

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Human Services to which was referred Senate Bill No.
3 186 entitled “An act relating to the systemic evaluation of recovery residences
4 and recovery communities” respectfully reports that it has considered the same
5 and recommends that the House propose to the Senate that the bill be amended
6 by striking out all after the enacting clause and inserting in lieu thereof the
7 following:

8 Sec. 1. RECOMMENDATION; RECOVERY RESIDENCE

9 CERTIFICATION

10 (a) The Department of Health, in consultation with State agencies and
11 community partners, shall develop and recommend a certification program for
12 recovery residences operating in the State that choose to obtain certification.
13 The certification program shall incorporate those elements of the existing
14 certification program operated by the Vermont Alliance for Recovery
15 Residences. The recommended certification program shall also:

16 (1) identify an organization to serve as the certifying body for recovery
17 residences in the State;

18 (2) propose certification fees for recovery residences;

19 (3) establish a grievance and review process for complaints pertaining to
20 certified recovery residences;

1 (4) identify certification levels, which may include distinct staffing or
2 administrative requirements, or both, to enable a recovery residence to provide
3 more intensive or extensive services;

4 (5) identify eligibility requirements for each level of recovery residence
5 certification, including:

6 (A) staff and administrative requirements for recovery residences,
7 including staff training and supervision;

8 (B) compliance with industry best practices that support a safe,
9 healthy, and effective recovery environment; and

10 (C) data collection requirements related to resident outcomes;

11 (6) establish the required policies and procedures regarding the
12 provision of services by recovery residences, including policies and procedures
13 related to:

14 (A) resident rights, including the following minimum standards for
15 residential agreements:

16 (i) contents of initial resident agreements;

17 (ii) resident discharge policies; and

18 (iii) length of time a bed shall be held for a resident who
19 temporarily exits a recovery residence;

20 (B) resident use of legally prescribed medications; and

21 (C) promoting quality and positive outcomes for residents;

1 (7) recommend an appropriate term for a noncertified recovery
2 residence; and

3 (8) identify minimum reporting requirements about recovery residences
4 by the certifying body, including reports on the temporary and permanent
5 removal of residents, which the certifying body shall aggregate for regular
6 submission to the Department.

7 (b) In developing the certification program recommendations required
8 pursuant to this section, the Department shall consider:

9 (1) available funding streams to sustainably maintain and expand
10 recovery residence services throughout the State;

11 (2) how to address barriers that limit the availability of recovery
12 residences;

13 (3) recovery residence models used in other states and their applicability
14 to Vermont; and

15 (4) how to engage noncertified recovery residences in the certification
16 process.

17 (c) On or before January 15, 2025, the Department shall submit a written
18 report describing its recommended recovery residence certification program
19 and containing corresponding draft legislation to the House Committee on
20 Human Services and to the Senate Committee on Health and Welfare.

21 (d) As used in this section, “recovery residence” means a shared living
22 residence supporting persons recovering from a substance use disorder that

1 provides tenants with peer support and assistance accessing support services
2 and community resources available to persons recovering from substance use
3 disorders.

4 Sec. 2. ASSESSMENT; GROWTH AND EVALUATION OF RECOVERY

5 RESIDENCES

6 (a) The Department of Health shall complete an assessment of certified and
7 noncertified recovery residences in the State, which shall:

8 (1) create a comprehensive inventory of all recovery residences in
9 Vermont, including assessments of proximity to employment, recovery, and
10 other community resources;

11 (2) assess the current capacity, knowledge, and ability of recovery
12 residences to inform data collection and improve outcomes for residents;

13 (3) assess recovery residences' potential for future data collection
14 capacity; and

15 (4) assess the types of data systems currently in use in Vermont's
16 recovery residences and defining the minimum core components of a data
17 system.

18 (b) The Department may obtain technical assistance to complete the
19 assessment required pursuant to subsection (a) of this section.

20 (c) On or before December 15, 2025, the Department shall submit the
21 results of the assessment required pursuant to this section and any

1 recommendations for legislative action to the House Committee on Human
2 Services and to the Senate Committee on Health and Welfare.

3 (d) As used in this section, “recovery residence” means a shared living
4 residence supporting persons recovering from a substance use disorder that
5 provides tenants with peer support and assistance accessing support services
6 and community resources available to persons recovering from substance use
7 disorders.

