

The Governor's FY 2025 Budget Proposal: Preliminary Analysis of Key Issues Affecting Low-Income Massachusetts Residents

January 26, 2024

On January 24, 2024, Governor Healey released her budget proposal for fiscal year 2025 (FY 25), which is referred to as House 2. MLRI offers this preliminary analysis of selected budget topics affecting low-income residents of the Commonwealth.

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Cash Assistance, SNAP and Related Items Administered by DTA

Account	Description	FY 24 Appropriation (* = Net Supps & Cuts)	FY 25 Governor's Budget
4403-2000	TAFDC	\$431,499,004*	\$496,214,609
4401-1000	Employment Services	\$19,925,509	\$18,388,929
4400-1979	Pathways to Self Sufficiency	\$1,000,000	\$1,000,073
4408-1000	EAEDC	\$182,055,295*	\$178,982,092
4405-2000	State supplement to SSI	\$202,700,528	\$207,132,056
4403-2007	Supp. Nutrition Program	\$350,000	\$350,000
4400-1020	Secure Jobs Connect	\$5,050,000	\$5,000,000
4403-2008	Transportation Benefits for SNAP Path to Work Participants	\$500,000	\$500,000
4403-2119	Teen Structured Settings	\$10,883,264	\$13,846,348
4401-1003	Two Generation Economic Mobility	\$3,500,000	\$3,500,000
4400-1100	Caseworkers Reserve	\$95,405,257	\$96,440,103
4400-1000	DTA Administration and Operation	\$80,071,407	\$104,599,612
4400-1025	Domestic Violence Specialists	\$1,989,567	\$2,194,657
4400-1001	Food Stamp Participation Rate Programs	\$4,904,705	\$5,019,027
4400-1004	Healthy Incentives Program (HIP)	\$5,050,000 ¹	\$25,133,851
4400-1031	Replacing Stolen SNAP Benefits	\$1,000,000*	\$0
4400-1032	State-funded SNAP for legally-present immigrants	\$6,000,000*	\$0

1. Cash Assistance (including TAFDC, EAEDC, SSI State Supplement, Nutrition Assistance)

- **The Governor's budget would freeze TAFDC (item 4403-2000) and EAEDC (item 4408-1000) grants at their October 2022 levels.** The maximum TAFDC benefit for a family of three with no income would be stuck at only \$783 a month; the EAEDC grant for one person would stay at only \$401 a month. On January 8,

¹ See discussion below in (4) Additional Nutrition Items Administered by DTA, about funding history for HIP.

2024, the Governor eliminated 10% grant increases for the two programs enacted in the FY 24 budget. The increases were scheduled to go into effect in April 2024. The FY 24 budget also included a commitment that grants in FY 25 would include the 10% increase. The Governor cut the increases and has reneged on the commitment to maintain the increases in FY 25.

Current grant levels are well below half the federal poverty level, also known as Deep Poverty. The Deep Poverty level recently increased to \$1,076 a month for a family of three. Unlike cash assistance, the Poverty level and Deep Poverty level go up every year to keep pace with inflation. TAFDC and EAEDC grants, on the other hand, do not get regular cost of living increases. TAFDC grants have lost 44% of their value since 1988; EAEDC grants have lost even more. H.144 (Rep. Decker) and S.75 (Sen. DiDomenico) would increase benefits by 25% a year until they reach half the federal poverty level, and then would increase benefit levels more slowly as the poverty level increases.

The Governor's Budget Brief that accompanied House 2 takes credit for "maintain[ing] investments funded in FY 21-FY 23 that increased benefits by 30%." These increases, a priority for the Lift Our Kids Coalition, were enacted by the Legislature and signed into law by the previous Governor. They did not make up for the value lost to inflation during the previous decades. The FY 21-FY 23 increases have also already lost value to inflation, so the Governor is not "maintain[ing]" those investments either.

- **In a further blow, the Governor would reduce the annual TAFDC children's clothing allowance (item 4403-2000) by \$50 a year, down to \$400 per child from \$450 per child in FY 24.** The boost to the September clothing allowance in FY24 was not a substitute for a grant increase, but it was a small help to families who were not scheduled to get a regular grant increase until April—families who now will not get any increase at all unless the Governor's cuts are reversed. The \$50 reduction per child leaves families with fewer resources to meet their children's clothing needs at the start of the next school year. (The Governor keeps the longstanding provision that increases the standard of need in September by the amount of the clothing allowance, thereby allowing very low-income working families to qualify. According to DTA, a few hundred families qualify for TAFDC in September because of the increase in the standard of need.)
- **The Governor proposes \$496.2 million for TAFDC (4403-2000), an increase of about \$64.7 million over the FY 24 appropriation after subtracting the Governor's \$13.2 million cut.** A Budget Brief submitted with House 2 refers to an "increase in the need for cash and food assistance programs" but the proposed increase in funding appears to be based only on the Administration's projected increases in the caseload and not on families' increased need in the face of rising costs.
- **House 2 does not propose any changes to antiquated TAFDC rules** or streamline administration of TAFDC by removing behavioral and eligibility rules – many with racist origins – that do not serve the Department's goals of assuring that families can

meet their basic needs, improving families' quality of life, helping families achieve economic stability, and reducing racial disparities. Examples of such rules are Learnfare (sanctioning children if they are determined to have had too many absences the school does not record as excused); requirements that the parent pursue child support against the noncustodial parent, even when doing so is not in the child's best interest; and terminating TAFDC for children when they reach age 18 if they won't graduate from high school by age 19.

- **The TAFDC line item (4403-2000) would continue the FY 24 provision of stipends for applicants and recipients who participate in DTA advisory boards.** The stipend is \$400 a year and is not counted as income. We applaud DTA for providing a stipend but question whether \$400 a year is enough. We also recommend that DTA provide stipends to former recipients who participate in Advisory Boards, unless they are employed by an agency that pays for their time while they attend meetings. To our knowledge, DTA has not reported publicly on the total cost of the stipends or the number of stipend recipients.
- **The TAFDC line item (4403-2000) does not include language adopted several years ago at advocates' urging removing the reduction in benefits for families in shelter.** The language was included in last year's budget.
- **The line item for TAFDC (4403-2000) does not include language urged by advocates barring DTA from changing the way benefits are calculated unless the change would result in a benefit increase.** The Legislature adopted this language to bar the Administration from counting a parent's SSI benefits against the TAFDC grant, which would have caused many children to lose their TAFDC.
- **The TAFDC line item (item 4403-2000) also does not include language requiring the Governor to give advance notice to the Legislature before cutting benefits or making changes in eligibility.** The advance notice language prevented the Governor from eliminating the clothing allowance in September 2010. The previous fiscal year, the advance notice provision was critical to giving the Legislature time to persuade the Governor to rescind cuts to TAFDC. (This year the Governor eliminated increases that were scheduled to be implemented in April, so there is time for the Legislature – and advocates – to persuade the Governor to reverse the cuts before the increases were supposed to go into effect and it is not necessary to invoke the advance notice language).

