



MASSACHUSETTS MEDICAL SOCIETY

Every physician matters, each patient counts.

May 15, 2026

OLIVIA C. LIAO, MD, FACS
President

REBECCA W. BRENDEL, MD, JD
President-Elect

HUGH M. TAYLOR, MD
Immediate Past President

LEE S. PERRIN, MD
Secretary-Treasurer

ELI C. FREIMAN, MD, FAAP
Speaker

GRAYSON W. ARMSTRONG, MD, MPH
Vice Speaker

LOIS DEHLS CORNELL
Executive Vice President

The Honorable Michael J. Rodrigues
Chair, Senate Committee on Ways and Means
State House, Room 212
Boston, MA 02133

Dear Chair Rodrigues,

On behalf of the over 23,000 physician, resident, and student members of the Massachusetts Medical Society (MMS), we thank you and the members and staff of the Senate Committee on Ways and Means for your leadership in developing S.4 during a time of continued economic and federal uncertainty. We recognize the significant challenges inherent in balancing competing priorities while working to advance the health of residents across the Commonwealth.

This proposal reflects an understanding of the critical role that a strong, accessible health care system plays in promoting stability, equity, and community well-being. We are encouraged by the Committee's commitment to sustaining key health programs and services. This includes robust funding for the **Healthy Incentives Program (4400-1004)**, which improves access to nutritious foods, and the **"Moms Matter Act" grants (4590-1503)**, which support efforts to address perinatal mental health conditions and substance use disorders. We respectfully offer the following comments on several amendments that would further strengthen access to care and support patients and physicians statewide.

We wish to be recorded in strong support of:

#444 – Continuing Affordable Coverage through ConnectorCare

This amendment will help maintain access to affordable health coverage by continuing the ConnectorCare pilot program, which extends eligibility for premium assistance and cost-sharing subsidies to individuals earning up to 500 percent of the federal poverty level. As health care costs continue to rise, this program has been critical in reducing coverage gaps for moderate-income residents who may not otherwise qualify for assistance but still face significant affordability challenges. Extending this initiative will help prevent coverage disruptions, promote continuity of care, and reduce the risk of individuals delaying or forgoing necessary services due to cost.

#496 – Supporting the Health Safety Net

This amendment will provide critical support for the Health Safety Net at a time of growing need. In FY2027, the program will face increased demand as 36,000 low-income residents, each earning below the poverty level, lost ConnectorCare Type 1 coverage as of January 1, 2026 and now rely on the Health Safety Net for access to care. Without additional investment, providers will have to shoulder rising uncompensated care costs, placing significant strain on physician practices, hospitals, and community health systems. Looking ahead, the situation is expected to worsen, with as many as 300,000 Massachusetts residents

860 WINTER STREET
WALTHAM, MA 02451-1411
TEL (781) 893-4610
TOLL-FREE (800) 322-2303
FAX (781) 893-9136
WWW.MASSMED.ORG

projected to lose coverage due to federal policy changes, potentially driving Health Safety Net shortfalls to as much as \$900 million in future years. Strengthening the Health Safety Net through this amendment is essential to preserving access to care for vulnerable populations and ensuring the financial stability of the Commonwealth's health care system.

#800 — HIV Prevention

This amendment will strengthen HIV prevention efforts by ensuring equitable and barrier-free access to pre-exposure prophylaxis (PrEP). PrEP is a highly effective, evidence-based tool that significantly reduces the risk of HIV transmission, yet cost-sharing requirements, prior authorization, and step therapy protocols continue to create unnecessary obstacles to timely access. Eliminating these barriers will help expand uptake among individuals at highest risk, improve health outcomes, and reduce long-term health care costs associated with HIV treatment.

We also wish to be recorded in **support** of amendments **#490, Prescription Drug Upper Payment Limit, #513, Improving Access to Infertility Treatment;** and **#558, Reproductive Health Access, Infrastructure and Security.**

Additionally, we wish to be recorded in **opposition** to the following:

#563 — Provider Choice

This amendment would override the expert-driven vaccine selection process led by the Massachusetts Vaccine Purchasing Advisory Council, undermining a system that has achieved high immunization rates. By mandating provider choice, amendment #563 would also increase program costs and risk inefficiencies, threatening the sustainability of the Commonwealth's successful universal childhood vaccine program.

#864 — Alcohol and Substance Abuse Center

This amendment would extend designation of the Massachusetts Alcohol and Substance Abuse Center (MASAC) as a secure facility for commitments under M.G.L. c. 123, §35 through December 31, 2028. Notably, pursuant to Chapter 285 of the Acts of 2024, operations at MASAC, where men are currently committed under Section 35, are scheduled to end by December 31, 2026, reflecting a deliberate policy shift away from the use of correctional settings for individuals with substance use disorders. Extending this designation beyond that timeline would run counter to that intent. Continued reliance on a carceral environment is inconsistent with evidence-based medicine and undermines appropriate efforts to treat substance use disorder as chronic disease rather than a criminal matter.

Thank you for your consideration of our comments. Please do not hesitate to contact us if you have any questions.

Sincerely,

Olivia C. Liao, MD, FACS