GROUP INSURANCE COMMISSION MEETING
Thursday, October 16, 2025
8:30 A.M.-10:00 A.M.

Meeting held virtually through online audio-video platform (ZOOM) and accessible on the GIC's YouTube channel.

MINUTES OF THE MEETING

NUMBER: Six hundred and ninety-six
DATE: October 16, 2025
TIME: 8:30 A.M.
PLACE: Meeting held virtually through online audio-video platform (ZOOM) and accessible on the GIC's YouTube channel

Commissioners Present:
VALERIE SULLIVAN (Chair, Public Member)
BOBBI KAPLAN (Vice Chair, NAGE)
MATTHEW GORZKOWICZ (Secretary of Administration and Finance) Designee: Dana Sullivan
MICHAEL CALJOUW (Commissioner of Insurance) Designee: Rebecca Butler
EILEEN P. MCANNENY (Public Member)
JANE EDMONDS (Retiree)
JASON SILVA (Massachusetts Municipal Association)
GERZINO GUIRAND (Council 93, AFSCME, AFL-CIO)
KRISTIN PEPIN (NAGE)
TAMARA P. DAVIS (Public Member)
MARTIN CURLEY (Public Safety)
EDWARD T. CHOATE (Public Member)
MELISSA MURPHY-RODRIGUEZ (Massachusetts Municipal Association)
ANNA SINAIKO, Ph.D. (Health Economist)
DEAN ROBINSON (Massachusetts Teachers Association)
CATHERINE WEST (Public Member)

I. Introduction and Approval of the Minutes

At 8:30 A.M. The Chair started the meeting and announced the Commissioners in attendance.

The Chair turned the meeting over to Executive Director Veno to review the agenda for the meeting.

The Executive Director stated that there would be an update regarding the budget deficiency and an update on GLP-1's. He noted there will be two cost saving initiatives starting in January 2026.

The Chair asked for a motion to approve minutes from the previous Commission meeting held on September 18, 2025. Vice Chair Kaplan motioned to approve, and Commissioner Choate seconded the motion. The General Counsel took a roll call vote.

Chair Sullivan voted yes.

Vice Chair Kaplan voted yes.

Designee Sullivan voted yes.

Designee Butler voted yes.

Commissioner Choate voted yes.

Commissioner Curley voted yes.

Commissioner Davis abstained.

Commissioner Edmonds voted yes.

Commissioner Guirand voted yes.

Commissioner McAnneny abstained.

Commissioner Pepin voted yes.

Commissioner Robinson voted yes.

Commissioner Rodrigues voted yes.

Commissioner Silva voted yes.

Commissioner Sinaiko voted yes.

Commissioner West voted yes.

The motion passed.

II. The Executive Director's Report

The Executive Director went through highlights of the report. He noted that Jennifer Hewitt had joined the GIC as the Chief Financial Officer (CFO). Regarding the Legislature, a veto filed by the Governor resulting in a $27.5 million deficiency in the GIC budget, along with the request from the Governor that the Commission consider eliminating coverage for GLP-1s drugs for weight loss mid-year, still stands. A separate bill was filed to allow the GIC to make mid-year changes to coverage, which is still pending, and

there has been no activity on it. Regarding communication changes, the GIC will remove the online forms managed via DocuSign in December of 2025, since the online forms have become duplicative of the MyGICLink member portal. The goal is to move all online traffic through the portal.

Vice Chair Kaplan asked how much savings will be gained by not renewing the Docusign contract that is no longer needed due to the online form removal. The Executive Director stated he did not know but would provide that information after the meeting.

II. Cost Savings Update

Presented by Executive Director Matthew Veno and General Counsel Andrew Stern

The Executive Director reviewed the existing $77 million FY26 budget deficiency, created by the policy decisions made in the budget by the Legislature and Governor.

The Executive Director stated that Commissioner West had asked at the last meeting what amount of the FY25 deficiency was due to GLP-1 medications. He stated that out of the $237 million shortfall, approximately $61 million was attributable to the growth of GLP-1's use for weight loss, roughly a quarter.

The Executive Director stated that the GIC is looking for a solution that would address this FY26 budget deficiency while also remaining consistent with the GIC's mission and objectives, as well as a solution that is in line with the contracting authority of the GIC. He reminded Commissioners that the GIC has been evaluating a comprehensive weight management program and stated that an agreement was signed to implement such a program, starting on January 1, 2026. This would be required for those members on GLP-1 medications to remain on them, as well as any member seeking to be newly prescribed a GLP-1 medication for weight loss. This program would be considered a center of excellence for this area. The Executive Director provided an overview of what this program would do and how it works.

Evaluation goals for the center of excellence selection were presented. Four vendors were evaluated. It was announced that Vida Health was the selected vendor. Vida will become the sole prescriber for GLP-1's for obesity treatment. A multi-disciplinary team will work with each member to develop a personalized treatment plan. The GIC expected that there will be an annualized savings of $30 million.

Under Vida, members who are currently on GLP-1 medications will maintain their prescription if they stay engaged with Vida and as long as it remains medically appropriate.

The Vice Chair inquired about the specific requirements and whether anyone can enroll in Vida. She also asked about member privacy of medical records. She asked how many hours per week will be required and what happens if a member misses a requirement.

