Journal of the Senate

TUESDAY, MARCH 13, 2018

The Senate was called to order by the President.

Devotional Exercises

Devotional exercises were conducted by the Reverend Nancy McHugh of Waitsfield.

Pledge of Allegiance

The President then led the members of the Senate in the pledge of allegiance.

Message from the House No. 27

A message was received from the House of Representatives by Ms. Rebecca Silbernagel, its Second Assistant Clerk, as follows:

Mr. President:

I am directed to inform the Senate that:

The House has passed House bills of the following titles:

H. 614. An act relating to the sale and use of fireworks.

H. 700. An act relating to the Open Meeting Law and meeting minutes.

H. 727. An act relating to the admissibility of a child’s hearsay statements in a proceeding before the Human Services Board.

H. 731. An act relating to miscellaneous workers' compensation and occupational safety amendments.

H. 816. An act relating to informing custodians and guardians of the duties involved with child custody.

In the passage of which the concurrence of the Senate is requested.

The House has adopted House concurrent resolutions of the following titles:


H.C.R. 263. House concurrent resolution congratulating the Mount Holly Community Historical Museum on celebrating its 50th Anniversary.

H.C.R. 264. House concurrent resolution designating the week of May 6–12, 2018 as Teacher Appreciation Week in Vermont.

H.C.R. 265. House concurrent resolution designating Thursday, March 1, 2018 as Vermont Coalition of Runaway and Homeless Youth Programs and Vermont Youth Development Program Awareness Day.

H.C.R. 266. House concurrent resolution congratulating the Robb Family Farm in West Brattleboro on its 110th anniversary.


H.C.R. 269. House concurrent resolution in memory of former Representative and Rockingham Town Moderator Michael P. Harty.

H.C.R. 270. House concurrent resolution honoring Alan Curler of New Haven for his outstanding civic service.

H.C.R. 271. House concurrent resolution in memory of former Mendon Town Clerk Helen Ruth Johnson Lawrence.

In the adoption of which the concurrence of the Senate is requested.

The Governor has informed the House that on the March 1, 2018, he approved and signed bills originating in the House of the following titles:

H. 552. An act relating to approval of the adoption and codification of the charter of the Town of Ferrisburgh.

H. 568. An act relating to approval of amendments to the charter of the Town of Barre.

H. 573. An act relating to approval of an amendment to the charter of the City of Rutland.

Message from the House No. 28

A message was received from the House of Representatives by Ms. Melissa Kucserik, its First Assistant Clerk, as follows:

Mr. President:

I am directed to inform the Senate that:

The House has passed House bills of the following titles:
H. 237. An act relating to saliva testing.

H. 675. An act relating to conditions of release prior to trial.

H. 684. An act relating to professions and occupations regulated by the Office of Professional Regulation.

In the passage of which the concurrence of the Senate is requested.

**Bills Referred to Committee on Appropriations**

Senate bills of the following titles, appearing on the Calendar for notice, and carrying an appropriation or requiring the expenditure of funds, under the rule were severally referred to the Committee on Appropriations:

- S. 111. An act relating to privatization contracts.
- S. 260. An act relating to funding the cleanup of State waters.
- S. 273. An act relating to miscellaneous law enforcement amendments.
- S. 281. An act relating to the Systemic Racism Mitigation Oversight and Equity Review Board.

**Bills Referred to Committee on Finance**

Senate bills of the following titles, appearing on the Calendar for notice, and affecting the revenue of the state, under the rule were severally referred to the Committee on Finance:

- S. 94. An act relating to promoting remote work and flexible work arrangements.
- S. 253. An act relating to Vermont’s adoption of the Interstate Medical Licensure Compact.
- S. 255. An act relating to miscellaneous agricultural subjects.
- S. 269. An act relating to blockchain, cryptocurrency, and financial technology.
- S. 276. An act relating to rural economic development.

**Joint Senate Resolution Adopted on the Part of the Senate**

**J.R.S. 51.**

Joint Senate resolution of the following title was offered, read and adopted on the part of the Senate, and is as follows:

By Senator Ashe,

**J.R.S. 51.** Joint resolution relating to weekend adjournment.

*Resolved by the Senate and House of Representatives:*
That when the two Houses adjourn on Friday, March 16, 2018, it be to meet again no later than Tuesday, March 20, 2018.

**Bills Referred**

House bills of the following titles were severally read the first time and referred:

**H. 237.**

An act relating to saliva testing.
To the Committee on Judiciary.

**H. 614.**

An act relating to the sale and use of fireworks.
To the Committee on Economic Development, Housing and General Affairs.

**H. 675.**

An act relating to conditions of release prior to trial.
To the Committee on Judiciary.

**H. 684.**

An act relating to professions and occupations regulated by the Office of Professional Regulation.
To the Committee on Government Operations.

**H. 700.**

An act relating to the Open Meeting Law and meeting minutes.
To the Committee on Government Operations.

**H. 711.**

An act relating to employment protections for crime victims.
To the Committee on Economic Development, Housing and General Affairs.

**H. 727.**

An act relating to the admissibility of a child’s hearsay statements in a proceeding before the Human Services Board.
To the Committee on Judiciary.
H. 728.

An act relating to bail reform.
To the Committee on Judiciary.

H. 731.

An act relating to miscellaneous workers' compensation and occupational safety amendments.
To the Committee on Economic Development, Housing and General Affairs.

H. 836.

An act relating to electronic court filings for relief from abuse orders.
To the Committee on Judiciary.

H. 901.

An act relating to health information technology and health information exchange.
To the Committee on Health and Welfare.

Bill Amended; Third Reading Ordered

S. 206.

Senator Soucy, for the Committee on Economic Development, Housing and General Affairs, to which was referred Senate bill entitled:

An act relating to business consumer protection for point-of-sale equipment leases.

Reported recommending that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 9 V.S.A. chapter 63, subchapter 9 is added to read:

Subchapter 9. Credit Card Terminal Leases

§ 2482h. SOLICITATION; MATERIAL MISREPRESENTATION

(a) As used in this subchapter, “credit card terminal” means physical equipment used at the point of sale to accept payment by a payment card, including a credit card, debit card, EBT card, prepaid card, or gift card.

(b) A person who solicits a lease for the use of a credit card terminal:

(1) shall accurately disclose, orally and in writing, the nature and scope of his or her relationship to the person or persons who own, lease, service, and finance the credit card terminal or provide related services, including whether
he or she is an employee, independent contractor, or agent of one or more of those persons:

(2) shall accurately disclose the terms of a lease and whether oral statements or commitments he or she makes to the prospective lessee while soliciting a lease are included in the terms of the lease and enforceable against a party to a lease; and

(3) shall not make a material misrepresentation to the prospective lessee concerning the nature of his or her relationships pursuant to subdivision (1) of this subsection, or concerning a lease and its terms pursuant to subdivision (2) of this subsection.