The Governor's proposed line item also does not include the current requirement of 75 days' advance notice before DTA proposes any changes to the disability standard. The Governor also eliminates a requirement that DTA tell recipients about their eligibility for child care. The Governor also does not include prior years' language allowing DTA to make eligibility or benefit changes that lead to an increase in eligibility or benefits.

- **Transitional Support Services specified at \$1 million (item 4403-2000).** Currently, these families are eligible for four months of transitional benefits after TAFDC ends, starting at \$280 a month and reducing month by month to \$70 in the

fourth month. The FY 25 budget specifies “no less than \$1 million” for these benefits, though the actual cost has been nearly double that.

- **The Employment Services Program (ESP, item 4401-1000) would be reduced from \$19.9 to \$18.4 million and the Pathways to Self Sufficiency line item (4400-1979) would be level-funded at \$1 million.** Like previous Governor’s budgets, House 2 does not propose any earmarks for ESP. The FY 24 budget earmarked funds for the Young Parents Program, some education and training for TAFDC parents, the DTA Works Program (paid internships at state agencies), learning disability assessments, and job search services for refugees and immigrants. The Governor does not include a current requirement that the Administration report on program outcomes. The report required by the FY 24 budget is due March 15, 2024.
- **EAEDC (Emergency Aid to Elders, Disabled and Children, item 4408-1000) would be funded at \$179 million, compared with the FY 24 appropriation of \$182.1 million that remained after the Governor’s \$4.4 million cut in January.** The Governor does not propose increasing EAEDC benefit levels, currently only \$401 a month for single person with no income, and \$521.70 a month for a couple. EAEDC benefits paid while a recipient is applying for SSI are reimbursed to the state once SSI is approved, so the state would recover the cost of benefits paid for some EAEDC recipients. Like the TAFDC line item, House 2’s proposed EAEDC line item does not include language requiring advance notice to the legislature before the Administration cuts benefits or makes changes in eligibility. The proposed line item does specify that homeless persons shall receive the same basic grant as recipients who incur shelter costs.
- **The state supplement for SSI (Supplemental Security Income, item 4405-2000) would be funded at \$207.1 million,** over \$4 million more than the \$202.7 million FY 24 appropriation.
- **The Supplemental Nutrition Program (item 4403-2007) would be level-funded at \$350,000.** This program provides a small state food SNAP supplement to thousands of low-income working families who also receive federal SNAP benefits.
- **Secure Jobs Connect (item 4400-1020) would be funded at \$5 million,** a \$50,000 decrease. This program provides employment support, job training and job search services for homeless or previously homeless families through community-based organizations.
- **Transportation benefits for SNAP Path to Work participants (item 4403-2008) would be level-funded at \$500,000.** This account provides transportation assistance to SNAP beneficiaries who need transportation to participate in a work activity and keep their benefits.
- **State-funded SNAP for legally present immigrants (item 4400-1032) received no funding in House 2.** The FY 23 Supplemental Budget signed by the Governor on December 4, 2023, provided \$6 million for state-funded SNAP for legally present immigrants. DTA is on the cusp of launching this benefit, provided to low-income

immigrants with humanitarian statuses who are ineligible for federal SNAP – including parolees, battered immigrants and immigrants “permanently residing under color of law.” Some are waiting for work authorization and many who are working in the service, construction and healthcare industries are essential workers with low earnings are unable to meet the basic needs of their families without supplemental food benefits. With increased demand and increased cost of food, La Colaborativa and food pantries across the Commonwealth are unable to meet the growing demand. H.135 (Rep. Cabral and Rep. Garcia) and S.76 (Sen. DiDomenico) would restore state-funded SNAP and cash benefits for legally present immigrants, benefits Massachusetts provided from 1997 to 2002 after the federal welfare reform law slashed critical benefits for millions of legally-present immigrants across the nation.

- **Increasing participation in SNAP (item 4400-1001).** The Governor proposes \$5 million for this “Food Stamps Participation Rate Programs” line item, compared with \$4.9 million appropriated for FY 24. The line item provides funding for Project Bread’s Food Source Hotline and other DTA projects to increase access to SNAP benefits. SNAP outreach activities are 50% federally reimbursable.

2. **Teen Living Programs (item 4403-2119) would be funded at \$13.8 million,** an increase above the FY24 appropriation of \$10.8 million.

3. **DTA Administration**

- **The DTA worker account (item 4400-1100) would be increased to \$96.4 million from the \$95.4 million appropriated for FY 24.** The proposed \$1 million increase is not enough to address the DTA’s staffing shortage.

The SNAP caseload has increased 45% since the pandemic began in March 2020. Combined with the end to federal COVID workload management flexibilities, this caseload increase has resulted in significant access delays in recent months. Since July 2023, about 1 in 2 calls attempting to reach a DTA worker were automatically disconnected due to high call volume. Over the past year, 25% of all application denials were for missing a required interview with a DTA worker – in large part because it has been so difficult to reach DTA.

Additional workers are necessary to timely process cases, provide meaningful customer service, and address the delays and backlogs that drive high call volume. Additional workers are also necessary to meaningfully address the “SNAP Gap,” which the Administration earlier pegged at 600,000 to 700,000 individual MassHealth recipients with income below 150% of the federal poverty level and likely eligible for SNAP. Failure to close the SNAP Gap leaves millions in federal nutrition benefits on the table. Staffing challenges impair the state’s ability to close the gap, meet federal standards, and serve very low-income families quickly.

- **Funding for DTA domestic violence workers (item 4400-1025) would be increased from \$1.9 million to \$2.2 million.** This may reflect increased personnel costs.

- **DTA central administration (item 4400-1000) would be increased to \$104.6 million from \$80.1 million appropriated for FY 24.** Some of the increase may reflect proposed spending on a Mobile EBT pilot and increased spending needed to administer Summer EBT. However, the budget documents do not specifically mention funding to issue chip/tap EBT cards, which are critical to improving SNAP and cash assistance security. And some of the increase is likely related to Central Office managing the growth in the cash assistance and SNAP caseloads, noted above.

