House Calendar

Tuesday, March 12, 2024

70th DAY OF THE ADJOURNED SESSION

House Convenes at 10:00 A.M.

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ACTION CALENDAR

Favorable with Amendment

H. 766

An act relating to prior authorization and step therapy requirements, health insurance claims, provider contracts, and collection of cost sharing amounts

- **Rep. Black of Essex**, for the Committee on Health Care, recommends 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. § 4089i(e) is amended to read:
- (e)(1) A health insurance or other health benefit plan offered by a health insurer or by a pharmacy benefit manager on behalf of a health insurer that provides coverage for prescription drugs and uses step-therapy protocols shall:
- (A) not require failure, including discontinuation due to lack of efficacy or effectiveness, diminished effect, or an adverse event, on the same medication on more than one occasion for eontinuously enrolled members or subscribers insureds who are continuously enrolled in a plan offered by the insurer or its pharmacy benefit manager; and
- (B) grant an exception to its step-therapy protocols upon request of an insured or the insured's treating health care professional under the same time parameters as set forth for prior authorization requests in 18 V.S.A. § 9418b(g)(4) if any one or more of the following conditions apply:
- (i) the prescription drug required under the step-therapy protocol is contraindicated or will likely cause an adverse reaction or physical or mental harm to the insured;
- (ii) the prescription drug required under the step-therapy protocol is expected to be ineffective based on the insured's known clinical history, condition, and prescription drug regimen;
- (iii) the insured has already tried the prescription drugs on the protocol, or other prescription drugs in the same pharmacologic class or with the same mechanism of action, which have been discontinued due to lack of efficacy or effectiveness, diminished effect, or an adverse event, regardless of whether the insured was covered at the time on a plan offered by the current insurer or its pharmacy benefit manager;

- (iv) the insured is stable on a prescription drug selected by the insured's treating health care professional for the medical condition under consideration; or
- (v) the step-therapy protocol or a prescription drug required under the protocol is not in the patient's best interests because it will:
 - (I) pose a barrier to adherence;
 - (II) likely worsen a comorbid condition; or
- (III) likely decrease the insured's ability to achieve or maintain reasonable functional ability.
- (2) Nothing in this subsection shall be construed to prohibit the use of tiered co-payments for members or subscribers not subject to a step-therapy protocol.
- (3) Notwithstanding <u>any provision of</u> subdivision (1) of this subsection to the contrary, a health insurance or other health benefit plan offered by an insurer or by a pharmacy benefit manager on behalf of a health insurer that provides coverage for prescription drugs shall not utilize a step-therapy, "fail first," or other protocol that requires documented trials of a medication, including a trial documented through a "MedWatch" (FDA Form 3500), before approving a prescription for the treatment of substance use disorder.
- Sec. 2. 18 V.S.A. § 9418a is amended to read:

§ 9418a. PROCESSING CLAIMS, DOWNCODING, AND ADHERENCE TO CODING RULES

- (a) Health plans, contracting entities, covered entities, and payers shall accept and initiate the processing of all health care claims submitted by a health care provider pursuant to and consistent with the current version of the American Medical Association's Current Procedural Terminology (CPT) codes, reporting guidelines, and conventions; the Centers for Medicare and Medicaid Services Healthcare Common Procedure Coding System (HCPCS); American Society of Anesthesiologists; the National Correct Coding Initiative (NCCI); the National Council for Prescription Drug Programs coding; or other appropriate nationally recognized standards, guidelines, or conventions approved by the Commissioner.
- (b)(1) When Except as provided in subsection (c) of this section, when editing claims, health plans, contracting entities, covered entities, and payers shall adhere to require not more than the following edit standards, processes, and guidelines except as provided in subsection (c) of this section:

- (1)(A) the CPT, HCPCS, and for claims for outpatient and professional services, the NCCI as in effect for Medicare;
- (2)(B) national specialty society edit standards for facility claims, the Medicare Code Editor as in effect for Medicare; or
- (3)(C) for pharmacy claims, appropriate nationally recognized edit standards, guidelines, or conventions; and
- (D) for any other claim not addressed by subdivision (A), (B), or (C) of this subdivision (1), other appropriate nationally recognized edit standards, guidelines, or conventions approved by the Commissioner.
- (2) For outpatient services, professional services, and facility claims, a health plan, contracting entity, covered entity, or payer shall apply the relevant edit standards, processes, and guidelines from NCCI or Medicare Code Editor pursuant to subdivisions (1)(A) and (B) of this subsection that were in effect for Medicare on the date of the claim submission; provided, however, that if Medicare has changed an applicable edit standard, process, or guideline within 90 days prior to the date of the claim submission, the health plan, contracting entity, covered entity, or payer may use the version of the edit standard, process, or guideline that Medicare had applied prior to the most recent change if the health plan, contracting entity, covered entity, or payer has not yet released an updated version of its edits in accordance with subsection (d) of this section.
- (c) Adherence to the edit standards in subdivision (b)(1) or (2) subsection (b) of this section is not required:
- (1) when necessary to comply with State or federal laws, rules, regulations, or coverage mandates; or
- (2) for edits that the payer determines are more favorable to providers than the edit standards in subdivisions (b)(1) through (3) subsection (b) of this section or to address new codes not yet incorporated by a payer's edit management software, provided the edit standards are:
- (A) developed with input from the relevant Vermont provider community and national provider organizations;
- (B) clearly supported by nationally recognized standards, guidelines, or conventions approved by the Commissioner of Financial Regulation; and
- (C) provided the edits are available to providers on the plan's websites and in their its newsletters or equivalent electronic communications.
- (d) <u>Health plans</u>, contracting entities, covered entities, and payers shall not release edits more than quarterly, to take effect on January 1, April 1, July 1,

- or October 1, as applicable, and the edits shall not be implemented without filing with the Commissioner of Financial Regulation to ensure consistency with nationally recognized standards guidelines, and conventions, and at least 30 days' advance notice to providers. Whenever Medicare changes an edit standard, process, or guideline that it applies to outpatient service, professional service, or facility claims, each health plan, contracting entity, covered entity, or payer shall incorporate those modifications into its next quarterly release of edits.
- (e)(1) Except as otherwise provided in subdivision (2) of this subsection, no health plan, contracting entity, covered entity, or payer shall subject any health care provider to prepayment coding validation edit review. As used in this subsection, "prepayment coding validation edit review" means any action by the health plan, contracting entity, covered entity, or payer, or by a contractor, assignee, agent, or other entity acting on its behalf, requiring a health care provider to provide medical record documentation in conjunction with or after submission of a claim for payment for health care services delivered, but before the claim has been adjudicated.
- (2) Nothing in this subsection shall be construed to prohibit targeted prepayment coding validation edit review of a specific provider, provider group, or facility under certain circumstances, including evaluating high-dollar claims; verifying complex financial arrangements; investigating member questions; conducting post-audit monitoring; addressing a reasonable belief of fraud, waste, or abuse; or other circumstances determined by the Commissioner through a bulletin or guidance.
- (f) Nothing in this section shall preclude a health plan, contracting entity, covered entity, or payer from determining that any such claim is not eligible for payment in full or in part, based on a determination that:

- (e)(g) Nothing in this section shall be deemed to require a health plan, contracting entity, covered entity, or payer to pay or reimburse a claim, in full or in part, or to dictate the amount of a claim to be paid by a health plan, contracting entity, covered entity, or payer to a health care provider.
- (f)(h) No health plan, contracting entity, covered entity, or payer shall automatically reassign or reduce the code level of evaluation and management codes billed for covered services (downcoding), except that a health plan, contracting entity, covered entity, or payer may reassign a new patient visit code to an established patient visit code based solely on CPT codes, CPT guidelines, and CPT conventions.