§ 2482i. CREDIT CARD TERMINAL; LEASE PROVISIONS

The following provisions apply to a lease for the use of a credit card terminal:

(1) Plain language. The party primarily responsible for drafting the lease shall use plain language designed to be understood by ordinary consumers, presented in a reasonable format, typeface, and font.

(2) Lease; option to purchase; total cost; disclosure.

(A) The lease shall specify whether the consumer has an option to purchase the credit card terminal that is the subject of the lease, and if so, the purchase price and terms.

(B) If the lessor does not offer the option to purchase the credit card terminal, the lease shall include a disclaimer that the lessee may be able to purchase the same or a similar credit card terminal from another source.

(C) The lease shall specify the terms of the lease and shall provide a cap on the total cost the lessee is required to pay to use the credit card terminal, which shall not exceed 300 percent of the lessor’s original purchase price for the credit card terminal or, if the lessor is the manufacturer of the credit card terminal, its total cost of manufacture.

(3) Relationship to processing services and fees.

(A) The lease shall not include terms governing credit card processing services or fees, which shall be the subject of a separate agreement between the lessee of the credit card terminal and the processing service provider.

(B) The lease shall clearly disclose that the lessee has no obligation to contract or negotiate with the lessor, or any affiliate, for processing services or fees.
(C) A lessor shall not condition the terms of the lease, or increase the total cost to lease or purchase the credit card terminal, based on whether the lessee agrees to contract with the lessor, or any affiliate, for processing services.

(4) Contact information. The lease shall clearly and conspicuously identify the lessor of the credit card terminal and the name, mailing address, telephone number, and relationship to the lessor of:

(A) the person to whom the lessee is required to make payments for the credit card terminal;

(B) the person whom the lessee should contact with questions or problems concerning the credit card terminal;

(C) the person to whom the lessee should deliver the credit card terminal for return or repair; and

(D) the sales representative or other person acting with actual or apparent authority on behalf of the lessor to solicit the lease.

(5) Record keeping. A lessor shall retain the following information in electronic format or hard copy for not less than four years after the lease ends:

(A) the lease; and

(B) a record that establishes the lessor’s original purchase price for the credit card terminal or, if the lessor is the manufacturer of the credit card terminal, its total cost of manufacture.

(6) Prohibited provisions.

(A) If the judicial forum chosen by the parties to the lease is a forum that would not otherwise have jurisdiction over the lessee, the choice is not enforceable.

(B) A lessor shall not collect any charge or fee for business personal property tax on the credit card terminal unless the tax is actually imposed.

(7) Duty to provide lease; right to cancel.

(A) A lessor shall have the duty to provide a copy of the executed lease to the lessee.

(B) A lessee shall have the right to cancel a lease not later than 45 days after the lessor provides a copy of the executed lease to the lessee.

§ 2482j. VIOLATIONS

A person who violates this subchapter commits an unfair and deceptive act in trade and commerce in violation of section 2453 of this title.
Sec. 2. RULEMAKING

On or before October 1, 2018, the Attorney General shall initiate rulemaking to implement the provisions of this act, including rules to govern minimum disclosure and formatting requirements.

Sec. 3. EFFECTIVE DATE

This act shall take effect on July 1, 2018.

And that when so amended the bill ought to pass.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, the recommendation of amendment was agreed to, and third reading of the bill was ordered.

Bill Amended; Third Reading Ordered

S. 261.

Senator Lyons, for the Committee on Health and Welfare, to which was referred Senate bill entitled:

An act relating to mitigating trauma and toxic stress during childhood by strengthening child and family resilience.

Reported recommending that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

*** Purpose ***

Sec. 1. PURPOSE

It is the purpose of this act to create a consistent family support system by enhancing opportunities to build child and family resilience for all families throughout the State that are experiencing childhood trauma and toxic stress. While significant efforts to provide upstream services are already well under way in many parts of the State, better coordination is necessary to ensure that gaps in services are addressed and redundancies do not occur. Coordination of upstream services that are cost effective and either research based or research informed decrease the necessity for more substantial downstream services, including services for opioid addiction and other substance use disorders.

*** Human Services Generally ***

Sec. 2. 33 V.S.A. § 3402 is added to read:

§ 3402. DEFINITIONS

As used in this chapter:

(1) “Toxic stress” means strong, frequent, or prolonged experience of adversity without adequate support.
(2) “Trauma-informed” means a type of program, organization, or system that recognizes the widespread impact of trauma and potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved in a system; responds by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks actively to resist retraumatization and build resilience among the population served.

Sec. 3. 33 V.S.A. § 3403 is added to read:

§ 3403. EXPANSION OF SUPPORT SERVICES IN PEDIATRIC PRIMARY CARE

The Commissioner for Children and Families, in collaboration with the State’s parent-child center network, shall implement a program linking pediatric primary care with support services in each county of the State. The Commissioner shall select at least one new county annually in which to implement a program based on regional need and available pediatric and parent-child center partners. The Commissioner may accept private grants and donations for the purpose of funding the expansion. Each county shall have at least one pediatric primary care and support service partnership on or before January 1, 2023.

Sec. 4. 33 V.S.A. § 3404 is added to read:

§ 3404. CHILDREN OF INCARCERATED PARENTS

The Departments for Children and Families and of Corrections shall make joint referrals as appropriate for children of incarcerated parents to existing programs within each child’s community that address childhood trauma, toxic stress, and resilience building.

Sec. 5. DIRECTOR OF PREVENTION

(a)(1) The position of Director of Prevention shall be established within the Agency of Human Services for a period of six fiscal years. It is the intent of the General Assembly that the Director position is funded by repurposing existing expenditures and resources designated for substance use disorder, including opioid addiction, and related prevention activities.

(2) The Director shall direct the Agency’s response on behalf of clients who have experienced childhood trauma and toxic stress, including:

(A) reducing or eliminating ongoing sources of childhood trauma and toxic stress;

(B) strengthening existing programs and establishing new programs within the Agency that build resilience among individuals who have experienced childhood trauma and toxic stress;
(C) providing advice and support to the Secretary of Human Services and facilitating communication and coordination among the Agency’s departments with regard to childhood trauma, toxic stress, and the promotion of resilience building;

(D) training all Agency employees on childhood trauma, toxic stress, resilience building, and the Agency’s Trauma-Informed System of Care policy and posting training opportunities for child care providers, afterschool program providers, educators, and health care providers on the Agency’s website;

(E) collaborating with community partners to build consistency between trauma-informed systems that address medical and social service needs, including serving as a conduit between providers and the public;

(F) coordinating the Agency’s approach to childhood trauma, toxic stress, and resilience building with any similar efforts occurring elsewhere in State government;

(G) providing support for and disseminating educational materials pertaining to the Agency’s Building Flourishing Communities initiative;

(H) regularly meeting with the Child and Family Trauma Work Group; and

(I) ensuring that the Agency and its community partners are leveraging all available federal funds for services related to preventing and mitigating childhood trauma and toxic stress and building child and family resilience.

