

### The Commonwealth of Massachusetts

# Executive Office of Health and Human Services Department of Public Health

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Maura T. Healey Governor Kiame Mahaniah, MD, MBA Secretary

Kimberley Driscoll Lieutenant Governor Robert Goldstein, MD, PhD
Commissioner

Commonwealth of Massachusetts Abortion Task Force Meeting Minutes Thursday, November 13, 2025 5:00-6:00 PM (virtual)

#### Members Present

- Jill Clark
- Cori O'Neill
- Christie Jurena
- Tara Kumaraswami
- Claire Teylouni
- Feyla McNamara
- Maureen Paul
- Leora Cohen-McKeon
- Kristie Monast
- Chloe Zera
- Deb Bartz
- Elizabeth Janiak

#### Members Absent

- Mary Beth Muetz
- Dominique Lee

#### Others Present

- Alison Gray, Consultant, Massachusetts Department of Public Health
- Roberta Moss, Massachusetts Department of Public Health

#### 1. Call to Order and Determination of Quorum

Jill Clark called the meeting to order and determined that a quorum was present.

#### 2. Approval of Minutes – October 16 and October 30 Meetings

A motion was made to approve both sets of minutes. All members present voted to approve.

#### 3. Administrative Updates

Most members have submitted the required forms and training certificates. Remaining individuals will receive reminders.

#### 4. Scope of Task Force Recommendations

Members reviewed the previously discussed risk categories, focusing on which should be explicitly included in the final recommendations report. The federal funding risks discussed include: 340B pricing, Medicaid reimbursement, research funding, graduate medical education (GME), loan forgiveness programs, and Title X funding. Other risks discussed include medication access and supply chain risks; data access and surveillance (e.g., public health data, state-level data collection); and physical, criminal, and digital risks (e.g., PHI exposure, legal exposure for providers, protection of clinics and staff).

When discussing research funding, members differentiated between abortion-specific research, broader maternal health research, and research indirectly supporting abortion-related outcomes. Consensus leaned toward including research as secondtier yet still important, particularly for tracking impacts on maternal mortality, contraception access, racial health disparities, and ongoing studies (e.g., medication abortion regimens).

There was strong consensus to include threats to GME funding, which could significantly affect access to trained providers and academic medical centers. Regarding loan forgiveness, members viewed it as potentially vulnerable and wished to include it as a second-tier priority. Title X funding was also included as a second tier; although these funds do not directly impact abortion, they are essential to organizational financial health.

Members prioritized categories warranting initial focus based on their immediacy and likelihood of federal action. There was broad agreement that medication access (including threats to mailing or prescribing mifepristone, misoprostol) is a primary priority. Medicaid reimbursement was universally viewed as a top-tier priority due to immediate and significant implications for provider sustainability.

## 5. Topics not reasonably anticipated by the Chair of the Abortion Task Force within 48 hours of the meeting.

There were no additional topics.

#### 6. Discussion of agenda items for next meeting

- Members were asked to send materials, strategies and documents that have been developed to address the three priority areas: Medicaid reimbursement, medication access, and supplies access. All materials must be sent to Alison Gray by Monday, November 17, 2025. Alison will compile information and send it to Task Force members by Tuesday, November 18, 2025.
- Members were reminded that the next meeting will be held on Thursday, November 20, 2025. There is no meeting on Thanksgiving.

#### 7. Adjournment

The meeting was adjourned at 6:00 PM