- (g)(i) Notwithstanding the provisions of subsection (d)(f) of this section, and other than the edits contained in the conventions in subsections (a) and (b) of this section, health plans, contracting entities, covered entities, and payers shall continue to have the right to deny, pend, or adjust claims for services on other bases and shall have the right to reassign or reduce the code level for selected claims for services based on a review of the clinical information provided at the time the service was rendered for the particular claim or a review of the information derived from a health plan's fraud or abuse billing detection programs that create a reasonable belief of fraudulent or abusive billing practices, provided that the decision to reassign or reduce is based primarily on a review of clinical information.
- (h)(j) Every If adding an edit pursuant to subsection (b) or subdivision (c)(1) or (2) of this section, a health plan, contracting entity, covered entity, and or payer shall publish on its provider website and in its provider newsletter if applicable or equivalent electronic provider communications:
- (1) the name of any commercially available claims editing software product that the health plan, contracting entity, covered entity, or payer utilizes;
- (2) the <u>specific</u> standard or standards, <u>pursuant to subsection</u> (b) of this <u>section</u>, that the entity uses for claim edits <u>and how those claim edits are supported by those specific standards;</u>
 - (3) the payment percentages for modifiers; and
- (4) any significant the specific edit or edits, as determined by the health plan, contracting entity, covered entity, or payer, added to the claims software product after the effective date of this section, which are made at the request of the health plan, contracting entity, covered entity, or payer.
- (i)(k) Upon written request, the health plan, contracting entity, covered entity, or payer shall also directly provide the information in subsection (h)(j) of this section to a health care provider who is a participating member in the health plan's, contracting entity's, covered entity's, or payer's provider network.
- (j)(1) For purposes of this section, "health plan" includes a workers' compensation policy of a casualty insurer licensed to do business in Vermont.
- (k)(m) BlueCross BlueShield of Vermont and the Vermont Medical Society are requested to continue convening a work group consisting of There is established a working group comprising the health plans, contracting entities, covered entities, and payers subject to the reporting requirement in subsection 9414a(b) of this title; representatives of hospitals and health care providers;

representatives of the Department of Financial Regulation and of other relevant State agencies; and other interested parties to study the edit standards in subsection (b) of this section, the edit standards in national class action settlements, and edit standards and edit transparency standards established by other states to determine the most appropriate way to ensure that health care providers can access information about the edit standards applicable to the health care services they provide trends in coding and billing that health plans, contracting entities, covered entities, or payers, or a combination of them, seek to address through claim editing. The work working group is requested to shall provide an annual a progress report to the House Committee on Health Care and the Senate Committees on Health and Welfare and on Finance upon request.

- (1)(n) With respect to the work working group established under subsection (k)(m) of this section and to the extent required to avoid violations of federal antitrust laws, the Department shall facilitate and supervise the participation of members of the work working group.
- Sec. 3. 18 V.S.A. § 9418b(c) and (d) are amended to read:
- (c) A health plan shall furnish, upon request from a health care provider, a current list of services and supplies requiring prior authorization.
- (1) It is the intent of the General Assembly to reduce variability in prior authorization requirements by aligning to the greatest extent possible with the prior authorization requirements in Vermont's Medicaid program.
- (2) A health plan shall not impose any prior authorization requirement for any admission, item, service, treatment, or procedure that is more restrictive than the prior authorization requirements that the Department of Vermont Health Access would apply for the same admission, item, service, treatment, or procedure under Vermont's Medicaid program.
- (3) Each health plan shall review the prior authorization requirements in effect in Vermont's Medicaid program at least once every six months to ensure that the health plan is maintaining the prior authorization alignment required by subdivision (2) of this subsection.
 - (4) Nothing in this subsection shall be construed to:
- (A) require prior authorization alignment with Vermont Medicaid for prescription drugs;
- (B) prohibit prior authorization requirements for any admission, item, service, treatment, or procedure that is not covered by Vermont Medicaid;

- (C) prohibit prior authorization requirements for an admission, item, service, treatment, or procedure that is provided out-of-network; or
- (D) require a health plan to maintain the same provider network as Vermont Medicaid.
- (d)(1) A health plan shall furnish, upon request from a health care provider, a current list of services and supplies requiring prior authorization.
- (2) A health plan shall <u>post make</u> a current list of services and supplies requiring prior authorization <u>available</u> to <u>the public on</u> the insurer's website.
- Sec. 4. 18 V.S.A. § 9418b(g)(4) is amended to read:
- (4) A health plan shall respond to a completed prior authorization request from a prescribing health care provider within 48 hours after receipt for urgent requests and within two business days after receipt for nonurgent requests. The health plan shall notify a health care provider of or make available to a health care provider a receipt of the request for prior authorization and any needed missing information within 24 hours after receipt.
- (A)(i) For urgent prior authorization requests, a health plan shall approve, deny, or inform the insured or health care provider if any information is missing from a prior authorization request from an insured or a prescribing health care provider within 24 hours following receipt.
- (ii) If a health plan informs an insured or a health care provider that more information is necessary for the health plan to make a determination on the request, the health plan shall have 24 hours to approve or deny the request upon receipt of the necessary information.
 - (B) For nonurgent prior authorization requests:
- (i) A health plan shall approve or deny a completed prior authorization request from an insured or a prescribing health care provider within two business days following receipt.
- (ii) A health plan shall acknowledge receipt of the prior authorization request within 24 hours following receipt and shall inform the insured or health care provider at that time if any information is missing that is necessary for the health plan to make a determination on the request.
- (iii) If a health plan notifies an insured or a health care provider that more information is necessary pursuant to subdivision (ii) of this subdivision (4)(B), the health plan shall have 24 hours to approve or deny the request upon receipt of the necessary information.

- (C) If a health plan does not, within the time limits set forth in this section, respond to a completed prior authorization request, acknowledge receipt of the request for prior authorization, or request missing information, the prior authorization request shall be deemed to have been granted.
- (D) Prior authorization approval for a prescribed or ordered treatment, service, or course of medication shall be valid for the duration of the prescribed or ordered treatment, service, or course of medication or one year, whichever is longer; provided, however, that for a prescribed or ordered treatment, service, or course of medication that continues for more than one year, a health plan shall not require renewal of the prior authorization approval more frequently than once every five years.
- (E) For an insured who is stable on a treatment, service, or course of medication, as determined by a health care provider, that was approved for coverage under a previous health plan, a health plan shall not restrict coverage of that treatment, service, or course of medication for at least 90 days upon the insured's enrollment in the new health plan.

Sec. 5. 18 V.S.A. § 9418c is amended to read:

§ 9418c. FAIR CONTRACT STANDARDS

- (a) Required information.
- (1) Each contracting entity shall provide and each health care contract shall obligate the contracting entity to provide participating health care providers information sufficient for the participating provider to determine the compensation or payment terms for health care services, including all of the following:
- (A) The manner of payment, such as fee-for-service, capitation, case rate, or risk.
- (B) On request, the fee-for-service dollar amount allowable for each CPT code for those CPT codes that a provider in the same specialty typically uses or that the requesting provider actually bills. Fee schedule information may be provided by CD-ROM or electronically, at the election of the contracting entity, but a provider may elect to receive a hard copy of the fee schedule information instead of the CD-ROM or electronic version.
- (C) A clearly understandable, readily available mechanism, such as a specific website address, that includes the following information:
- (i) the name of the commercially available claims editing software product that the health plan, contracting entity, covered entity, or payer uses;

- (ii) the <u>specific</u> standard or standards from subsection 9418a(c) of this title that the entity uses for claim edits <u>and how those claim edits are supported by those specific standards</u>;
 - (iii) payment percentages for modifiers; and
- (iv) any significant edits, as determined by the health plan, contracting entity, covered entity, or payer, added to the claims software product, which are made at the request of the health plan, contracting entity, covered entity, or payer, and which have been approved by the Commissioner pursuant to subsection 9418a(b) or (c) of this title.
- (D) Any policies for prepayment or postpayment audits, or both, including whether the policies include limits on the number of medical records a contracting entity may request for audit in any calendar year.

- (5)(A) If a contracting entity uses policies or manuals to augment the content of the contract with a health care provider, the contracting entity shall ensure that those policies or manuals contain sufficient information to allow providers to understand and comply with the content.
- (B) For any new policy or manual, or any change to an existing policy or manual, the contracting entity shall do all of the following:
- (i) Provide notice of the new policy, manual, or change to each participating provider in writing not fewer than 60 days prior to the effective date of the policy, manual, or change, which notice shall be conspicuously entitled "Notice of Policy Change" and shall include:
 - (I) a summary of the new policy, manual, or change;
 - (II) an explanation of the policy, manual, or change;
 - (III) the effective date of the policy, manual, or change; and
- (IV) a notice of the right to object in writing to the policy, manual, or change, along with a timeframe for objection and where and how to send the objection.
- (ii) Provide the participating provider 60 days after receiving the notice and summary to object in writing to the new policy, manual, or change. If the participating provider objects to the new policy, manual, or change, the contracting entity shall provide an initial substantive response to the objection within 30 days following the contracting entity's receipt of the written objection, and the contracting entity shall work together with the provider to achieve a reasonable resolution to the objection within 60 days following the

provider's receipt of contracting entity's initial substantive response. If the provider is not satisfied with the proposed resolution, the provider may pursue any remedy available to the provider under the health care contract or under applicable law.