The Executive Director said that some of the questions are ones that will be answered during the implementation preparation in the coming months. He stated that the medical records are protected by state and federal privacy laws, but he would defer to the General Counsel to answer more comprehensively. He stated that Vida has incentives to keep members engaged so that the outcomes are improved. Vida is paid by a per-participating-member-per-month amount, so they will also want to keep as many members in their program as possible.

The General Counsel stated that members who are currently on GLP-1 medications will have a 90-day transition period, but they will have to participate in the program to maintain the prescriptions. In terms of privacy, it is protected by Business Associate Agreements that require all parties to maintain HIPAA protection standards.

The Vice Chair asked whether people will be allowed to use their current places for labs and how information will be shared among providers.

The General Counsel said that members aren't going to be steered to a particular lab but will need to share those results. Additionally, the hope is that there will be the opportunity for shared information on a regular basis between Vida and the primary care physicians. Vida has been in the business since 2014 and started with programming preventing diabetes.

Commissioner West asked about metrics and reporting. She stated that engagement is one metric that is important. In addition, reporting on outcomes is important, and she requested information on the specific metrics. She also stated that characteristics such as ethnicity and age need to be stratified. She requested regular reporting both to the GIC and to the Commission, suggesting a quarterly reporting cadence.

The General Counsel stated that regular reporting is required in the contract and provided a high-level overview of what types of metrics are being reported. He noted that 100% of Vida's fees are at risk. He indicated that it will take about a year before detailed data would be available.

The Executive Director stressed that one of the big reasons Vida was selected was their cultural competence and their focus on holistic support and consideration.

Commissioner Edmonds recognized that this is a concerning issue but noted that you cannot replace the clinical decision making of providers. She emphasized that if physicians are prescribing these medications, there has been deep consideration of whether they should be prescribed, and that should not be second guessed. She said that an oncologist's decision to prescribe a certain medication isn't second guessed and questioned why other physicians would be questioned here. She also underscored that these medications save lives, which should not be discounted.

The Executive Director stated that this is not a medical necessity review in the traditional insurance sense. This is not second guessing but putting the prescribing decisions in the hands of medical providers who are specifically specialized in this area of medicine, and, with the member's permission, they will collaborate with the treating provider. The Vida specialists have more in-depth knowledge of this area of medicine than most primary care providers. This is team-based care.

Commissioner McAnneny asked how Vida will interact with the pharmacy benefits manager and others to coordinate the care.

The Executive Director said that Vida is already integrated into the processes of CVS. He said that the details are ones that we will learn more about during implementation.

Commissioner Choate asked how many members are on GLP-1 medications for weight loss. He also asked about the expected drop off of members due to the program. Commissioner Choate emphasized that the number of members going off the GLP-1 medications is where the savings lies.

The Executive Director said that somewhere between 17 and 18 thousand members are using these drugs today.

The General Counsel said that all programs that were evaluated estimated about 30-40 percent will discontinue on the medications, but the expectation could be as high as 50 percent.

Commissioner Choate asked, based on any reference checks, what problems other groups had in implementing Vida's program. The General Counsel stated that this was not a procurement, and those kinds of reference checks were not conducted. The GIC spoke with WTW who has other clients using these programs and asked what the experience had been. Feedback was that it was positive.

Commissioner Sinaiko asked if there was an exception process for this program. The General Counsel said that he is not aware of any exceptions.

Commissioner Pepin asked if there is a cost to members. The Executive Director stated that there is no additional cost for the member.

Commissioner Robinson asked to see a copy of the contract. He also asked where the savings is expected to come from. He also asked what the GIC is doing to address the larger problem of pricing on these medications.

The Executive Director stated that all the clinical evidence supports a comprehensive plan including the medication, exercise, nutrition, etc. to maintain successful weight loss, and this program is providing that. When we are investing in these drugs, we want them to be successful and actualize sustained weight loss. This, over time, will reduce other health costs and ensure that limited resources as spent wiely.

Vice Chair Kaplan asked about those aged 18-26 and what the drop off rate is for that demographic. She also asked if Vida has experience with other public sector employers.

The Executive Director stated that there is an intensive effort to directly reach out to all members currently on GLP-1 medication, and they are paid to keep members engaged. He stated that he is unsure if they have public sector experience. Regarding the 18 to 26-year-olds, he stated he will see what information there is on this demographic.

Commissioner Robinson noted that the focus needs to be on pricing of these drugs for long-term success on costs. The General Counsel noted that a drop in costs is expected in the new year.

The Executive Director also presented an overview of the CVS Drug Savings Review Program. He explained that the new program will be implemented through CVS, and runs in the background as an additional clinical review that makes recommendations to prescribers for member-specific interventions, and a member is only impacted if their provider prescribes the recommended alternative.

Vice Chair Kaplan asked if there was a specific drug list for this program. The General Counsel said there is not, but it looks more at diagnoses and medications and interactions.

III. **Other Business and Adjournment**

The Chair asked for a motion to adjourn. Vice Chair Kaplan motioned, and Commissioner Choate seconded. The vote passed. The meeting was adjourned.