(b) The Director shall present updates on the progress of his or her work to the House Committees on Health Care and on Human Services and to the Senate Committee on Health and Welfare in January of each year between 2019 and 2024, including any recommendations for legislative action.

(c) On or before January 15, 2024, the Director shall submit a written report to the House Committees on Health Care and on Human Services and to the Senate Committee on Health and Welfare summarizing the Director’s achievements, existing gaps in trauma-informed services, and recommendations for future action.

Sec. 6. COORDINATED RESPONSE TO CHILDHOOD TRAUMA WITH JUDICIAL BRANCH

On or before January 15, 2020, the Chief Justice of the Supreme Court or designee and the Agency of Human Services’ Director of Prevention shall jointly present an action plan to the House Committees on Health Care and on Human Services and to the Senate Committee on Health and Welfare for better coordinating the Judicial and Executive Branches’ approaches for preventing
and mitigating childhood trauma and toxic stress and building child and family resilience, including any recommendations for legislative action.

Sec. 7. TRAUMA-INFORMED TRAINING FOR CHILD CARE PROVIDERS

The Agency of Human Services’ Director of Prevention, in consultation with stakeholders, shall develop and implement a plan to promote access to and training on the use of trauma-informed practices that build resilience among children and students for the employees of registered and licensed family child care homes, center-based child care and preschool programs, and afterschool programs. On or before January 15, 2019, the Director shall present information about the plan and its implementation to the House Committees on Health Care and on Human Services and to the Senate Committee on Health and Welfare. “Trauma-informed” shall have the same meaning as in 33 V.S.A. § 3402.

Sec. 8. CHILD CARE AND COMMUNITY-BASED FAMILY SUPPORT SYSTEM; EVALUATION

The Agency of Human Services’ Director of Prevention shall develop a framework for evaluating the workforce, payment streams, and real costs associated with the State’s child care system and community-based family support system. The framework shall indicate the most appropriate entity to conduct this evaluation as well as articulate the anticipated outcomes of the evaluation. The Director shall present the framework to the House Committees on Health Care and on Human Services and to the Senate Committee on Health and Welfare on or before January 15, 2019.

Sec. 9. SYSTEM EVALUATION

(a) The Commissioner of Health shall determine the appropriate methodology for evaluating the work of the Agency of Human Services related to childhood trauma, toxic stress, and resilience that shall include use of results-based accountability measures currently collected by the Agency. On or before January 1, 2019, the Commissioner shall submit the recommended evaluation methodology to the Director of Prevention and the House Committees on Health Care and on Human Services and the Senate Committee on Health and Welfare.

(b) The Director shall implement the Commissioner’s recommended evaluation methodology for the purpose of understanding better the strengths and weaknesses of current efforts to address childhood trauma, toxic stress, and resilience statewide.

(c) As used in this section, “toxic stress” shall have the same meaning as in 33 V.S.A. § 3402.
Sec. 10. BRIGHT FUTURES GUIDELINES; INTENT

(a) It is the intent of the General Assembly that the Bright Futures Guidelines shall serve as a bridge between clinical and community providers in a shared goal to promote healthy child and family development.

(b) The Bright Futures Guidelines shall be used as a resource in Vermont for all individuals and organizations that provide care and support services to children and families for the purpose of promoting healthy development and encouraging screening for social determinants of health.

(c) The Bright Futures Guidelines shall inform the work of the Agency of Human Services’ Building Flourishing Communities initiative.

Sec. 11. 18 V.S.A. § 702 is amended to read:

§ 702. BLUEPRINT FOR HEALTH; STRATEGIC PLAN

* * *

(c) The Blueprint shall be developed and implemented to further the following principles:

(1) The primary care provider should serve a central role in the coordination of medical care and social services and shall be compensated appropriately for this effort;

(2) Use of information technology should be maximized;

(3) Local service providers should be used and supported, whenever possible;

(4) Transition plans should be developed by all involved parties to ensure a smooth and timely transition from the current model to the Blueprint model of health care delivery and payment;

(5) Implementation of the Blueprint in communities across the State should be accompanied by payment to providers sufficient to support care management activities consistent with the Blueprint, recognizing that interim or temporary payment measures may be necessary during early and transitional phases of implementation;

(6) Interventions designed to prevent chronic disease and improve outcomes for persons with chronic disease should be maximized, should target specific chronic disease risk factors, and should address changes in individual behavior, the physical, mental, and social environment, and health care policies and systems.
(7) Providers should assess trauma and toxic stress to ensure that the needs of the whole patient are addressed and opportunities to build resilience and community supports are maximized.

* * *

Sec. 12. 18 V.S.A. § 9382 is amended to read:

§ 9382. OVERSIGHT OF ACCOUNTABLE CARE ORGANIZATIONS

(a) In order to be eligible to receive payments from Medicaid or commercial insurance through any payment reform program or initiative, including an all-payer model, each accountable care organization shall obtain and maintain certification from the Green Mountain Care Board. The Board shall adopt rules pursuant to 3 V.S.A. chapter 25 to establish standards and processes for certifying accountable care organizations. To the extent permitted under federal law, the Board shall ensure these rules anticipate and accommodate a range of ACO models and sizes, balancing oversight with support for innovation. In order to certify an ACO to operate in this State, the Board shall ensure that the following criteria are met:

* * *

(17) For preventing and addressing the impacts of adverse childhood experiences and other traumas, the ACO provides connections to existing community services and incentives, such as developing quality-outcome measurements for use by primary care providers working with children and families, developing partnerships between nurses and families, providing opportunities for home visits and other community services, and including parent-child centers, designated agencies, and the Department of Health’s local offices as participating providers in the ACO.

* * *

Sec. 13. SCHOOL NURSES; HEALTH-RELATED BARRIERS TO LEARNING

On or before September 1, 2018, the Agency of Human Services’ Director of Prevention shall coordinate with the Vermont State School Nurse Consultant and with the Agency of Education systematically to support local education agencies, school administrators, and school nurses in ensuring that all students’ health appraisal forms are completed on an annual basis to enable school nurses to identify students’ health-related barriers to learning.
Sec. 14. 33 V.S.A. § 2004a is amended to read:

§ 2004a. EVIDENCE-BASED EDUCATION AND ADVERTISING FUND

(a) The Evidence-Based Education and Advertising Fund is established in the State Treasury as a special fund to be a source of financing for activities relating to fund collection and analysis of information on pharmaceutical marketing activities under 18 V.S.A. §§ 4632 and 4633; for analysis of prescription drug data needed by the Office of the Attorney General for enforcement activities; for the Vermont Prescription Monitoring System established in 18 V.S.A. chapter 84A; for the evidence-based education educational program established in 18 V.S.A. chapter 91, subchapter 2; for statewide unused prescription drug disposal initiatives; for the prevention of prescription drug misuse, abuse, and diversion; for prevention and treatment of substance use disorder; for exploration of nonpharmacological approaches to pain management; for a hospital antimicrobial program for the purpose of reducing hospital-acquired infections; for the purchase and distribution of naloxone to emergency medical services personnel; for evidence-based or evidence-informed opioid-related programming conducted for the benefit of children and families; and for the support of any opioid-antagonist education educational, training, and distribution program operated by the Department of Health or its agents. Monies deposited into the Fund shall be used for the purposes described in this section.