* * *

Sec. 6. PRIOR AUTHORIZATION; INSURER IMPACT REPORTS

On or before January 15, 2027, each health insurer with at least 2,000 covered lives in Vermont shall report to the House Committee on Health Care and the Senate Committees on Health and Welfare and on Finance regarding the impact of the prior authorization provisions of this act on the following during plan years 2025 and 2026:

- (1) utilization of health care services covered by the insurer's plans;
- (2) development of the insurer's premium rates for future plan years; and
 - (3) the insurer's estimated avoided costs, including:
- (A) the specific methodologies that the insurer uses to determine the amount of "savings" from avoided costs;
- (B) the costs of the alternative tests, procedures, medications, and other items or services ordered for insureds as a result of the insurer's denials of requests for prior authorizations; and
- (C) the costs of emergency department visits and inpatient stays, including stays in intensive care units, as a result of the insurer's denials of requests for prior authorizations.

Sec. 7. PRIOR AUTHORIZATION; PROVIDER IMPACT REPORTS

(a) The General Assembly requests that organizations representing Vermont's hospital-employed, federally qualified health center-employed, and independent health care providers who are affected by the prior authorization provisions of this act gather information from their members on or before January 1, 2025 and on or before July 1, 2026 regarding current circumstances and the impact of the prior authorization provisions of this act on their provider members and the members' practices. To the extent practicable, the information gathered should align with survey questions published by nationally recognized provider organizations and include information regarding the impact of prior authorization processes and requirements on care delivery, quality of care, and staffing.

(b) On or before January 15, 2027, each provider organization that gathered information from its members in accordance with subsection (a) of this section is requested to summarize and report on that information to the House Committee on Health Care and the Senate Committees on Health and Welfare and on Finance, including providing a summary of the impact of the prior authorization provisions of this act on the organization's members' practices.

Sec. 8. REPEAL

18 V.S.A. § 9418(m) and (n) (claims edit working group) are repealed on January 1, 2028.

Sec. 9. EFFECTIVE DATES

- (a) Secs. 6 (prior authorization; insurer impact reports) and 7 (prior authorization; provider impact reports) and this section shall take effect on passage.
- (b) Sec. 3 (18 V.S.A. § 9418b(g)(4); prior authorization time frames) shall take effect on January 1, 2025, except that a health plan that must modify its technology in order to continue administering its own internal utilization review process for certain services shall have until not later than January 1, 2026 to come into compliance with the provisions of Sec. 3 as to those services.
- (c) The remaining sections shall take effect on January 1, 2025 and shall apply to all health plans issued on and after that date, to all health care provider contracts entered into or renewed on and after that date, and to all claims processed on and after that date.

and that after passage the title of the bill be amended to read: "An act relating to prior authorization and step therapy requirements, health insurance claims, and provider contracts"

(Committee Vote: 11-0-0)

H. 829

An act relating to creating permanent upstream eviction protections and enhancing housing stability

Rep. Stevens of Waterbury, for the Committee on General and Housing, recommends the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

* * * Housing Programs * * *

Sec. 1. 10 V.S.A. § 322 is amended to read:

§ 322. ALLOCATION SYSTEM

- (a) In determining the allocation of funds available for the purposes of this chapter, the Board shall give priority to projects that combine the dual goals of creating affordable housing and conserving and protecting Vermont's agricultural land, historic properties, important natural areas or recreation lands and also shall consider, but not be limited to, the following factors:
- (1) the need to maintain balance between the dual goals in allocating resources;
- (2) the need for a timely response to unpredictable circumstances or special opportunities to serve the purposes of this chapter;
- (3) the level of funding or other participation by private or public sources in the activity being considered for funding by the Board;
 - (4) what resources will be required in the future to sustain the project;
- (5) the need to pursue the goals of this chapter without displacing lower income Vermonters;
- (6) the long-term effect of a proposed activity and, with respect to affordable housing, the likelihood that the activity will prevent the loss of subsidized housing units and will be of perpetual duration;
 - (7) geographic distribution of funds; and
 - (8) the need to timely address Vermont's housing crisis.
- (b) The Board's allocation system shall include a method, defined by rule, that evaluates the need for, impact, and quality of activities proposed by applicants.
- Sec. 2. 10 V.S.A. § 699 is amended to read:
- § 699. VERMONT RENTAL HOUSING IMPROVEMENT PROGRAM
 - (a) Creation of Program.
- (1) The Department of Housing and Community Development shall design and implement the Vermont Rental Housing Improvement Program, through which the Department shall award funding to statewide or regional nonprofit housing organizations, or both, to provide competitive grants and forgivable loans to private landlords for the rehabilitation, including weatherization and accessibility improvements, of eligible rental housing units.
- (2) The Department shall develop statewide standards for the Program, including factors that partner organizations shall use to evaluate applications and award grants and forgivable loans.

- (3) A landlord shall not offer a unit created through the Program as a short-term rental, as defined in 18 V.S.A. § 4301, for the period a grant or loan agreement is in effect.
- (4) The Department may utilize a reasonable percentage of appropriations made to the Department for the Program to administer the Program.
- (5) The Department may cooperate with and subgrant funds to State agencies and political subdivisions and public and private organizations in order to carry out the purposes of this subsection.
- (b) Eligible rental housing units. The following units are eligible for a grant or forgivable loan through the Program:
 - (1) Non-code compliant.
- (A) The unit is an existing unit, whether or not occupied, that does not comply with the requirements of applicable building, housing, or health laws.
- (B) If the unit is occupied, the grant or forgivable loan agreement shall include terms:

- (d) Program requirements applicable to grants and forgivable loans.
 - (1)(A) A grant or loan shall not exceed:
- (i) \$70,000.00 per unit, for rehabilitation or creation of an eligible rental housing unit meeting the applicable building accessibility requirements under the Vermont Access Rules; or
- (ii) \$50,000.00 per unit, for rehabilitation or creation of any other eligible rental housing unit.
- (B) In determining the amount of a grant or loan, a housing organization shall consider the number of bedrooms in the unit, and whether the unit is being rehabilitated or newly created, whether the project includes accessibility improvements, and whether the unit is being converted from nonresidential to residential purposes.
- (2) A landlord shall contribute matching funds or in-kind services that equal or exceed 20 percent of the value of the grant or loan.
 - (3) A project may include a weatherization component.
- (4) A project shall comply with applicable building, housing, and health laws.

- (5) The terms and conditions of a grant or loan agreement apply to the original recipient and to a successor in interest for the period the grant or loan agreement is in effect.
- (6) The identity of a recipient, and the amount of a grant or forgivable loan, the year in which the grant or forgivable loan was extended, and the year in which any affordability covenant ends are public records that shall be available for public copying and inspection and the Department shall publish this information at least quarterly on its website.
- (7) A project for rehabilitation or creation of an accessible unit may apply funds to the creation of a parking spot for individuals with disabilities.
- (e) Program requirements applicable to grants <u>and five-year forgivable</u> <u>loans</u>. For a grant <u>or five-year forgivable loan</u> awarded through the Program, the following requirements apply for a minimum period of five years:
- (1) A landlord shall coordinate with nonprofit housing partners and local coordinated entry organizations to identify potential tenants.
- (2)(A) Except as provided in subdivision (2)(B) of this subsection (e), a landlord shall lease the unit to a household that is:
 - (i) exiting homelessness; or
- (ii) actively working with an immigrant or refugee resettlement program-; or
- (iii) composed of at least one individual with a disability who is eligible to receive Medicaid-funded home and community based services.
- (B) If, upon petition of the landlord, the Department or the housing organization that issued the grant determines that a household exiting homelessness under subdivision (2)(A) of this subsection (e) is not available to lease the unit, then the landlord shall lease the unit:
- (i) to a household with an income equal to or less than 80 percent of area median income; or
- (ii) if such a household is unavailable, to another household with the approval of the Department or housing organization.
- (3)(A) A landlord shall accept any housing vouchers that are available to pay all, or a portion of, the tenant's rent and utilities.
- (B) If no housing voucher or federal or State subsidy is available, the total cost of rent for the unit, including utilities not covered by rent payments, shall not exceed the applicable fair market rent established by the Department of Housing and Urban Development.

- (4)(A) A landlord may convert a grant to a forgivable loan upon approval of the Department and the housing organization that approved the grant.
- (B) A landlord who converts a grant to a forgivable loan shall receive a 10-percent prorated credit for loan forgiveness for each year in which the landlord participates in the grant program Program.
- (f) Requirements applicable to <u>10-year</u> forgivable loans. For a <u>10-year</u> forgivable loan awarded through the Program, the following requirements apply for a minimum period of 10 years:

Sec. 3. VERMONT RENTAL HOUSING IMPROVEMENT APPROPRIATION

The sum of \$6,000,000.00 is appropriated from the General Fund to the Department of Housing and Community Development in fiscal year 2025 for the Vermont Housing Improvement Program established in 10 V.S.A. § 699.

