

COMMISSION MEETING

October 16, 2025



MassGIC



Group Insurance Commission

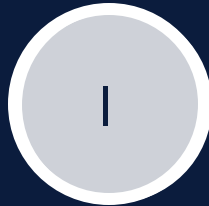


MA Group Insurance Commission

Public Notice: G.L. C-30A, Sec. 14, October, 2025

Agenda

- **I. Minutes, June 18, 2025 (VOTE)** 8:30-8:35
Valerie Sullivan, Chair
Andrew Stern, General Counsel
- **II. Executive Director's Report (INFORM)** 8:35-8:45
Matthew Veno, Executive Director
Members of Senior Staff
- **III. Cost Savings Update (INFORM)** 8:45 -9:30
Matthew Veno, Executive Director
- **IV. Other Business/Adjournment** 9:30-10:00
Valerie Sullivan, Chair
Matthew Veno, Executive Director



Approval of Minutes (VOTE)

Valerie Sullivan, Chair

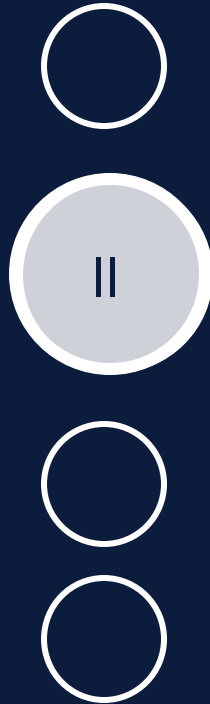
Andrew Stern, General Counsel



Motion

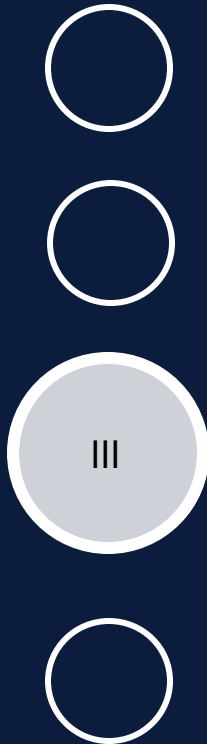
That the Commission hereby approves the minutes of its meeting held on September 18, 2025 as presented

- Valerie Sullivan, Chair
- Bobbi Kaplan, Vice-Chair
- Dana Sullivan (A&F Designee)
- Rebecca Butler (Designee for DOI)
- Edward Tobey Choate
- Martin Curley
- Tamara Davis
- Jane Edmonds
- Gerzino Guirand
- Eileen P. McAnneny
- Kristin Pepin
- Dean Robinson
- Melissa Murphy-Rodrigues
- Jason Silva
- Anna Sinaiko
- Catherine West



Executive Director's Report

Matthew Veno, Executive Director



Cost Savings Update

Matthew Veno, Executive Director
Andrew Stern, General Counsel

Review: Legislative Actions Have Created a Deficiency in the GIC's FY26 Budget

- The Governor's budget proposed line-item language to increase premium contributions for certain groups of state employees. That proposed language was not adopted, but the GIC's budget was not adjusted to reflect the rejection of the change.
- Governor Healey vetoed \$27.5 million from GIC's FY26 budget and requested the GIC eliminate coverage for GLP-1s to treat obesity mid-year (on 1/1/2026), while preserving coverage to treat other conditions (i.e. diabetes). A separate bill that would authorize the Commission to make this change is pending in the Legislature.
- In total, due to these legislative actions, the GIC's FY26 budget is now deficient by approximately **\$77M**.

