities about the importance of members keeping their information up to date with MassHealth.

*MassHealth could consider targeting messaging based on impacted groups, such as:*

- Identifying and outreaching members subject to work requirements, ensuring members have plenty of lead-time so that they are informed of these policy changes well in advance of any potential deadlines for compliance
- Making efforts early on to outreach any members for whom additional information is needed in order to determine whether they'll be impacted by the work requirements
- Reassuring member groups who will not be impacted by OB3 changes

Separately, members advised that caretakers of MassHealth members be included in these efforts, as many may not have formalized relationships but play an important role in helping their families stay informed.

- (MassHealth reminded the group that individuals can also elect to have MassHealth share information with designated individuals (caretakers, etc.): [Permission to Share Information \(PSI\) Form | Mass.gov](#).)

*MassHealth should use a variety of modalities to communicate with members:*

- The blue envelope campaign used for the unwinding of the Public Health Emergency worked well and could potentially be replicated with a different color.
- While members expect written communication from MassHealth, other options should also be used, such as texting and messaging via MyServices:
  - For example, the Department of Transitional Assistance (DTA) sent a text about SNAP changes that MAC members found helpful.
  - Separately, one member suggested MassHealth consider adding a chat feature to make MyServices more accessible for people who are Deaf or Hard of Hearing (HOH).

*Partnerships are key:*

MassHealth should continue to work with other stakeholders on planning and communication, as hearing messaging from a trusted source may help members feel supported when receiving the information.

Partnerships should include:

- Community-based organizations
- Churches
- Support groups
- Local (and/or regional) Facebook groups
- Provider groups
- Other state agencies

Some members also suggested that MassHealth consider offering in-person and virtual opportunities to share information directly with MassHealth members, such as:

- Hosting Town Halls
- Partnering with MAC members to hold regional outreach meetings across the state where members could learn and share their experiences
- Collaborating with other state agencies, organizations and community leaders to offer one-stop events or resource fairs for members to access a variety of services, including food supports and resources for finding work and volunteer opportunities in compliance with the new requirements (similar to previous events targeting veterans and other at-risk populations)

## **MAC Engagement with Other Stakeholder Groups**

- MAC representatives attended a recent meeting of the Delivery System Transformation Advisory Council (DSTAC) as well as the first meeting of the MassHealth Program Advisory Committee (MPAC).
- At the next meeting, MAC members will share their updates and think about how best to engage with other stakeholder groups moving forward.
- Other potential agenda items for next year:
  - 1115 waiver programs, such as care management
  - Continued discussion on customer service and disability

- Ongoing discussions on OB3 communication and implementation

## Wrap Up and Closing

### Next Steps

#### MassHealth will:

- Send out Meeting 5 and Meeting 6 notes for review
- Follow up on the acronym guide
- Continue tracking goals, agenda suggestions, and parking lot items

#### MAC members will:

- Complete the Meeting 6 Reflection Survey
- Review the minutes for Meetings 5 and 6

#### Parking Lot:

- One member had concerns about the state of gender affirming care
  - MassHealth clarified that OB3 does not include changes to gender affirming care, but noted that there have been several federal communications targeting these services
  - MassHealth reiterated that there have been no changes made to current state policies (which can be accessed at: <https://www.mass.gov/info-details/gender-affirming-care-covered-by-masshealth>)