Sec. 4. 2023 Acts and Resolves No. 47, Sec. 36 is amended to read:

Sec. 36. MIDDLE-INCOME HOMEOWNERSHIP DEVELOPMENT PROGRAM

- (d) The total amount of subsidies for a project shall not exceed 35 percent of eligible development costs, as determined by the Agency, which the at the time of approval of the project, unless the Agency later determines that the project will not result in affordable owner-occupied housing for incomeeligible homebuyers without additional subsidy, in which case the Agency may, at its discretion, reasonably exceed this limitation and only to the extent required to achieve affordable owner-occupied housing. The Agency may shall allocate subsidies consistent with the following:
- (1) Developer subsidy. The Agency may provide a direct subsidy to the developer, which shall not exceed the difference between the cost of development and the market value of the home as completed.
- (2) Affordability subsidy. Of any remaining amounts available for the project after the developer subsidy, the Agency may provide a subsidy for the benefit of the homebuyer to reduce the cost of purchasing the home, provided that:

- (A) the Agency includes conditions in the subsidy, <u>agreement</u> or uses another legal mechanism, to ensure that, to the extent the home value has risen, the amount of the subsidy <u>upon sale</u> of the home, to the extent proceeds are available, the amount of the affordability subsidy either:
- (i) remains with the home to offset the cost to future homebuyers; or
- (ii) is recaptured by the Agency upon sale of the home for use in a similar program to support affordable homeownership development; or
- (B) the subsidy is subject to a housing subsidy covenant, as defined in 27 V.S.A. § 610, that preserves the affordability of the home for a period of 99 years or longer.
- (3) The Agency shall allocate not less than 33 percent of the funds available through the Program to projects that include a housing subsidy covenant consistent with subdivision (2)(B) of this subsection.

- (f)(1) When implementing the Program, the Agency shall consult stakeholders and experts in the field.
 - (2) The Program shall include:
 - (A) a streamlined and appropriately scaled application process;
- (B) an outreach and education plan, including specific tactics to reach and support eligible applicants, especially those from underserved regions or sectors;
- (C) an equitable system for distributing investments statewide on the basis of need according to a system of priorities that includes consideration of:
 - (i) geographic distribution;
 - (ii) community size;
 - (iii) community economic need; and
- (iv) whether an application has already received an investment or is from an applicant in a community that has already received Program funding.
 - (3) The Agency shall use its best efforts to ensure:
- (A) that investments awarded are targeted to the geographic communities or regions with the most pressing economic and employment needs; and

(B) that the allocation of investments provides equitable access to the benefits to all eligible geographical areas.

* * *

Sec. 5. REPEAL

2023 Acts and Resolves No. 47, Sec. 37 (middle-income homeownership; implementation) is repealed.

Sec. 6. APPROPRIATION; MIDDLE-INCOME HOMEOWNERSHIP DEVELOPMENT PROGRAM

The sum of \$25,000,000.00 is appropriated from the General Fund to the Department of Housing and Community Development to grant to the Vermont Housing Finance Agency in fiscal year 2025 for the Middle-Income Homeownership Development Program established by 2022 Acts and Resolves No. 182, Sec. 11, and amended from time to time.

Sec. 7. APPROPRIATION; VERMONT HOUSING CONSERVATION BOARD; PERPETUALLY AFFORDABLE HOUSING

The sum of \$110,000,000.00 is appropriated from the General Fund to the Vermont Housing Conservation Board in fiscal year 2025 for the following purposes:

- (1) to provide support and enhance capacity for the production and preservation of affordable rental housing and homeownership units, including support for manufactured home communities, permanent homes for those experiencing homelessness, recovery residences, and housing available to farm workers, and refugees, or individuals with disabilities who are eligible to receive Medicaid-funded home and community based services;
- (2) to fund the construction and preservation of emergency shelter for households experiencing homelessness; and
 - (3) to fund permanent supportive housing.

Sec. 8. APPROPRIATION; FIRST GENERATION HOMEBUYER PROGRAM

The sum of \$1,000,000.00 is appropriated from the General Fund to the Department of Housing and Community Development in fiscal year 2025 for a grant to the Vermont Housing Finance Agency for the First-Generation Homebuyer Program established by 2022 Acts and Resolves No. 182, Sec. 2, and amended from time to time.

* * * Eviction Prevention Initiatives * * *

Sec. 9. APPROPRIATION; RENTAL HOUSING STABILIZATION SERVICES

The sum of \$400,000.00 is appropriated from the General Fund to the Office of Economic Opportunity within the Department for Children and Families in fiscal year 2025 for a grant to the Champlain Valley Office of Economic Opportunity for the Rental Housing Stabilization Services Program established by 2023 Acts and Resolves No. 47, Sec. 43.

Sec. 10. APPROPRIATION; TENANT REPRESENTATION PILOT PROGRAM

The sum of \$1,025,000.00 is appropriated from the General Fund to the Agency of Human Services in fiscal year 2025 for a grant to Vermont Legal Aid for the Tenant Representation Pilot Program established by 2023 Acts and Resolves No. 47, Sec. 44.

Sec. 11. APPROPRIATION; RENT ARREARS ASSISTANCE FUND

The sum of \$2,500,000.00 is appropriated from the General Fund to the Vermont State Housing Authority in fiscal year 2025 for the Rent Arrears Assistance Fund established by 2023 Acts and Resolves No. 47, Sec. 45.

Sec. 12. RESIDENT SERVICES PROGRAM; APPROPRIATION

- (a) The sum of \$6,000,000.00 is appropriated from the General Fund to the Agency of Human Services in fiscal year 2025 for a grant to the Vermont Housing and Conservation Board for the Resident Services Program established by this section. The Agency shall work in coordination with the Board to develop the Resident Services Program for the purpose of distributing funds to eligible affordable housing organizations to respond to timely and urgent resident needs and aid with housing retention.
- (b) For purposes of this section, an "eligible affordable housing organization" is a Vermont-based nonprofit or public housing organization that makes available at least 15 percent of its affordable housing portfolio to homeless families and individuals, including those with special needs who require service support and rental assistance to secure and maintain their housing, consistent with the goal of Executive Order No. 03-16 (Publicly Funded Housing for the Homeless).

Sec. 13. RENT PAYMENT REPORTING REPORT

(a) To facilitate the development of a pilot program for housing providers to report tenant rent payments for inclusion in consumer credit reports, the Office of the State Treasurer shall study:

- (1) any entities currently facilitating landlord credit reporting;
- (2) the number of landlords in Vermont utilizing rent payment software, related software expenses, and the need for or benefit of utilizing software for positive pay reporting;
- (3) the impacts on tenants from rent payment reporting programs, including, if feasible, data gathered from the Champlain Housing Trust's program;
- (4) any logistical steps the State must take to facilitate the program and any associated administrative costs; and
- (5) any other issues the Treasurer deems appropriate for facilitating the development of the pilot program.
- (b) On or before December 15, 2024, the Treasurer shall submit a report to the Senate Committee on Economic Development, Housing and General Affairs and the House Committee on General and Housing with its findings and recommendations, which may be in the form of proposed legislation.

* * * Manufactured Homes * * *

Sec. 14. 2022 Acts and Resolves No. 182, Sec. 3, as amended by 2023 Acts and Resolves No. 3, Sec. 75 and 2023 Acts and Resolves No. 78, Sec. C.119, is further amended to read:

Sec. 3. MANUFACTURED HOME IMPROVEMENT AND REPLACEMENT REPAIR PROGRAM

(a) Of the amounts available from the American Rescue Plan Act (ARPA) recovery funds, \$4,000,000 is appropriated to the Department of Housing and Community Development for the purposes specified Amounts appropriated to the Department of Housing and Community Development for the Manufactured Home Improvement and Repair Program shall be used for one or more of the following purposes:

- (b) The Department administers the Manufactured Home Improvement and Repair Program and may utilize a reasonable percentage of appropriations made to the Department for the Program to administer the Program.
- (c) The Department may cooperate with and subgrant funds to State agencies and political subdivisions and public and private organizations in order to carry out the purposes of subsection (a) of this section.
- Sec. 15. MANUFACTURED HOME IMPROVEMENT AND REPAIR

PROGRAM APPROPRIATIONS; INFRASTRUCTURE; MOBILE HOME REPAIR

The sum of \$2,000,000.00 is appropriated from the General Fund to the Department of Housing and Community Development in fiscal year 2025 for the following purposes:

- (1) to improve mobile home park infrastructure under the Manufactured Home Improvement and Repair Program established by 2022 Acts and Resolves No. 182, Sec. 3, and amended from time to time; and
- (2) to expand the Home Repair Awards program under the Manufactured Home Improvement and Repair Program established by 2022 Acts and Resolves No. 182, Sec. 3, and amended from time to time.