Potential GLP-1 Savings Interventions

	Strategies	Cost/Trend	Considerations
Do not cover GLP-1 for obesity	Remove coverage of GLP-1s for the weight loss indication	- Substantial reduction in utilization and cost - Some members will access GLP-1s for other indications such as diabetes - Rebates and rebate guarantee will be impacted	- More restrictive than FDA guidelines - Member abrasion and pushback - Clinical benefits are lost
Weight Management program	- Implement program to assist members with weight management and require participation in program in order to gain access to GLP-1 - Contract with a vendor currently integrated with CVS to implement expeditiously - possibly on a pilot basis	- Programs can have high fees - May lead to increased cost if members remain on the drug or do not change behavior - Rebates and rebate guarantee may be impacted which would lead to lower savings	- These programs might eliminate coverage for some users - May be composed of elements that have not led to sustainable weight loss in the past. - Procurement would be required for non-CVS integrated vendor
BMI Increase for coverage eligibility	- Limit coverage of GLP-1s for weight loss to those with a higher BMI - Consistent with value-based design	Savings dependent on selected BMI threshold	- More restrictive than FDA guidelines - Rebate loss is higher than savings, making this option non-viable - Adds member abrasion
Utilization Freeze	Freeze access to GLP-1 for obesity to only those members who have filled the drug prior to 1/1/26	- Freezes cost at 2025 levels - Would expect an increase in utilizers prior to freeze start date	- Rebate loss is higher than savings, making this option non-viable - Current utilizers maintain coverage - Adds member abrasion for potential future utilizers
Cover with PBM criteria	- Coverage of GLP-1s for weight loss with prior authorization (PA) - GIC has implemented strongest available CVS PA criteria	Costs will continue to rise with supply and demand	- Broadest member access, least abrasive - Health benefits may lead to some cost reduction

Weight Management Vendor Goals

The GIC set key goals for evaluating a “center of excellence (COE)” vendor for weight loss management.

Evaluation Goals

Implement for
1/1/2026 to address FY26 budget
deficiency

Prioritize a solution that will lead
to meaningful short-term savings

Select vendors with simplified
implementation for 1/1/2026

Partner with a vendor that has
proven it can succeed with large
clients, diverse populations

Provide members with an elevated
experience and enhanced support
for their weight loss journeys

**Based on these criteria, the GIC evaluated four vendor partners
through CVS’s vendor partner ecosystem**

Vendor Selection Process

Vetting Process

- Closely evaluated four vendors with GIC background and GLP-1 experience
- GIC team met with each vendor to review capabilities, member experience, and program outcomes
- WTW and GIC reviewed financial projections using standardized underlying assumptions, including administrative fees

Evaluation Criteria

Service model & strategy

Experience with large clients
serving diverse populations

Financials
(Savings projection & ROI
guarantee)

Member impact

Organizational stability



**The GIC determined that Vida best met the criteria
to serve members**



Vida Health: Comprehensive Program for Obesity and Cardiometabolic Conditions

The GIC will be partnering with Vida Health for obesity & cardiometabolic conditions via partnership with CVS, effective 1/1/2026

Program Overview

Member support for their weight loss journey supported by physicians, endocrinologists, dietitians, mental health therapists, and care navigators

Tools and resources for members including scales, food and activity trackers, and exercise plans

Evidence-based obesity care plan with a focus on inclusivity, with culturally sensitive plans and a diverse support team

Vida will serve as sole prescriber for obesity GLP-1s. Members will need to engage with the program and have GLP-1s prescribed by a Vida medical provider to have coverage for these drugs for weight loss

Impact to the plan and members

Estimated GLP-1 net savings of \$30M annually; contract includes performance guarantees

Members will maintain access to GLP-1's if clinically appropriate and they are engaged in the program

Access to multidisciplinary team to assist with weight loss, whether through GLP-1s or other treatments

Member Journey & Experience with Vida

Member Journey with Vida - Days in Program

	0 90	90 180	180+
Focus	Complete onboarding, develop & initiate care plan	Engage in personalized care plan & treatment to biomarker goals	Goal attainment, maintenance, graduation
Clinical Goals	Craft clinical plan to lower weight, blood sugar, and blood pressure	Monitor & adjust care to achieve weight loss and cardiometabolic risk reduction	Support durability of clinical outcomes. Craft long term plan



Total Cost of Care / GLP 1 trend mitigation

**7 10%
Weight loss**

**Clinical control of A1c,
FBG, HTN, LDL**

Improved quality of life

CVS Drug Savings Review Program

The CVS Drug Savings Review program can produce savings to mitigate increasing prescription drug costs for the GIC's Active/non-Medicare population.