SNAP Gap and Common App: DTA’s monthly Performance Scorecards confirm that roughly 6,000 to 8,000 SNAP applications are flowing from EOHHS to DTA through the MassHealth SNAP Checkbox application, as well as a significant increase in DTA Connect web applications from low-income households able to file online. The FY21 and FY22 annual budgets required EOHHS to allow MassHealth and Medicare Savings Program applicants the option to apply for SNAP at the same time as healthcare. However, the SNAP denial rate is disturbingly high due in part to lack of sufficient caseworkers, as noted above. The Commonwealth is leaving millions of federal nutrition dollars on the table, which underutilization also increased the state costs of Universal School Meals (kids on SNAP get 100% federally-funded free meals). Additionally, although one of the Budget Briefs mentions the “common application” in the context of improving technological infrastructure (discussed further below), the Administration has yet to implement the common application for more programs, required by Chapter 174 of the Acts of 2022.

No express provision for chip/tap EBT for SNAP and cash assistance security. SNAP and cash assistance benefits are accessed via Electronic Benefit Transfer (EBT) cards that rely on a magnetic stripe, which are much more vulnerable to skimming theft than industry standard chip/tap cards. As a result, since 2022 criminals have stolen millions of dollars from low-income MA residents through no fault of the household. Improved technology is long overdue. We are disappointed that we do not see anything in House 2 that provides for moving to chip/tap EBT cards in Massachusetts. In summer 2024, California will be the first state in the country to begin issuing chip/tap EBT cards– Massachusetts must follow California’s lead to protect low-income consumers and tax dollars.

Mobile EBT Pilot. The Budget Brief on Food Security filed with House 2 says that House 2 recommends \$974,000 for the Mobile EBT Pilot program. Massachusetts was one of five states selected by the U.S. Department of Agriculture to pilot mobile payment technology for SNAP. Mobile EBT is a prudent investment that will improve security for households who can use it successfully and regularly. However, while Mobile EBT will be a positive option for some families, not all SNAP consumers will be able to use it or use it regularly, and it is not a substitute for EBT cards with chip/tap for SNAP and cash assistance.

Summer EBT. The Budget Brief on Food Security also states that House 2 supports the operation of Summer EBT. Summer EBT will provide \$120 per child in food benefits (like SNAP – food dollars put on an EBT card). Summer EBT covers

children eligible for free and reduced-price meals under the National School Lunch Program (NSLP). Massachusetts was one of 35 states to commit to providing Summer EBT benefits to eligible K-12 children in summer 2024. This year, the national Food Research Action Center (FRAC) estimates Summer EBT will bring in about \$62 million federal dollars to help an estimated 500,000 children in low-income families buy food. The federal government pays half of Summer EBT administrative costs; states are responsible for the other half. Thus, funding for the operation of Summer EBT is essential. However, despite the statement in the Budget Brief, neither House 2 nor any of the budget documents specifies how much the Administration expects to spend on Summer EBT.

Other central administration line item matters. (1) A Budget Brief filed with House 2 refers to improving the technological infrastructure of state benefits agencies, including the Integrated Eligibility and Enrollment Readiness initiative, which includes improvements to benefits platforms like the creation of a common application. Funding to improve IT staffing and systems improvements is critical to improve DTA's benefits delivery system, connect eligible residents, and bring federal dollars into the Commonwealth. For example, DTA has committed to significant improvements that would benefit low-income residents and improve SNAP but cannot implement those improvements quickly due to limited IT resources. Sufficient funding for competitive pay is paramount to retaining talented IT staff who understand programming complex benefits programs. (2) The proposed line item does not include the FY 22 requirement that DTA submit a monthly report on program savings and revenues, caseloads, and collections; however, DTA now posts some of this information. (3) The line item also does not include current language providing that an application for TAFDC shall also be treated as an application for MassHealth.

4. Additional Nutrition Items Administered by DTA

- **Funding to replace stolen SNAP benefits (item 4400-1031) not included.** Congress enacted partial replacement for benefits stolen by skimming or phishing starting October 1, 2022, capping replacement amounts and ending replacement on September 30, 2024 (the end of federal fiscal year 2024). The Legislature enacted supplemental budgets authorizing funding to fill gaps in federal relief through FY 24. Most recently, the FY23 supplemental budget signed in December 2023 included \$1 million in state funding to address federal limits and ensure all SNAP families are made whole after SNAP is stolen. House 2 does not provide for wrap-around funding for FY 25. If the federal gaps are not addressed, some households will not get full replacement when their benefits are stolen through no fault of the household.
- **The Healthy Incentives Program (HIP) (item 4400-1004) is funded at \$25.1 million.** This is a significant increase over FY 24 funding of \$5 million plus \$8.8 million in unspent funding from FY23. The \$25.1 million is expected to fully fund the HIP program year round in FY25. HIP is a dollar-for-dollar match, up to a capped amount, for SNAP recipients who buy fresh fruits and vegetables at

EBT/HIP-approved farmers markets, mobile markets, community supported agriculture (CSAs) and farm stands. HIP participation is especially high among low-income older adults, helping them to access locally grown food and decrease social isolation. Over 100 farmers, CSAs and farm stands now participate in HIP.

Child Welfare: Department of Children and Families and Related Items

Account	Description	FY 24 General Appropriation	FY 25 Governor's Budget
	Department of Children and Families	\$1,361,379,048	\$1,530,904,262
4800-0015	Clinical Support Services and Operation	\$140,416,735	\$154,341,248
4800-0030	Local/Regional Management of Services (Lead Agencies)	\$9,525,854	\$11,423,980
4800-0038	Services for Children and Families (Family Foster Care)	\$355,808,909	\$376,723,635
4800-0040	Family Support and Stabilization Services	\$88,757,132	\$139,539,127
4800-0041	Congregate Care Services	\$431,019,785	\$495,889,634
4800-0058	Foster Adoptive and Guardianship Parents Campaign	\$975,000	\$975,000
4800-0091	Child Welfare Training Institute	\$4,742,908	\$4,920,601
4800-0200 and 4000-0051	Family Resource Centers	\$28,307,519	\$27,329,607
4800-1100	DCF Social Workers	\$294,567,006	\$311,500,072
0930-0100 and 0930-0101	Office of the Child Advocate	\$9,827,671	\$7,342,353