Sec. 16. MOBILE HOME TECHNICAL ASSISTANCE APPROPRIATION

- (a) The sum of \$700,000.00 is appropriated from the General Fund to the Department of Housing and Community Development for a subgrant to the Champlain Valley Office of Economic Opportunity in fiscal year 2025 to fund the Mobile Home Park Technical Assistance Services Team, including administration and direct project administration costs, such as advertising, background check fees, office supplies, postage, staff mileage liability insurance, training, service contracts, rent, utilities, telephone, space maintenance, and staffing.
- (b) The sum of \$300,000.00 is appropriated from the General Fund to the Department of Housing and Community Development for a subgrant to the Champlain Valley Office of Economic Opportunity in fiscal year 2025 to fund individual resident emergency grants accessible to all income-eligible mobile homeowners statewide to prevent loss of housing, remediate unsafe housing, enhance housing safety, health, and habitability issues, and provide relief from the impacts of natural disaster.

* * * Reporting * * *

Sec. 17. EMERGENCY HOUSING TRANSITION; AGENCY OF HUMAN SERVICES; JOINT FISCAL COMMITTEE OVERSIGHT; REPORTS

(a) As used in this act, "alternative housing placements" may include shelter beds and pods; placements with family or friends; permanent housing solutions, including tiny homes, manufactured homes, and apartments; residential treatment beds for physical health, long-term care, substance use, or mental health; nursing home beds; and recovery homes.

- (b) On or before the last day of each month from July 2024 through March 2025, the Agency of Human Services, or other relevant agency or department, shall report to the House Committees on Human Services and on General and Housing, the Senate Committee on Health and Welfare, and the Joint Fiscal Committee on its progress in assisting households housed in hotels and motels with transitioning from the pandemic-era General Assistance Emergency Housing Program to alternative housing placements and on the creation of new, alternative housing solutions. Each update shall include:
- (1) the number of households remaining in hotels and motels that have not yet been transitioned to an alternative housing placement by household size, by eligibility category, and by each Agency of Human Services district;
- (2) the number of actual alternative housing placements made during the previous reporting period compared with the targeted number of placements for that period;
- (3) of the households successfully transitioned to an alternative housing placement during the previous month, the number of households whose screening indicated a potential need for services from each department within the Agency;
- (4) the number of beds available for emergency housing in each Agency of Human Services district in the State, with separate reporting on the number of beds available in nursing homes and residential care homes for individuals whose screening indicates they could meet the clinical criteria for those settings and the number of emergency beds available for individuals whose screening indicates they do not meet the clinical criteria, including low-barrier shelters, beds for youth, and beds for individuals who have experienced domestic violence;
- (5) of the households that were housed in a hotel or motel for four months or longer and transitioned out during the previous month, the number that have had all or a portion of their security deposits returned to them since leaving the hotel or motel or are awaiting the return of these funds;
- (6) of the households that were housed in a hotel or motel for less than four months and transitioned out during the previous month, the amount of security deposit funds refunded to the State by the hotels and motels during that month;
- (7) the number of households that have been successfully transitioned to an alternative housing placement since the previous report, the types of housing settings in which they have been placed, and the supportive services they are receiving in conjunction with their housing;

- (8) the outlook for transitioning additional households to alternative housing placements in the coming months, including an estimate of the number of households likely to be placed per month;
- (9) a projected timeline for transitioning the remaining households to alternative housing placements;
- (10) the average negotiated rate for rooms that the Agency paid to the hotels and motels providing the temporary, continued hotel or motel housing during the previous month;
- (11) the status of responding to and implementing the letters of interest from community partners and municipalities for housing and supportive services;
- (12) the status of contracts for housing and supportive services resulting from the Agency's requests for proposals (RFPs);
- (13) the status of grants awarded through the Housing Opportunity Grant Program and how those grants relate to the Agency's efforts to assist households with transitioning out of the pandemic-era General Assistance Emergency Housing Program;
- (14) once the Adverse Weather Conditions Policy takes effect again in the fall of 2024, how the Agency plans to distinguish the households that become eligible for the General Assistance Emergency Housing Program under that Policy from the households that the Agency is assisting with transitioning out of the pandemic-era General Assistance Emergency Housing Program;
- (15) the total amount of funds expended to date on housing placements and supportive services for households transitioning out of the pandemic-era General Assistance Emergency Housing Program; and
- (16) beginning with the September 2024 reporting period, any State rules and local regulations and ordinances that are impeding the timely development of safe, decent, affordable housing in Vermont communities in order to:
 - (A) identify areas in which flexibility or discretion are available; and
- (B) advise whether the temporary suspension of relevant State rules and local regulations and ordinances, or the adoption or amendment of State rules, would facilitate faster and less costly revitalization of existing housing and construction of new housing units.
- (c) On or before the last day of each month from July 2024 through March 2025, the Vermont Housing and Conservation Board shall report to the House

Committees on Human Services and on General and Housing; the Senate Committees on Health and Welfare and on Economic Development, Housing and General Affairs; and the Joint Fiscal Committee on:

- (1) the status of the Board's initiatives to make additional housing units available and how those initiatives support the Agency of Human Services' efforts to assist households with transitioning out of the pandemic-era General Assistance Emergency Housing Program; and
- (2) the status of the Board's efforts to expand emergency shelter capacity, including the number of new beds available since the previous report, the number of additional beds planned, and when the additional planned beds are likely to become available.
- (d) The Agency may hire temporary employees or contract with community-based organizations, or both, as needed to support the Agency in assisting households housed in hotels and motels with transitioning from the pandemic-era General Assistance Emergency Housing Program to alternative housing placements; to support the creation of new, alternative housing solutions; and to collect and report on the information required by subsection (b) of this section.
- (e) On or before April 1, 2025, the Agency shall report to the House Committees on Appropriations, on Human Services, and on Housing and General Affairs; the Senate Committees on Appropriations, on Health and Welfare, and on Economic Development, Housing and General Affairs; and the Joint Fiscal Committee the number of households, if any, that were not successfully transitioned out of the pandemic-era General Assistance Emergency Housing Program into alternative housing placements and the reason why each such household was not successfully placed.

* * * Effective Date * * *

Sec. 18. EFFECTIVE DATE

This act shall take effect on July 1, 2024.

(Committee Vote: 7-4-1)

H. 856

An act relating to medical leave for a serious injury

- **Rep. Labor of Morgan**, for the Committee on General and Housing, recommends the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:
- Sec. 1. 21 V.S.A. § 471 is amended to read:

§ 471. DEFINITIONS

As used in this subchapter:

* * *

- (3) "Family leave" means a leave of absence from employment by an employee who works for an employer which that employs 15 or more individuals who are employed for an average of at least 30 hours per week during the year for one of the following reasons:
 - (A) the serious illness health condition of the employee; or
- (B) the serious illness <u>health condition</u> of the employee's child, stepchild or ward who lives with the employee, foster child, parent, spouse, or parent of the employee's spouse.
- (4) "Health care provider" means a licensed health care provider or a health care provider as defined pursuant to 29 C.F.R. § 825.125.
- (5) "Parental leave" means a leave of absence from employment by an employee who works for an employer which that employs 10 or more individuals who are employed for an average of at least 30 hours per week during the year for one of the following reasons:

* * *

- (5)(6) "Serious illness health condition" means:
- (A) an accident, <u>illness</u>, <u>injury</u>, disease, or physical or mental condition that:
 - (A)(i) poses imminent danger of death;
- (B)(ii) requires inpatient care in a hospital, hospice, or residential medical care facility; or
- (C)(iii) requires continuing in-home care under the direction of treatment by a physician health care provider; or
- (B) rehabilitation from an accident, illness, injury, disease, or physical or mental condition described in subdivision (A) of this subdivision (5), including treatment for substance use disorder.
- Sec. 2. 21 V.S.A. § 472 is amended to read:
- § 472. LEAVE
- (a) During any 12-month period, an employee shall be entitled to take unpaid leave for a period not to exceed 12 weeks:

(2) for family leave, for the serious illness <u>health condition</u> of the employee or the employee's child, stepchild or ward of the employee who lives with the employee, foster child, parent, spouse, or parent of the employee's spouse.