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*** Education ***

Sec. 15. 16 V.S.A. § 136 is amended to read:

§ 136. WELLNESS PROGRAM; ADVISORY COUNCIL ON WELLNESS AND COMPREHENSIVE HEALTH

(c) The Secretary shall collaborate with other agencies and councils working on childhood wellness to:

(1) Supervise the preparation of appropriate nutrition and fitness curricula for use in the public schools, promote programs for the preparation of teachers to teach these curricula, and assist in the development of wellness programs.

(2) [Repealed.]

(3) Establish and maintain a website that displays data from a youth risk behavior survey in a way that enables the public to aggregate and disaggregate
the information. The survey may include questions pertaining to adverse childhood experiences, meaning those potentially traumatic events that occur during childhood and can have negative, lasting effects on an individual’s health and well-being.

(4) Research funding opportunities for schools and communities that wish to build wellness programs and make the information available to the public.

(5) Create a process for schools to share with the Department of Health any data collected about the height and weight of students in kindergarten through grade six. The Commissioner of Health may report any data compiled under this subdivision on a countywide basis. Any reporting of data must protect the privacy of individual students and the identity of participating schools.

* * *

Sec. 16. 16 V.S.A. § 2902 is amended to read:

§ 2902. TIERED SYSTEM OF SUPPORTS AND EDUCATIONAL SUPPORT TEAM

* * *

(b) The tiered system of supports shall:

(1) be aligned as appropriate with the general education curriculum;

(2) be designed to enhance the ability of the general education system to meet the needs of all students;

(3) be designed to provide necessary supports promptly, regardless of an individual student’s eligibility for categorical programs;

(4) seek to identify and respond to students in need of support for at-risk behaviors and to students in need of specialized, individualized behavior supports; and

(5) provide all students with a continuum of evidence-based and research-based behavior practices, including trauma-sensitive programming, that teach and encourage prosocial skills and behaviors schoolwide;

(6) promote collaboration with families, community supports, and the system of health and human services; and
(7) provide professional development as needed to support all staff in implementing the system.

(c) The educational support team for each public school in the district shall be composed of staff from a variety of teaching and support positions and shall:

(1) Determine which enrolled students require additional assistance to be successful in school or to complete secondary school based on indicators set forth in guidelines developed by the Secretary, such as academic progress, attendance, behavior, or poverty. The educational support team shall pay particular attention to students during times of academic or personal transition and to those students who have been exposed to trauma.

* * *

Sec. 17. 16 V.S.A. § 2904 is amended to read:

§ 2904. REPORTS

Annually, each superintendent shall report to the Secretary in a form prescribed by the Secretary, on the status of the educational support systems in each school in the supervisory union. The report shall describe the services and supports that are a part of the educational support systems, how they are funded, and how building the capacity of the educational support systems has been addressed in the school action plans, school’s continuous improvement plan and professional development and shall be in addition to the report required of the educational support systems team in subdivision 2902(c)(6) of this chapter. The superintendent’s report shall include a description and justification of how funds received due to Medicaid reimbursement under section 2959a of this title were used.

* * * Appropriation * * *

Sec. 18. APPROPRIATION

The amount of $119,503.00 shall be appropriated from funds designated for the Office of the Secretary of Human Services in the fiscal year 2019 budget bill to pay for the Director of Prevention position established in Sec. 5 of this act.

* * * Effective Date * * *

Sec. 19. EFFECTIVE DATE

This act shall take effect on July 1, 2018.

And that when so amended the bill ought to pass.
Senator Kitchel, for the Committee on Appropriations, to which the bill was referred, reported that they have considered the same and recommend that the bill be amended as recommended by the Committee on Health and Welfare with the following amendments thereto:

First: In Sec. 5, in the section heading, after “PREVENTION”, by inserting AND HEALTH IMPROVEMENT and by striking out subdivision (a)(1) and inserting in lieu thereof a new subdivision (a)(1) to read as follows:

(a)(1) The position of Director of Prevention and Health Improvement shall be established within the Agency of Human Services. It is the intent of the General Assembly that the Director position be funded by the repurposing of existing expenditures and resources, including the potential reassignment of existing positions. If the Secretary determines to fund this position by reassigning an existing position, he or she shall propose to the Joint Fiscal Committee prior to October 1, 2018 any necessary statutory modifications to reflect the reassignment.

Second: In Sec. 6, after “Director of Prevention” and before “shall”, by inserting and Health Improvement

Third: In Sec. 7, in the first sentence, after “Director of Prevention” and before the comma, by inserting and Health Improvement

Fourth: In Sec. 8, in the first sentence, after “Director of Prevention”, by inserting and Health Improvement

Fifth: In Sec. 9, in subsection (a), in the second sentence, after “Director of Prevention”, by inserting and Health Improvement

Sixth: In Sec. 13, after “Director of Prevention” and before “shall”, by inserting and Health Improvement

Seventh: By striking out Sec. 18 in its entirety and inserting in lieu thereof a new Sec. 18 to read as follows:

Sec. 18. REALLOCATION OF RESOURCES

(a) In an effort to eliminate duplicated efforts and realize savings, the Secretary of Human Services shall review working groups, commissions, and other initiatives pertaining to childhood trauma, substance use disorder, and mental health for the purpose of determining their effectiveness and budgetary impact. The working groups, commissions, and other initiatives addressed shall include:

(1) the Alcohol and Drug Abuse Council pursuant to 18 V.S.A. § 4803;

(2) the Controlled Substances and Pain Management Advisory Council pursuant 18 V.S.A. § 4255;
(3) the Domestic Violence Fatality Review Commission pursuant to 15 V.S.A. § 1140;

(4) the Mental Health Crisis Response Commission pursuant to 18 V.S.A. § 7257a;

(5) the Tobacco Evaluation and Review Board pursuant to 18 V.S.A. § 9504;

(6) the Governor’s Marijuana Advisory Commission; and

(7) the Governor’s Opioid Coordination Council.

(b) On or before October 1, 2018, the Secretary shall submit a report containing findings and recommendations for legislative action to the Senate Committees on Appropriations and on Health and Welfare and to the House Committees on Appropriations, on Health Care, and on Human Services. Any savings identified in conducting this review may be used to fund the Director of Prevention and Health Improvement position established in Sec. 5 of this act.

And that when so amended the bill ought to pass.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, and the recommendation of amendment of the Committee on Health and Welfare was amended as recommended by the Committee on Appropriations.

Thereupon, the pending question, Shall the bill be amended as recommended by the Committee on Health and Welfare, as amended?, was decided in the affirmative.

Thereupon, third reading of the bill was ordered.

