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COMMONWEALTH OF MASSACHUSETTS
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Dan Brillman
Deputy Administrator, CMS
Director, Center for Medicaid and CHIP Services
7500 Security Boulevard, Mail Stop: S2-26-12
Baltimore, MD 21244

August 27, 2026

Dear Deputy Administrator Brillman:

In accordance with the MassHealth Medicaid and CHIP Section 1115 Demonstration (Project Numbers 11-W-00030/1 and 21-00071/1) Special Terms and Conditions (STCs) Item 3.9, the Massachusetts Executive Office of Health and Human Services (EOHHS) hereby notifies the Centers for Medicare and Medicaid Services of its intent to terminate its "TANF and EAEDC Recipients" 1115 Demonstration Expenditure Authority. As such, Massachusetts is formally requesting the termination of its Expenditure Authority 5 and corresponding STC 4.5 in its 1115 Demonstration program.

Enclosed with this notification letter is EOHHS's revised Transition and Phase-Out Plan, which describes the Commonwealth's approach to terminating this authority and transitioning affected members to other MassHealth coverage for which they may be eligible.

A public comment period regarding EOHHS's plan to terminate Expenditure Authority 5 and corresponding STCs 4.5 in its 1115 Demonstration program occurred from June 5, 2026 to July 6, 2026, and a tribal consultation on this topic occurred via email on June 5, 2026 (in accordance with STCs 3.9 and 3.13).

MassHealth received 15 comments during the public comment period mentioned above. The main topics of the comments include the following:

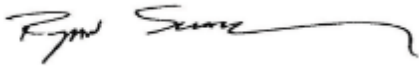
- **Concerns for the effect on rest homes:** Several comments expressed concerns regarding rest home funding through the Department of Transitional Assistance (DTA), including stability of the finances of rest homes and coverage for residents. MassHealth appreciates the concerns from this important group of stakeholders. MassHealth and DTA have discussed how to ensure DTA clients maintain coverage that they are eligible for.
- **Potential loss of health coverage:** Commenters expressed worry over potential health coverage loss as members transition from referred to direct MassHealth eligibility. Through advance

noticing, enhanced systematic changes, and coordination with DTA as well as partners and stakeholders, MassHealth is committed to assisting individuals transitioning from referred to direct eligibility in a way that limits any gaps in coverage and ensures eligible members keep their health care coverage. MassHealth will work with stakeholders and partners to train community-based organizations and certified application counselors who can assist individuals in their community with their applications and ensure they are following timelines.

- **Clear, strategic, member-friendly communications and outreach:** Commenters requested an enhanced and comprehensive outreach and communication plan to support members and stakeholders. Many commenters mentioned the need to implement strategies like a dedicated phone line and warm handoffs between MassHealth and DTA. In response, our phase out plan now details additional strategies for assistance for members during this transition. We will set up a dedicated phone line as well as warm handoffs for individuals affected by this change. We will send multiple notifications through numerous modalities including mail, text message, email and phone calls. Additionally, we will continue to work with stakeholders and advocates through the phase out to monitor communications and pivot as needed to support members.

If you have any questions, please contact Elizabeth LaMontagne, Chief Operating Officer at Elizabeth.M.LaMontagne@mass.gov or by phone at 617-519-6327.

Sincerely,



Ryan Schwarz, MD, MBA
Assistant Secretary for MassHealth

Cc: Elizabeth LaMontagne, MassHealth Chief Operating Officer
Sarah Aker, Acting Director, CMS State Demonstrations Group
Rabia Khan, CMS Project Officer