* * *

- (e)(1) An employee shall give reasonable written notice of intent to take leave under this subchapter. Notice shall include the date the leave is expected to commence and the estimated duration of the leave.
- (2) In the case of the adoption or birth of a child, an employer shall not require that notice be given more than six weeks prior to the anticipated commencement of the leave.
- (3) In the case of serious illness <u>health condition</u> of the employee or a member of the employee's family, an employer may require certification from a <u>physician health care provider</u> to verify the condition and the amount and necessity for the leave requested.
- (4) An employee may return from leave earlier than estimated upon approval of the employer.
- (5) An employee shall provide reasonable notice to the employer of his or her the need to extend leave to the extent provided by this chapter subchapter.

* * *

(h) Except for serious illness <u>health condition</u> of the employee, an employee who does not return to employment with the employer who provided the leave shall return to the employer the value of any compensation paid to or on behalf of the employee during the leave, except payments for accrued sick leave or vacation leave.

Sec. 3. EFFECTIVE DATE

This act shall take effect on July 1, 2024.

(Committee Vote: 11-0-1)

Action Postponed Until March 13, 2024 Favorable with Amendment

S. 18

An act relating to banning flavored tobacco products and e-liquids

Rep. Brumsted of Shelburne, for the Committee on Human Services, recommends the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. FINDINGS

The General Assembly finds that:

- (1) Tobacco use is costly. Vermont spends more than \$400 million annually to treat tobacco-caused illnesses, including more than \$90 million each year in Medicaid expenses. This translates into a tax burden each year of over \$1,000.00 per Vermont household. Smoking-related productivity losses add another \$576 million in additional costs each year.
- (2) Youth tobacco use is growing due to e-cigarettes. Seven percent of Vermont high school students smoke, but if e-cigarette use is included, 28 percent of Vermont youths use some form of tobacco product. More than one in four Vermont high school students now uses e-cigarettes. Use more than doubled among this age group, from 12 percent to 26 percent, between 2017 and 2019.
- (3) Menthol cigarette use is more prevalent among persons of color who smoke than among white persons who smoke and is more common among lesbian, gay, bisexual, and transgender smokers than among heterosexual smokers. Eighty-five percent of African American adult smokers use menthol cigarettes, and of Black youths 12–17 years of age who smoke, seven out of 10 use menthol cigarettes. Tobacco industry documents show a concerted effort to target African Americans through specific advertising efforts.

Sec. 2. 7 V.S.A. chapter 40 is amended to read:

CHAPTER 40. TOBACCO PRODUCTS

§ 1001. DEFINITIONS

As used in this chapter:

- (1) "Bidis" or "Beedies" means a product containing tobacco that is wrapped in temburni leaf (diospyros melanoxylon) or tendu leaf (diospyros exculpra), or any other product that is offered to, or purchased by, consumers as bidis or beedies.
 - (2) "Board" means the Board of Liquor and Lottery.
- (3) "Characterizing flavor" means a taste or aroma, other than the taste or aroma of tobacco, imparted either prior to or during consumption of a tobacco product or tobacco substitute, or a component part or byproduct of a tobacco product or tobacco substitute. The term includes tastes or aromas

relating to any fruit, chocolate, vanilla, honey, maple, candy, cocoa, dessert, alcoholic beverage, mint, menthol, wintergreen, herb or spice, or other food or drink, or to any conceptual flavor that imparts a taste or aroma that is distinguishable from tobacco flavor but may not relate to any particular known flavor. The term also includes induced sensations, such as those produced by synthetic cooling agents, regardless of whether the agent itself imparts any taste or aroma.

(4) "Child-resistant packaging" means packaging that is designed or constructed to be significantly difficult for children under five years of age to open or obtain a toxic or harmful amount of the substance in the container within a reasonable time and not difficult for normal adults to use properly but does not mean packaging that all children under five years of age cannot open or obtain a toxic or harmful amount of the substance in the container within a reasonable time.

(5) "Cigarette" means:

- (A) any roll of tobacco wrapped in paper or any substance not containing tobacco; and
- (B) any roll of tobacco wrapped in a substance containing tobacco that, because of its appearance, the type of tobacco used in the filler, or its packaging and labeling, is likely to be offered to, or purchased by, consumers as a cigarette described in subdivision (A) of this subdivision (5).
 - (2)(6) "Commissioner" means the Commissioner of Liquor and Lottery.
- (3) "Tobacco products" means cigarettes, little cigars, roll-your-own tobacco, snuff, cigars, new smokeless tobacco, and other tobacco products as defined in 32 V.S.A. § 7702.
- (4) "Vending machine" means any mechanical, electronic, or other similar device that dispenses tobacco products for money.
- (7) "E-liquid" means the solution, substance, or other material used in or with a tobacco substitute that is heated or otherwise acted upon to produce an aerosol, vapor, or other emission to be inhaled or otherwise absorbed by the user, regardless of whether the solution, substance, or other material contains nicotine. The term does not include cannabis products as defined in section 831 of this title or products that are regulated by the Cannabis Control Board.
- (8) "E-liquid container or other container holding a liquid or gel substance containing nicotine" means a bottle or other container of an e-liquid containing nicotine or a nicotine liquid or other substance containing nicotine that is sold, marketed, or intended for use in a tobacco substitute. The term does not include a container containing nicotine in a cartridge that is sold,

marketed, or intended for use in a tobacco substitute if the cartridge is prefilled and sealed by the manufacturer and not intended to be opened by the consumer.

- (9) "Flavored e-liquid" means any e-liquid with a characterizing flavor. An e-liquid shall be presumed to be a flavored e-liquid if a licensee, a manufacturer, or a licensee's or manufacturer's agent or employee has made a statement or claim directed to consumers or the public, whether express or implied, that the product has a distinguishable taste or aroma other than the taste or aroma of tobacco.
- (10) "Flavored tobacco product" means any tobacco product with a characterizing flavor. A tobacco product shall be presumed to be a flavored tobacco product if a licensee, a manufacturer, or a licensee's or manufacturer's agent or employee has made a statement or claim directed to consumers or the public, whether express or implied, that the product has a distinguishable taste or aroma other than the taste or aroma of tobacco.
- (11) "Flavored tobacco substitute" means any tobacco substitute with a characterizing flavor. A tobacco substitute shall be presumed to be a flavored tobacco substitute if a licensee, a manufacturer, or a licensee's or manufacturer's agent or employee has made a statement or claim directed to consumers or the public, whether express or implied, that the product has a distinguishable taste or aroma other than the taste or aroma of tobacco.
- (12) "Licensed wholesale dealer" means a wholesale dealer licensed under 32 V.S.A. chapter 205.
- (13) "Little cigars" means any rolls of tobacco wrapped in leaf tobacco or any substance containing tobacco, other than any roll of tobacco that is a cigarette, and as to which 1,000 units weigh not more than three pounds.
- (14) "Nicotine" means the chemical substance named 3-(1-Methyl-2-pyrrolidinyl)pyridine or C[10]H[14]N[2], including any salt or complex of nicotine, whether naturally or synthetically derived.
- (15) "Proper proof of age" means a valid authorized form of identification as defined in section 589 of this title.
- (16) "Retail dealer" means a person licensed pursuant to section 1002 of this title.
- (17) "Roll-your-own tobacco" means any tobacco that, because of its appearance, type, packaging, or labeling, is suitable for use and likely to be offered to, or purchased by, consumers as tobacco for making cigarettes.

- (18) "Snuff" means any finely cut, ground, or powdered tobacco that is not intended to be smoked, has a moisture content of not less than 45 percent, and is not offered in individual single-dose tablets or other discrete single-use units.
- (5)(19) "Tobacco license" means a license issued by the Division of Liquor Control under this chapter permitting the licensee to engage in the retail sale of tobacco products.
- (6) "Bidis" or "Beedies" means a product containing tobacco that is wrapped in temburni leaf (diospyros melanoxylon) or tendu leaf (diospyros exculpra), or any other product that is offered to, or purchased by, consumers as bidis or beedies.
- (7)(20) "Tobacco paraphernalia" means any device used, intended for use, or designed for use in smoking, inhaling, ingesting, or otherwise introducing tobacco products, tobacco substitutes, e-liquids, or a combination of these, into the human body, or for preparing tobacco for smoking, inhaling, ingesting, or otherwise introducing into the human body, including devices for holding tobacco, rolling paper, wraps, cigarette rolling machines, pipes, water pipes, carburetion devices, bongs, and hookahs, and clothing or accessories adapted for use with a tobacco product, a tobacco substitute, an e-liquid, or tobacco paraphernalia.
- (21) "Tobacco products" means cigarettes, little cigars, roll-your-own tobacco, snuff, cigars, new smokeless tobacco, and any other product manufactured from, derived from, or containing tobacco that is intended for human consumption by smoking, by chewing, or in any other manner.
- (8)(22)(A) "Tobacco substitute" means products any product that is not a tobacco product, as defined in subdivision (21) of this section, and that meets one or both of the following descriptions:
- (i) a product, including an electronic eigarettes cigarette or other electronic or battery-powered devices device, or any component, part, or accessory thereof, that contain or are contains or is designed to deliver nicotine or other substances into the body through the inhalation or other absorption of aerosol, vapor, or other emission and that have has not been approved by the U.S. Food and Drug Administration for tobacco cessation or other medical purposes; or
- (ii) an oral nicotine product or any other item that is designed to deliver nicotine into the body, including a product or item containing or delivering nicotine that has been extracted from a tobacco plant or leaf.