Program Overview & Member Impact

Additional clinical review that operates behind the scenes. CVS makes recommendations directly to prescribers, as appropriate

Focuses on age-appropriate management, dose optimization, drug interactions, duration of therapy

Uses evidence-based clinical standards to identify member-specific interventions that lead to improved drug therapies and savings

Program has been in place for the EGWP/Medicare population since the inception of the EGWP plan in 2016

Impact to the plan and member

Estimated annual plan savings
\$10 million

Member is only impacted if
prescriber decides to act on CVS
recommendation and member
changes drugs

ROI Guarantee:
Year 1: 2:1
Ongoing: 3:1

Next Steps

- **Feedback/questions** from the Commission
- **Implementation** The GIC will continue to work with Vida Health and CVS Health to implement the two programs
- **Continue monitoring** the legislature and Governor's actions for impact on the GIC's budget
- **Evaluate FY27 plan design options** for other potential actions to manage the FY26 budget deficiency



Other Business/Adjournment

Valerie Sullivan, Chair

Matthew Veno, Executive Director

2025 Group Insurance Commission Meetings & Schedule

January 16	February 6	February 27	April 17	May 15
June 18	September 18	October 16	November 20	December 18

Unless otherwise announced in the public notice, all meetings take place from 8:30 am - 10:30 am on the 3rd Thursday of the month. Meeting notices and materials including the agenda and presentation are available at mass.gov/gic under Upcoming Events prior to the meeting and under Recent Events after the meeting.

Please note:

- Until further notice, Commissioners will attend meetings remotely via a video-conferencing platform provided by GIC.
- Anyone with Internet access can view the livestream via the MA Group Insurance Commission channel on YouTube. The meeting is recorded, so it can be replayed at any time.

Note: Topics and meeting dates are subject to change

Appendix

Commission Members

GIC Leadership Team

GIC Goals

GIC Contact Channels

Commission Members



Valerie Sullivan, Public Member, Chair



Michael Caljouw, Commissioner of Insurance



Edward Tobey Choate, Public Member



Martin Curley, Public Member



Tamara P. Davis, Public Member



Jane Edmonds, Retiree Member



Gerzino Guirand, Council 93, AFSCME, AFL-CIO



Eileen P. McAnneny, Public Member



Bobbi Kaplan, NAGE, Vice-Chair



Matthew Gorzkowicz, Secretary of Administration & Finance



Kristin Pepin, NAGE



Dean Robinson, Massachusetts Teachers Association



Melissa Murphy-Rodrigues, Mass Municipal Association



Jason Silva, Mass Municipal Association



Anna Sinaiko, Health Economist



Catherine West, Public Member

GIC Leadership Team

Matthew A. Veno, Executive Director

Erika Scibelli, Deputy Executive Director

Emily Williams, Chief of Staff

Paul Murphy, Director of Operations

Andrew Stern, General Counsel

Stephanie Sutliff, Chief Information Officer

GIC Goals

1

Provide access to high quality, affordable benefit options for employees, retirees and dependents

2

Limit the financial liability to the state and others (of fulfilling benefit obligations) to sustainable growth rates

3

Use the GIC's leverage to innovate and otherwise favorably influence the Massachusetts healthcare market

4

Evolve business and operational environment of the GIC to better meet business demands and security standards

Contact GIC for Enrollment and Eligibility

- Enrollment
- Retirement
- Premium Payments
- Qualifying Events
- Life Insurance
- Long-Term Disability
- Information Changes
- Marriage Status Changes
- Other Questions

Online Contact	mass.gov/forms/contact-the-gic	Any time. Specify your preferred method of response from GIC (email, phone, mail)
Email	gicpublicinfo@mass.gov	
Telephone	(617) 727-2310, M-F from 8:45 AM to 5:00 PM	
Office location	1 Ashburton Place, Suite 1413, Boston, MA, Not open for walk-in service	
Correspondence & Paper Forms	P.O. Box 556 Randolph, MA 02368	Allow for processing time. Priority given to requests to retain or access benefits

Contact Your Health Carrier for Product and Coverage Questions

- Finding a Provider
- Accessing tiered doctor and hospital lists
- Determining which programs are available, like telehealth or fitness
- Understanding coverage

Health Insurance Carrier	Telephone	Website
Mass General Brigham Health Plan	(866) 567-9175	massgeneralbrighamhealthplan.com/gic-members
Harvard Pilgrim Health Care	(844) 442-7324	point32health.org/gic
Health New England	(800) 842-4464	hne.com/gic
Tufts Health Plan (Medicare Only)	(855) 852-1016	Tuftshealthplan.com/gic
Wellpoint		
Non-Medicare Plans	(833) 663-4176	wellpoint.com/mass
Medicare Plans	(800) 442-9300	