8 Sec. 3. 9 V.S.A. § 4452 is amended to read:

9 § 4452. EXCLUSIONS

10 (a) Unless created to avoid the application of this chapter, this chapter does
11 not apply to any of the following:

12 * * *

13 (b)(1) Notwithstanding subsection 4467(b) and section 4468 of this chapter
14 only, a recovery residence may immediately exit or transfer a resident if all of
15 the following conditions are met:

16 (A) the recovery residence has developed and adopted a residential
17 agreement:

18 (i) containing a written exit and transfer policy approved by the
19 Vermont Alliance for Recovery Residences or another certifying organization
20 approved by the Department of Health that:

21 (I) addresses the length of time that a bed will be held in the
22 event of a temporary removal;

1 (II) establishes the criteria by which a resident can return to the
2 recovery residence in the event of a temporary removal; and
3 (III) ensures a resident’s possessions will be held not less than
4 60 days in the event of permanent removal;
5 (ii) designating alternative housing arrangements for the resident
6 in the event of an exit or transfer, including contingency plans when alternative
7 housing arrangements are not available;
8 (iii) describing the recovery residence’s substance use policy,
9 which shall exempt the use of a resident’s valid prescription medication when
10 used as prescribed; and
11 (iv) indicating that while the rights provided under chapter 137 of
12 this title otherwise apply, by signing a residential agreement, a resident
13 acknowledges that the recovery residence may cause the resident to be
14 immediately exited or transferred to alternative housing if the resident violates
15 the recovery residence’s substance use policy;
16 (B) the recovery residence has obtained the resident’s written consent
17 to its residential agreement, reaffirmed after seven days;
18 (C) the resident violated the substance use policy in the residential
19 agreement; and
20 (D) the recovery residence has provided or arranged for alternative
21 housing such as a stabilization bed.

1 (2) Relapse of a substance use disorder resulting in exiting a recovery
2 residence shall not be deemed a cause of the resident’s own homelessness for
3 purposes of obtaining emergency housing.

4 (3) As used in this subsection, “recovery residence” means a shared
5 living residence supporting persons recovering from a substance use disorder
6 that:

7 (A) provides tenants with peer support and assistance accessing
8 support services and community resources available to persons recovering
9 from substance use disorders; and

10 (B) is certified by an organization approved by the Department of
11 Health and that is either a Vermont affiliate of the National Alliance for
12 Recovery Residences or another approved organization.

13 Sec. 4. REPORT; RECOVERY RESIDENCES’ EXIT AND TRANSFER

14 DATA

15 (a) On or before January 1, 2025 and 2026, a recovery residence shall
16 report to the certifying body for the recovery residence any exit or transfer of a
17 resident by the recovery residence in the previous year and the asserted basis
18 for exiting or transferring the resident.

19 (b) On or before January 15, 2025 and 2026, the certifying body for a
20 recovery residence shall report to the Department of Health the data received
21 under subsection (a) of this section.

1 (c) **On** or before February 1, **2025 and 2026**, the Department of Health
2 shall submit the data received under subsection (b) of this section to the House
3 Committees on General and Housing and on Human Services and the Senate
4 Committees on Economic Development, Housing and General Affairs and on
5 Health and Welfare.

6 (d) As used in this section, “recovery residence” means a shared living
7 residence supporting persons recovering from a substance use disorder that:

8 (1) provides tenants with peer support and assistance accessing support
9 services and community resources available to persons recovering from
10 substance use disorders; and

11 (2) is certified by an organization approved by the Department of Health
12 and that is either a Vermont affiliate of the National Alliance for Recovery
13 Residences or another approved organization.

14 Sec. **5. SUNSET; RECOVERY RESIDENCES; RESIDENTIAL**
15 **AGREEMENT; REPORTING**

16 **(a) 9 V.S.A. § 4452(b) is repealed on July 1, 2026.**

17 **(b) Sec. 4 (report; recovery residences’ exit and transfer data) is repealed**
18 **on July 1, 2026.**

19 Sec. 6. EFFECTIVE DATE

20 This act shall take effect on July 1, 2024.

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(Committee vote: _____)

Representative _____

FOR THE COMMITTEE