- (B) Cannabis products as defined in section 831 of this title or products that have been approved by the U.S. Food and Drug Administration for tobacco cessation or other medical purposes shall not be considered to be tobacco substitutes.
- (23) "Vending machine" means any mechanical, electronic, or other similar device that sells or dispenses tobacco products, tobacco substitutes, eliquids, tobacco paraphernalia, or a combination of these.
- (24) "Wholesale dealer" means a person who imports or causes to be imported into the State any cigarettes, little cigars, roll-your-own tobacco, snuff, new smokeless tobacco, or other tobacco product for sale or who sells or furnishes any of these products to other wholesale dealers or retail dealers for the purpose of resale, but not by small quantity or parcel to consumers thereof.

§ 1002. LICENSE REQUIRED; APPLICATION; FEE; ISSUANCE

(a)(1) Except as provided in subsection (h) of this section, no person shall engage in the retail sale of tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia in the person's place of business without a tobacco license obtained from the Division of Liquor Control.

* * *

- (e) A person who sells tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia without obtaining a tobacco license and a tobacco substitute endorsement, as applicable, in violation of this section shall be guilty of a misdemeanor and fined not more than \$200.00 for the first offense and not more than \$500.00 for each subsequent offense.
- (f) No individual under 16 years of age may sell tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia.
- (g) No person shall engage in the retail sale of tobacco products, tobacco substitutes, substances containing nicotine or otherwise intended for use with a tobacco substitute e-liquids, or tobacco paraphernalia in the State unless the person is a licensed wholesale dealer as defined in 32 V.S.A. § 7702 or has purchased the tobacco products, tobacco substitutes, substances containing nicotine or otherwise intended for use with a tobacco substitute e-liquids, or tobacco paraphernalia from a licensed wholesale dealer.
- (h) This section shall not apply to a cannabis establishment licensed pursuant to chapter 33 of this title to engage in the retail sale of cannabis products as defined in section 831 of this title but not engaged in the sale of tobacco products or tobacco substitutes.

§ 1003. SALE OF TOBACCO PRODUCTS; TOBACCO SUBSTITUTES; <u>E-LIQUIDS</u>; TOBACCO PARAPHERNALIA; REQUIREMENTS; PROHIBITIONS

- (a)(1) A person shall not:
- (A) sell or provide tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia to any person under 21 years of age; <u>or</u>
- (B) knowingly enable the usage of tobacco products, tobacco substitutes, or e-liquids by a person under 21 years of age.
- (2)(A) Except as otherwise provided in subdivision (B) of this subdivision (2), a person, including a retail dealer, who violates subdivision (1) of this subsection (a) shall be subject to a civil penalty of not more than \$500.00 for the first offense and not more than \$2,000.00 for any subsequent offense.
- (B) An employee of a retail dealer who violates subdivision (1) of this subsection (a) in the course of employment shall be subject to a civil penalty of not more than \$100.00 for a first offense and not more than \$500.00 for any subsequent offense. This penalty shall be in addition to the penalty imposed on the retail dealer pursuant to subdivision (A) of this subdivision (2).
- (C) An action under this subsection (a) shall be brought in the same manner as for a traffic violation pursuant to 23 V.S.A. chapter 24 and shall be brought within 24 hours after the occurrence of the alleged violation.
- (b) All vending machines selling <u>or dispensing</u> tobacco products, <u>tobacco</u> <u>substitutes</u>, <u>e-liquids</u>, <u>or tobacco paraphernalia</u>, <u>or a combination of these</u>, are prohibited.
- (c)(1) Persons holding a tobacco license may only display or store tobacco products or, tobacco substitutes, and e-liquids:
- (A) behind a sales counter or in any other area of the establishment that is inaccessible to the public; or
 - (B) in a locked container.
 - (2) This subsection shall not apply to the following:
- (A) a display of tobacco products, tobacco substitutes, or e-liquids that is located in a commercial establishment in which by law no person under 21 years of age is permitted to enter at any time;
- (B) cigarettes in unopened cartons and smokeless tobacco in unopened multipack containers of 10 or more packages, any of which shall be

displayed in plain view and under the control of a responsible employee so that removal of the cartons or multipacks from the display can be readily observed by that employee; or

- (C) cigars and pipe tobacco stored in a humidor on the sales counter in plain view and under the control of a responsible employee so that the removal of these products from the humidor can be readily observed by that employee.
- (d) The sale and the purchase of bidis is prohibited. A person who holds a tobacco license who sells bidis as prohibited by this subsection shall be fined not more than \$500.00. A or a person who purchases bidis from any source shall be fined subject to a civil penalty of not more than \$250.00 for a first offense and not more than \$500.00 for a subsequent offense.
- (e) No person holding a tobacco license shall sell cigarettes or little cigars individually or in packs that contain fewer than 20 cigarettes or little cigars.
- (f) As used in this section, "little cigars" means any rolls of tobacco wrapped in leaf tobacco or any substance containing tobacco, other than any roll of tobacco that is a cigarette within the meaning of 32 V.S.A. § 7702(1), and as to which 1,000 units weigh not more than three pounds "enable the usage of tobacco products, tobacco substitutes, or e-liquids" means creating a direct and immediate opportunity for a person to use tobacco products, tobacco substitutes, or e-liquids, or a combination of these.

§ 1004. PROOF OF AGE FOR THE SALE OF TOBACCO PRODUCTS; TOBACCO SUBSTITUTES; <u>E-LIQUIDS</u>; TOBACCO PARAPHERNALIA

- (a) A person shall exhibit proper proof of his or her the person's age upon demand of a person licensed under this chapter, an employee of a licensee, or a law enforcement officer. If the person fails to provide proper proof of age, the licensee shall be entitled to refuse to sell tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia to the person. The sale or furnishing of tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia to a person exhibiting proper proof of age shall be prima facie evidence of a licensee's compliance with section 1007 of this title.
- (b) As used in this section, "proper proof of age" means a valid authorized form of identification as defined in section 589 of this title.

§ 1005. PERSONS UNDER 21 YEARS OF AGE; POSSESSION <u>OR</u> <u>PURCHASE</u> OF TOBACCO PRODUCTS; <u>MISREPRESENTING</u> <u>AGE OR PURCHASING TOBACCO PRODUCTS</u>; <u>PENALTY</u>, <u>TOBACCO SUBSTITUTES</u>, <u>E-LIQUIDS</u>, <u>OR TOBACCO</u> <u>PARAPHERNALIA PROHIBITED</u>

- (a)(1) A person under 21 years of age shall not possess, purchase, or attempt to purchase tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia unless:
- (A) the person is an employee of a holder of a tobacco license and is in possession of tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia to effect a sale in the course of employment; or
- (B) the person is in possession of tobacco products or tobacco paraphernalia in connection with Indigenous cultural tobacco practices.
- (2) A person under 21 years of age shall not misrepresent his or her the person's age to purchase or attempt to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia.
- (b)(1) A person who possesses tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia in violation of subsection (a) of this section shall be subject to having the tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia immediately confiscated and shall be further subject to a civil penalty of \$25.00 complete a tobacco cessation program approved by the Department of Health.
- (2) Within 90 days following the date of confiscation, the person shall provide to the Division of Liquor Control a certificate or attestation of completion of the tobacco cessation program. If the person does not submit the certificate or attestation within 90 days, the person shall be subject to a civil penalty of up to \$50.00.
- (3) An action under this subsection shall be brought in the same manner as a traffic violation pursuant to 23 V.S.A. chapter 24.
- (c)(1) A person under 21 years of age who misrepresents his or her the person's age by presenting false identification to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia shall be fined not more than \$50.00 or provide up to 10 hours of community service, or both subject to:
- (A) having the tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia immediately confiscated;

- (B) having the false identification immediately confiscated; and
- (C) completing a tobacco cessation program approved by the Department of Health.
- (2) Within 90 days following the date of confiscation, the person shall provide to the Division of Liquor Control a certificate or attestation of completion of the tobacco cessation program. If the person does not submit the certificate or attestation within 90 days, the person shall be subject to a civil penalty of up to \$50.00.
- (3) An action under this subsection shall be brought in the same manner as a traffic violation pursuant to 23 V.S.A. chapter 24.