Bills Amended; Third Readings Ordered

S. 166.

Senator Rodgers, for the Committee on Institutions, to which was referred Senate bill entitled:

An act relating to the provision of medication-assisted treatment for inmates.

Reported recommending that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:
Sec. 1. 18 V.S.A. § 4750 is added to read:

§ 4750. DEFINITION

As used in this chapter, “medication-assisted treatment” means the use of certain medications, including either methadone or buprenorphine, in combination with any clinically indicated counseling and behavioral therapies for the treatment of opioid use disorder.

Sec. 2. 28 V.S.A. § 801 is amended to read:

§ 801. MEDICAL CARE OF INMATES

* * *

(b) Upon admission to a correctional facility for a minimum of 14 consecutive days, each inmate shall be given a physical assessment screened for opioid use disorders as part of the inmate’s initial health care screening unless extenuating circumstances exist.

* * *

(e)(1) Except as otherwise provided in this subsection, an offender inmate who is admitted to a correctional facility while under the medical care of a licensed physician, a licensed advanced practice registered nurse, or a licensed nurse practitioner and who is taking medication at the time of admission pursuant to a valid prescription as verified by the inmate’s pharmacy of record, primary care provider, other licensed care provider, or as verified by the Vermont Prescription Monitoring System or other prescription monitoring or information system, including buprenorphine, methadone, or other medication prescribed in the course of medication-assisted treatment, shall be entitled to continue that medication and to be provided that medication by the Department pending an evaluation by a licensed physician, a licensed physician assistant, a licensed nurse practitioner, or a licensed advanced practice registered nurse. However, the Department may defer provision of medication in accordance with this subsection if, in the clinical judgment of a licensed physician, a physician assistant, a nurse practitioner, or an advanced practice registered nurse, it is not in the inmate’s best interests to continue the medication at that time. The licensed practitioner who makes the clinical judgment shall enter the reason for the discontinuance into the inmate’s permanent medical record. It is not the intent of the General Assembly that this subsection shall create a new or additional private right of action.

(2) If an inmate screens positive as having a moderate or high risk for opioid use disorder pursuant to subsection (b) of this section and has not been receiving medication-assisted treatment prior to admission to a correctional facility, the inmate may elect to commence buprenorphine-specific medication-
assisted treatment if it is deemed clinically appropriate and in the inmate’s best interests by a qualified provider.

(3) As used in this subsection, “medication-assisted treatment” shall have the same meaning as in 18 V.S.A. § 4750.

* * *

Sec. 3. RECEIPT OF METHADONE-SPECIFIC MEDICATION-ASSISTED TREATMENT BY INMATES; PLAN

(a) The Commissioners of Corrections and of Health jointly shall develop a plan to operationalize the use of methadone as part of medication-assisted treatment provided to inmates housed in a correctional facility who screen positive as moderate or high risk opioid users while in the custody of the Department of Corrections. The plan shall address:

(1) whether the Department of Health’s or the Department of Corrections’ contracted provider of health care services shall determine whether medication-assisted treatment is deemed clinically appropriate and whether it is in an inmate’s best interests for methadone-specific medication-assisted treatment to be initiated while the individual is in the Department of Corrections’ custody or upon his or her reentry to the community;

(2) whether the prescriptive authority for methadone shall be maintained by designated community-based treatment providers or the Department of Corrections’ contracted provider of health care services and how it shall be administered to appropriate inmates; and

(3) an estimate of the costs to implement the plan developed pursuant to this section.

(b) On or before October 1, 2018, the Commissioners jointly shall submit the plan developed pursuant to subsection (a) of this section to the Joint Legislative Justice Oversight Committee. If there are not barriers beyond the control of the State, the Departments shall take steps to operationalize fully the plan, including addressing any budgetary concerns.

(c) As used in this section, “medication-assisted treatment” shall have the same meaning as in 18 V.S.A. § 4750.

Sec. 4. MEMORANDUM OF UNDERSTANDING; MEDICATION-ASSISTED TREATMENT IN STATE CORRECTIONAL FACILITIES

(a) On or before December 31, 2018, the Departments of Corrections and of Health may enter into a memorandum of understanding with opioid treatment programs throughout the State, certified and accredited pursuant to 42 C.F.R. part 8, that serve regions in which a State correctional facility is
located to provide medication-assisted treatment to inmates who screen positive as moderate or high risk opioid users. Treatment received pursuant to this section shall be coordinated pursuant to 18 V.S.A. § 4753.

(b) As used in this section, “medication-assisted treatment” shall have the same meaning as in 18 V.S.A. § 4750.

Sec. 5. EFFECTIVE DATE

This act shall take effect on July 1, 2018.

And that when so amended the bill ought to pass.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, the recommendation of amendment was agreed to, and third reading of the bill was ordered.

S. 229.

Senator Baruth, for the Committee on Education, to which was referred Senate bill entitled:

An act relating to State Board of Education approval of independent schools.

Reported recommending that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. FINDINGS AND GOALS

(a) The General Assembly created the Approved Independent Schools Study Committee in 2017 Acts and Resolves No. 49 to consider and make recommendations on the criteria to be used by the State Board of Education for designation of an “approved” independent school. The Committee was specifically charged to consider and make recommendations on:

(1) the school’s enrollment policy and any limitation on a student’s ability to enroll;

(2) how the school should be required to deliver special education services and which categories of these services; and

(3) the scope and nature of financial information and special education information that should be required to be reported by the school to the State Board or Agency of Education.

(b) The General Assembly in Act 49 directed the State Board of Education to suspend further development of the amendments to its rules for approval of independent schools pending receipt of the report of the Committee.
(c) The Committee issued its report in December 2017, noting that, while it was unable to reach consensus on specific legislative language, it did agree unanimously that Vermont students with disabilities should be free to attend the schools that they, their parents, and their local education agency deem appropriate to them.

(d) This act completes that work and provides the direction necessary for the State Board of Education to develop further the amendments to its rules for approval of independent schools.

Sec. 2. 16 V.S.A. § 166 is amended to read:

§ 166. APPROVED AND RECOGNIZED INDEPENDENT SCHOOLS

* * *

(b) Approved independent schools.

(1) On application, the State Board shall approve an independent school that offers elementary or secondary education if it finds, after opportunity for hearing, that the school provides a minimum course of study pursuant to section 906 of this title and that it substantially complies with all statutory requirements for approved independent schools and the Board’s rules for approved independent schools. An independent school that intends to accept public tuition shall be approved by the State Board only on the condition that the school agrees, notwithstanding any provision of law to the contrary, to enroll any student who requires special education services and who is placed in or referred to the approved independent school as an appropriate placement and least restrictive environment for the student by the student’s individualized education plan team or by the local education agency; provided, however, that this requirement shall not apply to an independent school that limits enrollment to students who are on an individualized education plan or a plan under Section 504 of the Rehabilitation Act of 1973 and who are enrolled pursuant to a written agreement between the local education agency and the school.