1. The Governor proposes funding DCF at slightly over \$1.5 billion, an increase of more than \$169 million from FY 24. The bulk of this increase consists of **almost \$86 million more spending on separating children from their parents and placing them in the foster system**, bringing total foster care spending to over \$872 million. At the same time, the Governor also proposes **the largest ever increase, almost \$51 million, for services to keep and return children safely with their families.**
2. **The Governor's proposal for foster system spending includes \$376.7 million for family foster care (item 4800-0038) and \$495.9 million for congregate care for children living in residential foster care facilities (item 4800-0041).**
 - This includes \$3.1 million for postpartum services for families affected by substance use disorder and involved with DCF.
 - It also includes \$3.4 million for a 3.7% boost in foster care daily rates and quarterly clothing allowances, and \$1.15 million to double annual birthday and holiday payments to \$100 and \$200 respectively.
 - **House 2 would strip out the racial impact statement requirement for DCF's risk assessment tool, a requirement that DCF has failed to comply with over the two years since the legislature has enacted it.**

3. Massachusetts and national data shows that the Massachusetts foster system significantly harms children.
 - Black and Latinx children and youth in the Commonwealth are separated from their families at 2.4 and 2.5 times the rate of their white counterparts respectively (MA DCF 2022 Annual Data Report [most recent DCF annual report available]).
 - Professional consensus in the field is that children should not be placed in congregate care unless their treatment needs require an institutional setting. This is because congregate care is associated with, among other negative outcomes, higher rates of delinquency and arrests (Ryan et al., *Juvenile Delinquency in Child Welfare: Investigating Group Home Effects*, Children and Youth Services Review, 2008) and worse educational outcomes (Casey Family Programs, *What are the Outcomes for Youth Placed in Congregate Care Settings?* 2018).
 - Despite professional consensus that it should be used sparingly, Massachusetts has the 8th highest rate of reliance on congregate care in the nation. (Child Welfare Outcomes Report, 2019, Figure V-1 [most recent national outcomes report available]).
 - Part of the increased cost of congregate care results from Massachusetts' decision to forego federal reimbursements for foster care costs rather than comply with quality of care and appropriateness of placement standards, which are now a condition of federal funding under the federal Family First Prevention Services Act of 2018. EOHHS projected that Massachusetts would lose \$12.9 million in FY 23 federal reimbursements as a result of that decision. It is likely that FY 25 lost revenues will be higher.
4. Best practice in the field points to an alternative to runaway foster and congregate care budgets, racial disparities, harms to children, and destruction of families. **This is investing in families to address the issues that may put children at risk in order to keep them safely within their own families.**
 - Only a very small portion of the cases that come to DCF's attention involve physical and sexual abuse. Most (well upwards of 75% according to DCF's and national data) involve neglect, which is often conflated with poverty and/or a parent's disability.
 - **These situations can be addressed to some extent with adequate Family Support and Stabilization Services (item 4800-0040) that DCF could provide, and mostly with adequate community-based supports (referred to in public health language as primary prevention) that other government agencies and community-based organizations can make accessible to families at risk of child welfare system involvement.**
 - Paragraphs 5-9 briefly note how the Governor's budget addresses several key preventative child welfare investments.
5. **This year, the Governor proposes a substantial increase of almost \$51 million in**

spending on DCF Family Support and Stabilization services to keep children safely with their parents (item 4800-0040), allocating a total \$139.5 million. According to DCF, \$32 million of the additional funding covers increased Chapter 257 rates for services providers. The remaining \$19 million of the increase would fund a new array of evidence-based services that DCF anticipates will be available under its re-procurement of support and stabilization services.

- DCF originally announced its intention to move forward with this re-procurement of support and stabilization services in 2021. It is therefore hard to know for certain when the re-procurement will finally take place and the services will become available. However, the Governor’s inclusion of funds for purchasing services under this new procurement is an encouraging sign that it will happen this fiscal year.
 - While the Healey administration deserves credit for proposing a far larger increase than this small line item has received in the past, the proposed level of funding is still inadequate for the number of children and youth entitled to these services. According to DCF’s most recent quarterly report, **over 86% of the children in DCF’s caseload are entitled to family support and stabilization services to remain or return safely home with their parents, but even with her proposed increase, the Governor proposes to spend less than 14% of the Department’s services budget on the services these children should receive.** The remaining 86% of the Governor’s proposed services budget is allocated to the costs of separating children from their families.
 - This inadequate funding for services to keep children safely at home coupled with massive funding to remove them from their families undermines DCF’s ability to achieve its core mission under federal and Massachusetts law to place children in foster care only after the Department has provided all available services to keep them safely at home (See, MGL c. 119, §1).
- 6. House 2 would cut funding for Family Resource Centers (items 4800-0200 and 4000-0051) by almost \$1 million to a total of \$27.3 million, reducing an important source of community-based support for families that does not require involvement in the child welfare system.**
- These community-based centers provide one of the few means by which families in crisis can voluntarily receive services to address risks to children before they become harms. This is a cornerstone of primary prevention. Family Resource Centers can connect families to voluntary community and state services, educational programs, and peer support. They also provide a mechanism for the juvenile court to refer families to community-based services in order to fulfill the requirements of the Children Requiring Assistance (“CRA”) law which provides a system of community-based services for families in need.
- 7. Another key primary prevention support is domestic violence services. Domestic violence services (item 4513-1136) would be increased by \$3.4 million to \$75.6 million.**
- These domestic violence services help prevent child welfare system involvement.

They include beds for domestic violence shelters, supervised visitation, supports to victims of domestic violence, and salaries for DCF domestic violence staff.

8. The line item for the **Bureau of Substance Abuse Services (4512-0200)**, which provides the substance use treatment needed by the large number of DCF-involved caregivers and youth with substance use disorders, **would be cut by \$23.6 million to \$193.1 million.**
9. Many programs discussed in other sections of this analysis provide the **concrete supports** that research shows vulnerable families need to provide adequately for their children and avoid unnecessary DCF involvement and family separation.
 - These cannot all be catalogued here, but they include core concrete supports such as TANF and SNAP benefits, adequate housing, health care and benefits, unemployment benefits, and childcare.
10. **House 2 would** increase funding for **DCF's administrative account** (item 4800-0015) by \$13.9 million to \$154.3 million. As is typically the case, the Governor's budget strips most of the line-item language in DCF's administrative account including requirements for data reporting and prioritizing and supporting kinship foster care placements.
11. Funding for the Office of the Child Advocate (items 0930-0100 and 0930-0101) would be cut to \$7.3 million.
 - The OCA's budget consists of a main line item (0930-0100) and a separate line item for the State Center on Child Well-Being and Trauma (0930-0101). The Trauma Center is operated by the UMass Chan Medical School in collaboration with the Office of the Child Advocate.
 - The previous administration increased the OCA's budget by over 1,000% (from \$700,000 to \$8 million). **It remains important to examine the outcomes for child welfare system-involved children and families that have resulted from this investment.**