(2) Except as provided in subdivision (6) of this subsection, the Board’s rules must at minimum require that the school has the resources required to meet its stated objectives, including financial capacity, faculty who are qualified by training and experience in the areas in which they are assigned, and physical facilities and special services that are in accordance with any State or federal law or regulation.

(3) Approval may be granted without State Board evaluation in the case of any school accredited by a private, State, or regional agency recognized by the State Board for accrediting purposes, provided that the State Board shall determine that the school complies with all student enrollment provisions required by law.
(5) The State Board may revoke, or suspend, or impose conditions upon the approval of an approved independent school, after having provided an opportunity for a hearing, for substantial failure to comply with the minimum course of study, for failure to demonstrate that the school has the resources required to meet its stated objectives, for failure to comply with statutory requirements or the Board’s rules for approved independent schools, or for failure to report under subdivision (4) of this subsection (b). Upon that revocation or suspension, students required to attend school who are enrolled in that school shall become truant unless they enroll in a public school, an approved or recognized independent school, or a home study program.

(8)(A) If an approved independent school experiences any of the following financial reporting events during the period of its approved status, the school shall notify the Secretary of Education within five days after its knowledge of the event unless the failure is de minimis:

(i) the school’s failure to file its federal or State tax returns when due, after permissible extension periods have been taken into account;

(ii) the school’s failure to meet its payroll obligations as they are due or to pay federal or State payroll tax obligations as they are due;

(iii) the school’s failure to maintain required retirement contributions;

(iv) the school’s use of designated funds for nondesignated purposes;

(v) the school’s inability to fully comply with the financial terms of its secured installment debt obligations over a period of two consecutive months, including the school’s failure to make interest or principal payments as they are due or to maintain any required financial ratios;

(vi) the withdrawal or conditioning of the school’s accreditation on financial grounds by a private, State, or regional agency recognized by the State Board for accrediting purposes; or

(vii) the school’s insolvency, as defined in 9 V.S.A. § 2286(a).

(B)(i) If the State Board reasonably believes that an approved independent school lacks financial capacity to meet its stated objectives during the period of its approved status, then the State Board shall notify the school in writing of the reasons for this belief and permit the school a reasonable opportunity to respond.
(ii) If the State Board, after having provided the school a reasonable opportunity to respond, does not find that the school has satisfactorily responded or demonstrated its financial capacity, the State Board may establish a review team, that, with the consent of the school, includes a member of the Council of Independent Schools, to:

(I) conduct a school visit to assess the school’s financial capacity;

(II) obtain from the school such financial documentation as the review team requires to perform its assessment; and

(III) submit a report of its findings and recommendations to the State Board.

(iii) If the State Board concludes that an approved independent school lacks financial capacity to meet its stated objectives during the period of its approved status, the State Board may take any action that is authorized by this section.

(iv) In considering whether an independent school lacks financial capacity to meet its stated objectives during the period of its approved status and what actions the State Board should take if it makes this finding, the State Board may consult with, and draw on the analytical resources of, the Vermont Department of Financial Regulation.

(C) Information provided by an independent school under this subsection that is not already in the public domain is exempt from public inspection and copying under the Public Records Act and shall be kept confidential.

* * *

Sec. 3. 16 V.S.A. § 2973 is amended to read:

§ 2973. INDEPENDENT SCHOOL TUITION RATES SCHOOLS

(a)(1) Notwithstanding any provision of law to the contrary, an approved independent school that accepts public tuition shall enroll any student with an individualized education plan who requires special education services and who is placed in the approved independent school as an appropriate placement and least restrictive environment for the student by the student’s individualized education plan team or by the local education agency (LEA); provided, however, that this requirement shall not apply to an independent school that limits enrollment to students who are on an individualized education plan or a plan under Section 504 of the Rehabilitation Act of 1973 and who are enrolled pursuant to a written agreement between the LEA and the school.
(2) In placing a student with an independent school under subdivision (1) of this subsection, the student’s individualized education plan team and the LEA shall comply with all applicable federal and State requirements.

(3) An approved independent school is not required to demonstrate that it has the resources to serve every category of special education in order to be approved or retain its approval to receive public funding for general tuition.

(4) The terms “special education services,” “LEA,” and “individualized education plan” or “IEP” as used in this section shall have the same meanings as defined by State Board rules.

(b)(1) The Secretary of Education shall establish minimum standards of services for students receiving special education services in independent schools in Vermont; shall set, after consultation with independent schools in Vermont, the maximum rates to be paid by the Agency and school districts for tuition, room, and board based on the level of services; and may advise independent schools as to the need for certain special education services in Vermont.

(2)(A) The Secretary of Education shall set, after consultation with independent schools in Vermont, and based on the level of services provided by the schools, the maximum rates to be paid by the Agency and supervisory unions or school districts for tuition, room, and board for residential placement of students who require special education services. The amount charged by an independent school for tuition shall reflect the school’s actual or anticipated costs of providing special education services to the student and shall not exceed the maximum rates set by the Secretary, provided that the Secretary may permit charges in excess of these maximum rates where the Secretary deems warranted.

(B)(i) An approved independent school that enrolls a student under subdivision (a)(1) of this section on a nonresidential basis may bill the responsible LEA for excess special education costs incurred by the independent school in providing special education services beyond those covered by general tuition. Reimbursement of these excess special education costs shall be based on the direct-costs rates approved by the Secretary for services actually provided to the student consistent with the Agency of Education Technical Manual for special education cost accounting. The Agency of Education shall publish specific elements that must be included as part of an independent school’s invoice for excess special education costs, and these elements shall be included in the written agreement required under subdivision (c)(2) of this section.

(ii) In establishing the direct cost rates for reimbursement under this subdivision (B), the Secretary shall apply the principle of treating an approved
independent school and a public school with parity in the amount of federal, State and local contributions to cover the costs of providing special education services.

(C)(i) The Secretary shall set, after consultation with independent schools in Vermont, the maximum tuition rates to be paid by the Agency and supervisory unions or school districts to independent schools that limit enrollment to students who are on an IEP or a plan under Section 504 of the Rehabilitation Act of 1973 and who are enrolled pursuant to a written agreement between the LEA and the school. The maximum tuition rates shall be based on the level of services provided by the school.

(ii) The tuition rates established by the Secretary under this subdivision (C) shall be no more than the costs that are reasonably related to the level of services provided by the school and shall be set forth on a form prescribed for that purpose by the Secretary of Education. The Secretary shall determine the relationship between costs and the level of services by using generally accepted accounting principles, such as those set forth in the Handbook (II) for Financial Accounting of Vermont School Systems.

(iii) After the Secretary approves a tuition rate for an independent school under this subdivision (C), the school shall not exceed that tuition rate until such time as a new tuition rate is approved by the Secretary.

(3) An approved independent school shall provide such documentation to the Secretary as the Secretary deems necessary in order to ensure that amounts payable under this subsection to the school are reasonable in relation to the special education services provided by the school. The Secretary may withhold, or direct an LEA to withhold, payment under this subsection pending the Secretary’s receipt of required documentation under this subsection, or may withhold, or direct an LEA to withhold, an amount determined by the Secretary as not reasonable in relation to the special education services provided by the school.

(c)(1) In order to be approved as an independent school eligible to receive State funding under subdivision (a)(1) of this section, the school shall demonstrate the ability to serve students with disabilities by:

(A) demonstrating an understanding of special education requirements, including the:

(i) provision of a free and appropriate public education in accordance with federal and State law;

(ii) provision of education in the least restrictive environment in accordance with federal and State law;
(iii) characteristics and educational needs associated with any of the categories of disability or suspected disability under federal and State law; and

(iv) procedural safeguards and parental rights, including discipline procedures, specified in federal and State law;

(B) committing to implementing the IEP of an enrolled student with special education needs, providing the required services, and appropriately documenting the services and the student’s progress;

(C) subject to subsection (d) of this section, employing or contracting with staff who have the required licensure to provide special education services;

(D) agreeing to communicate with the responsible LEA concerning:

(i) the development of, and any changes to, the IEP;

(ii) services provided under the IEP and recommendations for a change in the services provided;

(iii) the student’s progress;

(iv) the maintenance of the student’s enrollment in the independent school; and

(v) the identification of students with suspected disabilities; and

(E) committing to participate in dispute resolution as provided under federal and State law.

(2) An approved independent school that enrolls a student requiring special education services who is placed under subdivision (a)(1) of this section:

(A) shall enter into a written agreement with the LEA:

(i) committing to the requirements under subdivision (1) of this subsection (c); and

(ii) if the LEA provides staff or resources to the approved independent school on an interim basis under subsection (d) of this section, setting forth the terms of that arrangement with assistance from the Agency of Education on the development of those terms and on the implementation of the arrangement; and

(B) subject to subsection (d) of this section, shall ensure that qualified school personnel attend evaluation and planning meetings and IEP meetings for the student.
(d) If an approved independent school enrolls a student under subdivision (a)(1) of this section but does not have the staff or State Board certification to provide special education services in the specific disability category that the student requires, then:

(1) The LEA, in consultation with the approved independent school and the Agency of Education, shall determine what special education services and supports the school is able to provide to the student.

(2) The LEA shall, on an interim basis and at its cost, provide such additional staff and other resources to the approved independent school as are necessary to support the student until such time as the approved independent school is able to directly provide these services and has the appropriate State Board certification; provided, however, that the school shall have all required staff and resources and the appropriate State Board certification within nine academic months after the date of the student’s initial enrollment.

(3) If the school does not have all required staff and resources and the appropriate State Board certification within nine academic months after the date of the student’s initial enrollment as required under subdivision (2) of this subsection (d), then, in the event that the State Board determines that the school has failed to make good faith and reasonable efforts to secure the required staff, resources, and certification, the State Board may take any action that is authorized by section 166 of this title.

(b) Neither a school district nor any State agency shall pay rates for tuition, room, and board, for students receiving special education in independent schools outside Vermont that are in excess of allowable costs approved by the authorized body in the state in which the independent school is located, except in exceptional circumstances or for a child who needs exceptional services, as approved by the Secretary.

(e) The State Board is authorized to enter into interstate compacts with other states to regulate rates for tuition, room, and board for students receiving special education in independent schools.

Sec. 4. EFFECTIVE DATE

This act shall take effect on passage.

And that when so amended the bill ought to pass.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, the recommendation of amendment was agreed to, and third reading of the bill was ordered.
Bill Passed

S. 241.

Senate bill of the following title was read the third time and passed:
An act relating to the makeup and duties of the Emergency Medical Services Advisory Committee.

Bill Recommitted

S. 154.

Senator Campion, for the Committee on Finance, to which was referred Senate bill entitled:
An act relating to exempting trailers in storage from the property tax.

Reported that the bill ought to pass.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, and pending the question, Shall the bill be read the third time? On motion of Senator Campion, the bill was recommitted to the Committee on Finance.

Bills Amended; Third Readings Ordered

S. 173.

Senator Benning, for the Committee on Judiciary, to which was referred Senate bill entitled:
An act relating to sealing criminal history records when there is no conviction.

Reported recommending that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:
Sec. 1. 13 V.S.A. § 7602 is amended to read:
§ 7602. EXPUNGEMENT AND SEALING OF RECORD, POSTCONVICTION; PROCEDURE

* * *

(c)(1) The court shall grant the petition and order that the criminal history record be expunged pursuant to section 7606 of this title if the following conditions are met:

(A) At least 10 years have elapsed since the date on which the person successfully completed the terms and conditions of the sentence for the conviction.
(B) The person has not been convicted of a felony arising out of a new incident or occurrence since the person was convicted of the qualifying crime in the last 7 years.

(C) The person has not been convicted of a misdemeanor during the past five years.

(D) Any restitution ordered by the court for any crime of which the person has been convicted has been paid in full.

(E) After considering the particular nature of any subsequent offense, the court finds that expungement of the criminal history record for the qualifying crime serves the interest of justice.

* * *

Sec. 2. 13 V.S.A. § 7603 is amended to read:

§ 7603. EXPUNGEMENT AND SEALING OF RECORD, NO CONVICTION; PROCEDURE

(a) A person who was cited or arrested for a qualifying crime or qualifying crimes arising out of the same incident or occurrence may file a petition with the court requesting expungement of the criminal history record related to the citation or arrest if one of the following conditions is met of a person:

(1) No criminal charge is filed by the State and the statute of limitations has expired,

(2) The twelve months after the citation or arrest if:

   (A) the court does not make a determination of probable cause at the time of arraignment or dismisses the charge at the time of arraignment and the statute of limitations has expired; or

   (B) the charge is dismissed before trial:

      (A) without prejudice and the statute of limitations has expired; or

      (B) with prejudice.

(4) The at any time if the prosecuting attorney and the defendant and the respondent stipulate that the court may grant the petition to expunge and seal the record.

(b) The State’s Attorney or Attorney General shall be the respondent in the matter. If a party objects to sealing or expunging a record pursuant to this section, the court shall schedule a hearing to determine if sealing or expunging the record serves the interest of justice. The petitioner defendant and the respondent prosecuting attorney shall be the only parties in the matter.
(c) The court shall grant the petition and order that the criminal history record be expunged pursuant to section 7606 of this title if it finds that expungement of the criminal history record serves the interest of justice. [Repealed.]

(d) The court shall grant the petition and order that all or part of the criminal history record be sealed pursuant to section 7607 of this title if:

(1) The court finds that sealing the criminal history record better serves the interest of justice than expungement.

(2) The person committed the qualifying crime after reaching 19 years of age. [Repealed.]