Health Issues in MassHealth and ConnectorCare

Account	Description	FY 24 General Appropriation	FY 25 Governor’s Budget
4000-0300	EOHHS and Medicaid Administration	\$141,994,304	\$167,914,925
4000-0430	MassHealth CommonHealth Plan	\$164,554,085	\$197,558,111
4000-0500	MassHealth Managed Care	\$5,831,782,318	\$6,122,042,394
4000-0601	MassHealth Senior Care	\$4,486,914,509	\$4,580,139,945
4000-0700	MassHealth Fee For Service Payments	*\$5,423,843,883	\$4,232,605,645
4000-0880	MassHealth Family Assistance Plan	\$249,457,668	\$371,307,845
4000-0940	MassHealth ACA Expansion Populations	\$3,176,913,030	\$2,427,764,172
4000-0990	Children’s Medical Security Program (CMSP)	\$30,017,088	\$35,000,000
1595-5819	Commonwealth Care Trust Fund	**\$0	\$35,000,000

*The FY24 appropriation for 4000-0700 reflects the GAA of \$3.601B plus \$2.117B added by chapter 77 of the Acts of 2023 less \$294M reduced by 9C cuts.

**The FY24 appropriation for 1595-5819 reflects the GAA of \$50M reduced by a \$50M 9C cut.

1. House 2 protects beneficiaries from MassHealth eligibility or across-the-board benefit cuts but limits eligibility for PCA services

- MassHealth describes FY 2025 as a challenging budget year in which it must adjust to the loss of significant enhanced federal Medicaid matching funds related to the pandemic, uncertainty in the number of MassHealth beneficiaries, and rising health care costs. There is no proposal to reduce MassHealth eligibility or eliminate covered benefits across the board, but House 2 proposes reducing the scope of the Personal Care Attendant (PCA) benefit as discussed further below.
- House 2 funds MassHealth at \$20.3 billion gross, \$8.2 billion net of federal revenue, representing a \$730 million gross, \$440 million net, increase over projected FY 2024 spending. House 2 lays out the Administration’s plan to sustain this level of funding through increased revenue from an increase in the existing hospital assessment and adjustments to the existing assessment on managed care plans and other surcharge payors, and to hold down costs by enhanced program integrity efforts, and “carefully managing” expenses.
- The FY 2025 budget acknowledges continuing uncertainty about MassHealth

enrollment. The FY 2024 budget assumed that with the end of the Medicaid continuous coverage protection enacted by Congress during the pandemic and the resumption of redeterminations, MassHealth enrollment would decline by 300,000 by the end of the fiscal year. Data reported through December 31, 2023 on the [MassHealth redetermination dashboard](#) shows that since April 1, 2023 when it began the process of redetermining eligibility for its 2.4 million members, point in time enrollment decreased by 281,553. Enrollment declines got off to a slow start with some wrongly terminated beneficiaries reinstated and a federally-mandated pause on terminations for some groups, but the pace has rapidly accelerated and with it some disturbing trends have surfaced.

- MassHealth identified 13 priority communities with a high concentration of low-income families eligible for MassHealth in which to target its outreach efforts. Early on, the rate of MassHealth terminations in the priority communities was half that of other communities. In December, that trend reversed, with the “departure” rate in priority communities at 5.05% compared to 3.8% in other communities.
- Another important measure moving in the wrong direction is the percentage of people who are losing coverage because they are no longer eligible compared to those who lost coverage for administrative reasons such as not meeting paperwork deadlines. In September 2023 more MassHealth terminations were based on confirmed ineligibility rather than for procedural reasons. However, as the pace of terminations has increased that is no longer true. In December, 2023 66% of terminations were for procedural reasons. This is better than the national average which was 71%, but states vary widely with some states having procedural termination rates of 94% (Utah) while others have rates of 13% (Illinois). See, [KFF Enrollment Tracker](#).
- MassHealth has identified one of its priorities in FY 2025 as to “Improve member experience by making MassHealth easier to access and simpler to navigate.” It’s not too soon or too late to put that priority into practice for the remainder of FY 2024 as MassHealth completes its post-pandemic redeterminations.

2. House 2 limits eligibility for MassHealth’s PCA Program and reduces PCA benefits

- As described above, MassHealth faces significant headwinds in FY25. In response, House 2 recommends savings initiatives that include targeted cuts to the scope of its Personal Care Attendant (PCA) program. MassHealth’s PCA program is a robust benefit that helps members with permanent or chronic disabilities to live in the community and manage their own care by paying for personal care attendants to help members with their activities of daily living (ADLs) such as bathing, eating, toileting and transfers, and “Instrumental” ADLs such as shopping, housekeeping, laundry, and meal preparation. To qualify people must need help with at least two ADLs.
- House 2 proposes two cuts to the PCA program: (1) imposing an additional eligibility threshold of needing at least 10 hours a week of support with ADLs, and (2) capping the number of hours for meal preparation at 7 hours per week (the

current recommendation is 13 hours per week; there is no hard cap). MassHealth projects the new 10-hour threshold will cause around 6,000 members to lose their eligibility for the PCA program, and the two cuts together will result in about \$114 million in gross savings. These cuts will not apply to children and young adults under age 21 due to protections of the federal EPSDT (Early and Periodic Screening, Diagnostic and Treatment) benefit.

- House 2's cuts are mixed with important investments, including \$5 million to improve access to wheelchair repair for MassHealth members, a pain point for many years. House 2 also reflects over-due increases in wages for Personal Care Attendants, thanks to a collective bargaining agreement between MassHealth and the PCAs' union, 1199 SEIU, finalized in the fall of 2023. Nonetheless, 1199 SEIU and disability rights advocates report significant concern about House 2's proposed cuts to the PCA program, the thousands of members who will lose PCA benefits as a result, and the diminished quality of care for those who will remain in the program.

3. ConnectorCare enrollment to grow in FY2025 (1595-5819)

- Enrollment in ConnectorCare, Massachusetts' free or low-cost private insurance plan for people ineligible for Medicaid or other affordable coverage, dropped by over 83,000 between Jan 2020 and Jan 2023. With the resumption of MassHealth redeterminations starting on April 1, 2023, ConnectorCare coverage grew by 40,000 to 163,000 in Dec 2023 still well below its pre-pandemic levels. The 2024 budget had enacted a 2-year pilot to expand the upper income limit for ConnectorCare from 300% to 500% of the federal poverty level starting with enrollment in January 2024. In January 2024, ConnectorCare enrollment was 215,000. Of the 44,000 people enrolled in the ConnectorCare pilot on January 1, 2024 most had previously been enrolled in the Health Connector, but a few transitioned from MassHealth. House 2 adds \$35 million to the Commonwealth Care Trust Fund which supplements federal premium tax credits that together with beneficiary premiums pays for ConnectorCare.