(e) Unless either party objects in the interest of justice, the court shall issue an order expunging a criminal history record related to the citation or arrest of a person:

(1) not more than 45 days after:

(A) acquittal if the defendant is acquitted of the charges; or

(B) dismissal if the charge is dismissed with prejudice before trial;

(2) at any time if the prosecuting attorney and the defendant stipulate that the court may grant the petition to expunge the record.

(f) Unless either party objects in the interest of justice, the court shall issue an order to expunge a record sealed pursuant to subsection (a) or (g) of this section after the statute of limitations has expired.

(g) A person may file a petition with the court requesting sealing or expungement of a criminal history record related to the citation or arrest of the person at any time. The court shall grant the petition and issue an order sealing or expunging the record if it finds that sealing or expunging the record serves the interest of justice.

(h) The court may expunge any records that were sealed pursuant to this section prior to July 1, 2018 unless the State’s Attorney’s office that prosecuted the case objects. Thirty days prior to expunging a record pursuant to this subsection, the court shall provide to the State’s Attorney’s office that prosecuted the case written notice of its intent to expunge the record.

(i)(1) The court shall keep a special index of cases that have been expunged pursuant to this section together with the expungement order. The index shall list only the name of the person convicted of the offense, his or her date of birth, the docket number, and the criminal offense that was the subject of the expungement.
(2) The special index and related documents specified in subdivision (1) of this subsection (i) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.

(3) Inspection of the expungement order and the certificate may be permitted only upon petition by the person who is the subject of the case or by the court if the court finds that inspection of the documents is necessary to serve the interest of justice. The Chief Superior Judge may permit special access to the index and the documents for research purposes pursuant to the rules for public access to court records.

(4) The Court Administrator shall establish policies for implementing this subsection.

Sec. 3. DEPARTMENT OF STATE’S ATTORNEYS AND SHERIFFS; EXPUNGEMENT-ELIGIBLE CRIMES; AUTOMATIC EXPUNGEMENT AND SEALING OF CRIMINAL HISTORY RECORDS; REPORT

The Department of State’s Attorneys and Sheriffs, in consultation with the Office of the Court Administrator, the Vermont Crime Information Center, the Office of the Attorney General, the Office of the Defender General, the Center for Crime Victim Services, and Vermont Legal Aid, shall:

(1) consider:

(A) expanding the list of qualifying crimes eligible for expungement pursuant to 13 V.S.A. § 7601 to include any nonviolent drug-related offenses;

(B) the implications of such an expansion on public health, economic development, and law enforcement efforts in the State; and

(C) the viability of automating the process of expunging and sealing criminal history records;

(2) seek input from the Vermont Governor’s Opioid Coordination Council; and

(3) on or before November 1, 2018, report to the Joint Legislative Justice Oversight Committee on the findings of the group, including any recommendations on specific crimes to add to the definition of qualifying crimes pursuant to 13 V.S.A. § 7601.

Sec. 4. EFFECTIVE DATE

This act shall take effect on July 1, 2018.

And that when so amended the bill ought to pass.
Thereupon, the bill was read the second time by title only pursuant to Rule 43, the recommendation of amendment was agreed to, and third reading of the bill was ordered.

S. 224.

Senator Sirotkin, for the Committee on Finance, to which was referred Senate bill entitled:

An act relating to co-payment limits for visits to chiropractors.

Reported recommending that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 8 V.S.A. § 4088a is amended to read:

§ 4088a. CHIROPRACTIC SERVICES

(a)(1) A health insurance plan shall provide coverage for clinically necessary health care services provided by a chiropractic physician licensed in this State for treatment within the scope of practice described in 26 V.S.A. chapter 10, but limiting adjunctive therapies to physiotherapy modalities and rehabilitative exercises. A health insurance plan does not have to provide coverage for the treatment of any visceral condition arising from problems or dysfunctions of the abdominal or thoracic organs.

(2) A health insurer may require that the chiropractic services be provided by a licensed chiropractic physician under contract with the insurer or upon referral from a health care provider under contract with the insurer.

(3) Health care services provided by chiropractic physicians may be subject to reasonable deductibles, co-payment and co-insurance amounts, fee or benefit limits, practice parameters, and utilization review consistent with any applicable regulations published by the Department of Financial Regulation; provided that any such amounts, limits, and review shall not function to direct treatment in a manner unfairly discriminative against chiropractic care, and collectively shall be no more restrictive than those applicable under the same policy to care or services provided by other health care providers but allowing for the management of the benefit consistent with variations in practice patterns and treatment modalities among different types of health care providers.

(4) For qualified health benefit plans offered pursuant to 33 V.S.A. chapter 18, subchapter 1, health care services provided by a chiropractic physician may be subject to a co-payment requirement as long as the required co-payment amount is not greater than the amount of the co-payment applicable to care and services provided by a primary care provider under the plan.
Nothing herein contained in this section shall be construed as impeding or preventing either the provision or coverage of health care services by licensed chiropractic physicians, within the lawful scope of chiropractic practice, in hospital facilities on a staff or employee basis.

* * *

Sec. 2. CHIROPRACTIC CO-PAYMENT LIMITS; PROSPECTIVE REPEAL

8 V.S.A. § 4088a(a)(4) (co-payment amounts for qualified health benefit plans) is repealed on January 1, 2022.

Sec. 3. CHIROPRACTIC CO-PAYMENT LIMITS; IMPACT REPORT

On or before January 15, 2021, the Green Mountain Care Board shall submit a report, to be prepared in consultation with the Department of Vermont Health Access and the health insurance carriers offering qualified health benefit plans on the Vermont Health Benefit Exchange, to the House Committee on Health Care and the Senate Committee on Finance regarding the impact of the chiropractic co-payment limits for qualified health benefit plans required by Sec. 1 of this act on utilization of chiropractic services, on the plans' premium rates, on the plans' actuarial values, and on plan designs, including any impacts on the cost-sharing levels and amounts for other health care services.

Sec. 4. HEALTH INSURANCE RATE FILINGS; COMPLIANCE WITH CHIROPRACTIC CO-PAYMENT LIMITS

In conjunction with their qualified health benefit plan premium rate filings for plan years 2019, 2020, and 2021, each health insurance carrier shall provide information to the Green Mountain Care Board regarding any modifications to their proposed rates that are attributable to a plan's compliance with the co-payment limits for chiropractic care required by Sec. 1 of this act.

Sec. 5. EFFECTIVE DATES

(a) Sec. 1 (8 V.S.A. § 4088a) shall take effect on January 1, 2019 and shall apply to all health insurance plans issued on and after January 1, 2019 on such date as a health insurer offers, issues, or renews the health insurance plan, but in no event later than January 1, 2020.

(b) The remaining sections shall take effect on passage.

And that when so amended the bill ought to pass.
Thereupon, the bill was read the second time by title only pursuant to Rule 43, the recommendation of amendment was agreed to, and third reading of the bill was ordered.

**Adjournment**

On motion of Senator Ashe, the Senate adjourned until twelve o’clock and thirty minutes in the afternoon on Wednesday, March 14, 2018.