4. House 2 includes funding for MassHealth's new doula coverage program

- In response to Massachusetts' growing maternal health crisis and racial disparities in maternal health (see, [MA Dept. of Public Health Report](#)), MassHealth launched its new doula coverage program on [December 8, 2023](#). Doulas are non-medical, trained professionals who provide physical, emotional, and informational support before, during, and after labor. Studies consistently demonstrate that doula care significantly improves maternal and infant health outcomes including lower rates of c-sections and lower rates of preterm births and low birth-weight babies. Studies also show that access to doula care reduces racial disparities in maternal health outcomes.
- House 2 includes \$1.1 million to fund MassHealth's doula coverage program in FY25 and estimates providing doula services to 1,700 MassHealth members. Notably, this number of members served is just 6% of the over 27,000 MassHealth members who gave birth in 2022, not to mention the many thousands more who are eligible because they are pregnant or in their 12 month postpartum period for part of

that fiscal year. This low uptake most likely reflects not just the time it takes to implement a new program, but also the significant doula workforce shortage which will need to be addressed before MassHealth can meaningfully offer doula services to all its eligible members.

- House 2 addresses, in part, the need to invest in doula workforce development by recommending \$1 million for DPH to establish the first certification program for doula providers in Massachusetts, including subsidized training and mentorship for new doulas and investment in expanding community-based doula programs. However, much more investment in doula workforce development is needed, and involving the Massachusetts doula community in the planning and development of these programs will be essential to ensuring their success.
- Legislation to support MassHealth’s doula coverage program is currently pending in the Health Care Financing Committee. This bill, An Act relative to Medicaid coverage for doula services (H.1240/S.782) would (1) create a doula advisory committee to meet regularly with MassHealth about the implementation of its program, (2) create the infrastructure to invest in doula workforce development with a focus on workforce recruitment, retention, training, and diversification, and (3) amend the patient bill of rights to give patients the right to have their doulas present during labor and delivery.

5. House 2 Eliminates Copayments in the Children’s Medical Security Plan (Section 59) and Elder Affairs Home Care Program

- The Children’s Medical Security Plan (CMSP) reflects an increase of \$5 million, or a 17% increase over the FY24 GAA. The CMSP provides coverage for children under 19 in families with income over 300% of the Federal Poverty Level and for children who are not eligible for MassHealth because of their immigration status. House 2 includes funding to waive copays for CMSP members at an estimated cost of \$600,000. Outside Section 59 repeals language in GL c. 118E, sec. 10F which requires CMSP members to pay copays. Outside Section 112 makes this change effective either January 1, 2025, or upon CMS approval, whichever is earlier. In FY24, MassHealth waived pharmacy copays on a temporary basis for all plans except CMSP until March 31, 2024. We anticipate that MassHealth will make this waiver permanent to bring other MassHealth plans into alignment with CMSP and the [well-established research](#) that even relatively small levels of copayments are associated with reduced use of necessary services.
- House 2 does not include language overriding the outdated dollar limitations of the program including a \$200 a year cap for prescription drugs and a 20 visit maximum on mental health visits. These and other benefit limitations, contained in the statute at GL c. 118E, sec. 10F, prevent many low-income children from accessing the health services that they need to grow and thrive, simply because of their immigration status. Legislation is pending this session to provide more comprehensive coverage for children regardless of immigration status. This legislation, H.1237/S.740, An Act to ensure equitable health coverage for children, would provide comprehensive coverage to over 30,000 children and young adults

whose coverage is limited because of their immigration status.

- House 2 also funds a \$5 million initiative within the Home Care Case Management and Administration account under the Department of Elder Affairs to reduce or eliminate copays for over 10,000 low income home care clients. This will help defray costs and allow more seniors to receive care at home.

6. House 2 invests \$10M in anticipation of approval of an 1115 amendment to provide MassHealth services to incarcerated people 90 days prior to release from incarceration

- The Governor's budget proposal for fiscal year 2025 allocates a substantial \$10 million investment towards justice-involved initiatives within the MassHealth program. This funding is to enhance the capacity to deliver up to 90 days of pre-release health care services for individuals incarcerated in Massachusetts' jails and prisons pursuant to the Commonwealth's latest [1115 Demonstration Amendment Request](#) submitted in October 2023. Although CMS approval of the 1115 waiver is still pending, it has approved similar waivers in other states. The \$10 million budget allocation signals that the state is preparing for its implementation.
- The [budget's MassHealth brief](#) states that the \$10 million will be directed towards "building the necessary infrastructure in correctional facilities to prepare for coverage of pre-release services." It is promising that the state is taking a proactive stance in anticipation of the 1115's approval, a decision which will require Massachusetts to overhaul its correctional health system and will allow thousands of previously ineligible individuals to receive MassHealth-covered services for up to 90 days while incarcerated and will facilitate continued services after release. However, it remains unclear and concerning who makes up the "correctional partners" that will receive funding for the delivery of health services. The state has yet to release plans on whether facilities will be free to exclusively deliver pre-release services through contracted in-house vendors like [Wellpath](#) or whether there will be a coordinated effort to encourage contracting with community providers. MassHealth should be sure the infrastructure funding for correctional facilities is built to accommodate contracting for pre-release services from the community providers and plans that will also be providing care after reentry. Doing so would encourage continuity of care, and entail a responsible use of resources that aligns with the state's priorities of advancing health equity and improving fairness in its justice system.

7. House 2 invests \$250,000 in outreach for the expanded Medicare Savings Program

- The Medicare Savings Program (MSP) is a MassHealth program that helps low-income older adults and people with disabilities on Medicare by paying their Medicare Part B premium, and for lower income individuals, it also protects them from balance billing and pays the part A premium for those who have one. In addition, people enrolled in MSP are exempt from penalties for late enrollment in Medicare and automatically qualify for extra help with Medicare drug costs. The Healey Administration, like that of Governor Baker before her, is sold on the benefits of MSP. The income and assets limits were increased in January 2020 and

the income limits were increased again in January 2023. The FY 2024 budget eliminated the asset test in a change that will take effect on March 1, 2024.

- Yet, so far, the expansion of the program to meet a well-documented need has only resulted in modest enrollment increases. It hasn't helped that both the rollout of the January 2020 expansion and the January 2023 expansion were plagued by missteps, delays and "system limitations." In November 2022, two months before a 90% FPL increase in the upper income limit took effect, MSP enrollment was 36,000, in November 2023 enrollment had only grown to 43,300. The administration is promising to do better implementing the March 1 2024 elimination of the asset test, and in FY 2025 the MassHealth budget brief states that MassHealth will continue the commitment with \$250,000 for an outreach campaign.

Homeless Services

Account	Description	FY 24 General Appropriation	FY 25 Governor's Budget
7004-0101	Emergency Assistance	\$325.3M	\$325.3M
7004-0108	HomeBASE	\$37.1M	\$57.3M
7004-0099	DHCD Administration	\$11.7M	\$15.5M
7004-9316	Residential Assistance for Families in Transition (RAFT)	\$190.0M	\$197.4M
7004-0100	Operation of Homeless Programs	\$12.6M	\$17.7M
7004-0102	Homeless Individual Shelters	\$110.8M	\$110.8M
7004-0104	Home and Healthy for Good Program	\$8.9M	\$8.4M

- Emergency Assistance (7004-0101) would be funded at \$325.3 million**, matching the FY24 appropriation. The Emergency Assistance (EA) program provides emergency shelter and services to certain families with children who are experiencing homelessness and have no safe place to stay.

In the past 12-18 months, the number of families in the EA shelter system has more than doubled, and in August 2023 the Healey-Driscoll Administration declared a shelter capacity emergency. In November the administration took the extraordinary and unprecedented step of instituting a cap on the number of EA-eligible families who were guaranteed immediate placement, creating a waiting list for families deemed eligible beyond the 7500-family cap. Although some overflow shelter space has been created, hundreds of families and children have been left to fend for themselves – including sleeping in unsafe places – until a placement is available. In December 2023 a supplemental budget was enacted, allocating \$250 million for shelter and other costs related to shelter and the influx of migrant families. Alongside the FY25 H2 proposal, the Administration filed another supplemental budget proposal requesting an additional \$215 million for EA shelter, and indicated that a further \$700 million would be required to maintain the EA system at current levels through the end of FY25.

- House 2 proposes language directing the office to conduct a study of EA shelter provider rates and establish a rate setting process
- House 2 proposes to eliminate the obligation that the Executive Office provide the Legislature with 90 days' advance notice before imposing any new eligibility or benefits restrictions. In prior years this language has been critical to giving the Legislature time to ensure that access to EA for children and families is not unduly restricted.
- House 2 proposes to eliminate requirements that the Executive Office report quarterly to the Legislature about what is happening to families, including those denied shelter.

These requirements were included in the FY23 budget, and advocates will work to ensure they continue to be included.

- House 2 proposes language permitting the Executive Office to require families to provide documents proving identity and custody. These and other verification requirements are being litigated in a pending lawsuit, *Garcia et al v. DHCD*.

2. HomeBASE (7004-0108) would be funded \$57.3 million, an increase over the FY24. HomeBASE was created in FY12 to provide short-term rental assistance, instead of shelter, to families experiencing homelessness.

- House 2 retains the recently-increased HomeBASE benefit limit of \$30,000 over a 24-month period, with the possibility of an additional \$15,000 for an additional year.
- House 2 also provides for at least \$2.5 million for administering agencies to provide awards greater than \$30,000 over the 24-month period for families the agency believes need additional funds to resolve a housing crisis.
- House 2 proposes to eliminate the requirement that the executive office provide 90 days' notice before promulgating or amending regulations or policies that would reduce benefits for families. Advocates will continue to push for this important language.
- House 2 proposes to eliminate required reports to the legislature about HomeBASE, including the number and demographics of families served and how many families return to EA shelter. Advocates will continue to push for this important language.

3. Executive Office Administrative line item (7004-0099) would be funded at \$15.5 million, an increase over the FY24 final appropriation.

- House 2 proposes to eliminate a requirement that the Executive Office promulgate and enforce regulations clarifying that recipients of HomeBASE housing assistance should remain eligible for a homelessness priority or preference in state subsidized housing. This language has been included in budgets for the past several years, including the enacted FY23 budget. Advocates will be working to ensure this language continues to be included.
- House 2 retains language requiring the Executive Office to maintain in-person intake locations in the 10 offices that were open as of January 2024.
- House 2 proposes to eliminate language requiring the Executive Office to report to the legislature regarding wait times families are experiencing for direct communication with a staff member, and extends the reporting deadline to March 3, 2025.

4. Residential Assistance for Families in Transition (RAFT) program (7004-9316) would be funded at \$197 million, an increase over the FY24 appropriation. RAFT is

a homelessness prevention program.

- House 2 continues to make RAFT funds available to homeowners for mortgage arrearages, in addition to rent and utility arrearages.
 - House 2 proposes to eliminate required reporting on the reasons for assistance based on the categories used for EA shelter eligibility.
 - House 2 proposes eliminating language that allows for up to \$3 million for recipients who fall under an expanded definition of “family” including unaccompanied youth, elders, persons with disabilities, and other households. Advocates will push for expanded benefits for all household compositions.
 - House 2 continues to require a Notice to Quit for households seeking assistance from RAFT. This poses a significant barrier for many in need of assistance, and increases the risk of eviction. Advocates will continue to push to change this policy.
5. **Homelessness operations account (7004-0100) would be funded at \$17.7 million, an increase over FY24.**
 6. **Shelters and services for homeless individuals (7004-0102) would be funded at \$110.8 million, matching the FY24 appropriation.**
 7. **Home and Healthy for Good program (7004-0104) would be funded at \$8.4 million, a decrease from FY24. This program provides housing for chronically homeless individuals.**

Housing

Account	Description	FY 24 General Appropriation	FY 25 Governor's Budget
7004-9005	Public Housing Operating Subsidies	\$107,000,000	\$112,000,000
7004-9007	Public Housing Reform	\$1,315,000	\$1,250,000
7004-9024	Massachusetts Rental Voucher Program	\$179,000,000	\$219,000,000
7004-9030	Alternative Housing Voucher Program	\$16,863,078	\$16,355,696
7004-3045	Tenancy Preservation Program	\$2,042,755	\$2,042,755
0321-1800	Access to Counsel (new)	-	\$3,500,000

- Public Housing Operating Subsidies (item 7004-9005)**, which provides operating funds for state public housing, would be funded under H. 2 at **\$112 million - a \$5 million increase** over the FY 24 budget. This is a 5% increase over the previous year. It is a start to make up for decades of underfunding that has resulted in deferred maintenance and a serious decline to an aging housing stock. The operating fund also includes funding for local tenant organizations at an increased amount of \$25/unit.

The operating subsidy continues to include language that requires the administration to make efforts to rehabilitate local housing authority family units in need of repairs requiring \$10,000 or less. With thousands of public housing units off line, it is critical to fund, and increasing funding for HLC to bring vacant units back-online to provide more permanent housing resources for very low-income people on the waiting list (although the costs are often more than \$10,000/unit). This line item would further be supplemented by \$50 million in the FY24 emergency assistance supplemental budget with funds targeted for urgently needed public housing capital repairs.

- Public Housing Reform (item 7004-9007)** would be **decreased from \$1.3 million to \$1.2 million**. The line item provides funds to implement [chapter 235 of the Acts of 2014](#) which includes technical assistance training for resident commissioners as well as funding the implementation of CHAMP (Common Housing Application for Massachusetts Programs).
- Massachusetts Rental Voucher Program (MRVP) (item 7004-9024)** provides long-term rental subsidies to approximately 10,000 low-income households for use in the private housing market.
 - The Governor proposes \$219 million for MRVP - an increase of \$40 million from the FY 24 final budget.

- DHCD has shifted MRVP to a “payment standard model” similar to Section 8 giving more choice and flexibility to households. For details on the new system see the MRVP Admin Plan at <https://www.mass.gov/doc/mrvpadministrative-plan-2017/downloads>
 - H2 makes some big changes to MRVP policies, some of which may be cause for some concern which we will need time to analyze. In brief:
 - a) In the FY 24 budget “not less than” 75% of new vouchers were to be targeted to households with incomes at initial occupancy that did not exceed 30% of area median income (AMI). H2 changes that to “up to” 75% (which was what former Governor Baker had proposed) and it triggers at initial eligibility rather than occupancy. We’re not sure the change will make much difference in the incomes of folks who apply to and receive vouchers, and not sure of the impact that the change from “occupancy” to “eligibility” will have– but more to learn.
 - b) H2 continues to give EOHLC discretion to set payment standards using the small area fair market rent (SAFMR). We welcome the inclusion of SAFMRs as they allow a wider range of choices for voucher holders. EOHLC has thankfully used this discretion to set payment standards at 110% of SAFMR, mirroring many Section 8 payment standards This will allow more people to make use of their vouchers, especially in higher rental markets.
 - c) H2 also removes a number of reporting requirements, most of which are covered in other areas of reporting. One worrying reporting requirement that has been stripped that should still be reported on is “actions taken by the executive office to reduce the wait time for households to lease up their voucher.” We know that this is a major problem for voucher holders and the administration should continue to be required to report on what they are doing to address this issue.
 - Lastly, H2 removes the ability for unspent FY2024 dollars from this line item to carry over into the new fiscal year. It is important to note that any unspent dollars are likely due to the struggles of people to access and use their vouchers and not due to lack of need. As we continue to advocate for program improvements to address this issue, we think funds should continue to be rolled over into the new fiscal year.
4. **Alternative Housing Voucher Program (AHVP) (item 7004-9030)** provides rental vouchers to non-elderly persons with disabilities. H. 2 would **provide \$16.4 million** in funding, a slight **decrease in funding** from the previous year in the amount of \$507,000. According to EOHLC, the \$16.4 million would be an increase in funding over what it anticipates actually spending in FY24 and would support funding for 828 vouchers in FY25. As of 12/31/23, EOHLC report that 742 AHVP vouchers were leased. It is not yet clear how many will be leased by 6/30/24, the end of FY24.

New language was also added which appears to provide EOHLC with the discretion to set rents below the 110% threshold of the current fair market rent or current small area fair market rent if it is necessary “as a reasonable accommodation for a household member with a disability or as otherwise directed by the executive office.”

5. **Tenancy Preservation Program (TPP) (item 7004-3045) was level funded at \$2 million.** TPP is a homeless prevention program that helps preserve tenancies of people with disabilities, age impairments, substance abuse, and other mental health challenges, TPP works with individuals and families who are facing eviction as a result of behaviors related to a disability. Case managers locate services and develop and monitor case plans to maintain the tenancy and keeps tenants in permanent housing to prevent tenants from becoming unhoused.
6. **Access to Counsel (item 0321-1800) is a new line item funded at \$3.5 million** to start an access to counsel program, subject to appropriation. Funds are to be distributed by the Massachusetts Legal Assistance Corporation to designated non-profit organizations to increase access to legal representation for low-income tenants and low-income owner occupants in evictions proceedings.

This is a critical step in advancing an access to counsel program, as proposed by S.865, currently in the Housing Committee filed by Senator DiDomenico, and H. 1731, currently in the Judiciary Committee, filed by Representative Rogers and Representative Day. S.865/H.1731 seek to establish an Access to Counsel program to provide full legal representation and to be phased in by MLAC, with input from an Advisory Committee.

In 2023, the Trial Court reported that in non-payment cases in Housing Court, **only 2.5% of tenants were represented, while 90% of landlords were represented.** Data show that children under 5 years of age are the people who face eviction the most Too often evictions push people into homelessness while increasing the strain on our state's shelter system. Four states, 17 cities, and 1 county have established access to counsel programs and studies have repeatedly shown that they save far more money than they cost. Connecticut adopted an Access to Counsel statute similar to the bill under consideration in Massachusetts and saved between \$5.8 and \$6.3 million in 2022.

Legal Services

Account	Description	FY 24 General Appropriation	FY 25 Governor's Budget
0321-1600	MLAC	\$49.00 M	\$50.50 M

For the **Massachusetts Legal Assistance Corporation (item 0321-1600)**, which supports grants for civil legal aid programs for low-income residents of Massachusetts, House 2 is recommending an appropriation of \$50.5 million, an increase of \$1.5 million over the FY 24 appropriation. MLAC is requesting an appropriation of \$55 million in order to help meet the growing statewide demand for civil legal services.

Paid Family and Medical Leave

SECTION 78 of House 2 would increase the administrative funds available to the Department of Family and Medical Leave from the existing Paid Family and Medical Leave Trust Fund. The additional funds would enable the Department to pursue programming changes, translation enhancements and other initiatives that would increase access to the benefits available through the Paid Family and Medical Leave program.

For more information on MLRI's House 2 summary, contact Brian Reichart (breichart@mlri.org) who will direct your question to the appropriate advocate.