§ 1006. POSTING OF SIGNS

- (a) A person licensed under this chapter shall post in a conspicuous place on the premises identified in the tobacco license a warning sign stating that the sale of tobacco products, tobacco substitutes, e-liquids, and tobacco paraphernalia to persons under 21 years of age is prohibited. The Board shall prepare the sign and make it available with the license forms issued under this chapter. The sign may include information about the health effects of tobacco and tobacco cessation services. The Board, in consultation with a representative of the licensees when appropriate, is authorized to change the design of the sign as needed to maintain its effectiveness.
- (b) A person violating this section shall be guilty of a misdemeanor and fined not more than \$100.00.

§ 1007. FURNISHING TOBACCO TO PERSONS UNDER 21 YEARS OF AGE; REPORT

- (a) A person that sells or furnishes tobacco products, tobacco substitutes, or tobacco paraphernalia to a person under 21 years of age shall be subject to a civil penalty of not more than \$100.00 for the first offense and not more than \$500.00 for any subsequent offense. An action under this section shall be brought in the same manner as for a traffic violation pursuant to 23 V.S.A. chapter 24 and shall be brought within 24 hours of the occurrence of the alleged violation. [Repealed.]
- (b)(1) The Division of Liquor Control shall conduct or contract for compliance tests of tobacco licensees as frequently and as comprehensively as necessary to ensure consistent statewide compliance with the prohibition on sales to persons under 21 years of age of at least 90 percent for buyers who are between 17 and 20 years of age. An individual under 21 years of age

participating in a compliance test shall not be in violation of section 1005 of this title.

(2) Any violation by a tobacco licensee of subsection 1003(a) of this title and this section after a sale violation or during a compliance test conducted within six months of a previous violation shall be considered a multiple violation and shall result in the minimum license suspension in addition to any other penalties available under this title. Minimum license suspensions for multiple violations shall be assessed as follows:

(A) two violations two weekdays;

(B) three violations 15-day suspension;

(C) four violations 90-day suspension;

(D) five violations one-year suspension.

(3) The Division shall report to the House Committee on General, Housing, Government Operations and Military Affairs, the Senate Committee on Economic Development, Housing and General Affairs, and the Tobacco Evaluation and Review Board Substance Misuse Prevention Oversight and Advisory Council annually, on or before January 15, the methodology and results of compliance tests conducted during the previous year. The provisions of 2 V.S.A. § 20(d) (expiration of required reports) shall not apply to the required report to be made under this subdivision.

* * *

§ 1009. CONTRABAND AND SEIZURE

(a) Any cigarettes or other tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia that have been sold, offered for sale, or possessed for sale in violation of section 1003, 1010, or 1013 of this title, 20 V.S.A. § 2757, 32 V.S.A. § 7786, or 33 V.S.A. § 1919, and any commercial cigarette rolling machines possessed or utilized in violation of section 1011 of this title, shall be deemed contraband and shall be subject to seizure by the Commissioner, the Commissioner's agents or employees, the Commissioner of Taxes or any agent or employee of the Commissioner of Taxes, or by any law enforcement officer of this State when directed to do so by the Commissioner. All eigarettes or other tobacco products items seized under this subsection shall be destroyed.

* * *

§ 1010. INTERNET SALES

- (a) As used in this section:
 - (1) "Cigarette" has the same meaning as in 32 V.S.A. § 7702(1).

- (2) [Repealed.]
- (3) "Licensed wholesale dealer" has the same meaning as in 32 V.S.A § 7702(5).
 - (4) "Little cigars" has the same meaning as in 32 V.S.A. § 7702(6).
 - (5) "Retail dealer" has the same meaning as in 32 V.S.A. § 7702(10).
- (6) "Roll-your-own tobacco" has the same meaning as in 32 V.S.A § 7702(11).
- (7) "Snuff" has the same meaning as in 32 V.S.A. § 7702(13). [Repealed.]
- (b) No person shall cause cigarettes, roll-your-own tobacco, little cigars, snuff, tobacco substitutes, substances containing nicotine or otherwise intended for use with a tobacco substitute e-liquids, or tobacco paraphernalia, ordered or purchased by mail or through a computer network, telephonic network, or other electronic network, to be shipped to anyone other than a licensed wholesale dealer or retail dealer in this State.
- (c) No person shall, with knowledge or reason to know of the violation, provide substantial assistance to a person in violation of this section.
 - (d) A violation of this section is punishable as follows:
- (1) A knowing or intentional violation of this section shall be punishable by imprisonment for not more than five years or a fine of not more than \$5,000.00, or both.
- (2) In addition to or in lieu of any other civil or criminal remedy provided by law, upon a determination that a person has violated this section, the Attorney General may impose a civil penalty in an amount not to exceed \$5,000.00 for each violation. For purposes of this subsection, each shipment or transport of cigarettes, roll-your-own tobacco, little cigars, or snuff, tobacco substitutes, e-liquids, or tobacco paraphernalia shall constitute a separate violation.

* * *

§ 1012. LIQUID NICOTINE E-LIQUIDS AND OTHER SUBSTANCES CONTAINING NICOTINE; PACKAGING

(a) Unless specifically preempted by federal law, no person shall manufacture, regardless of location, for sale in; offer for sale in; sell in or into the stream of commerce in; or otherwise introduce into the stream of commerce in Vermont:

- (1) any e-liquid containing nicotine or any other liquid or gel substance containing nicotine unless that product is contained in child-resistant packaging; or
- (2) any nicotine liquid e-liquid container or other container holding a liquid or gel substance containing nicotine unless that container constitutes child-resistant packaging.

(b) As used in this section:

- (1) "Child-resistant packaging" means packaging that is designed or constructed to be significantly difficult for children under five years of age to open or obtain a toxic or harmful amount of the substance in the container within a reasonable time and not difficult for normal adults to use properly, but does not mean packaging that all children under five years of age cannot open or obtain a toxic or harmful amount of the substance in the container within a reasonable time.
- (2) "Nicotine liquid container" means a bottle or other container of a nicotine liquid or other substance containing nicotine that is sold, marketed, or intended for use in a tobacco substitute. The term does not include a container containing nicotine in a cartridge that is sold, marketed, or intended for use in a tobacco substitute if the cartridge is prefilled and sealed by the manufacturer and not intended to be opened by the consumer. [Repealed.]

§ 1013. FLAVORED TOBACCO SUBSTITUTES, FLAVORED E-

LIQUIDS, AND MENTHOL TOBACCO PRODUCTS PROHIBITED

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- (a) No person shall engage in the retail sale of:
 - (1) any flavored tobacco substitute;
 - (2) any flavored e-liquid; or
 - (3) any menthol-flavored tobacco product.
- (b)(1) A person who violates subsection (a) of this section shall be subject to a civil penalty of not more than \$200.00 for the first offense and not more than \$500.00 for any subsequent offense.
- (2) An action under this section shall be brought in the same manner as for a traffic violation pursuant to 23 V.S.A. chapter 24 and shall be brought within 24 hours after the occurrence of the alleged violation.

§ 1014. SALE OF DISCOUNTED TOBACCO PRODUCTS, TOBACCO SUBSTITUTES, E-LIQUIDS, AND TOBACCO

PARAPHERNALIA PROHIBITED

- (a) As used in this section, "price reduction instrument" means any coupon, voucher, rebate, card, paper, note, form, statement, ticket, image, or other issue, whether in paper, digital, or any other form, used for commercial purposes to receive an article, product, service, or accommodation without charge or at a discounted price.
 - (b) No person shall do any of the following:
- (1) sell or offer for sale a tobacco product, tobacco substitute, e-liquid, or tobacco paraphernalia to a consumer at a price lower than the price that was in effect at the time the seller purchased the item from the wholesale dealer;
- (2) sell or offer for sale a tobacco product, tobacco substitute, e-liquid, or tobacco paraphernalia through any multipackage discount; or
- (3) honor or accept a price reduction instrument in any transaction related to the sale of a tobacco product, tobacco substitute, e-liquid, or tobacco paraphernalia to a consumer.
- (c) A person who violates subsection (b) of this section shall be subject to a civil penalty of not more than \$200.00 for the first offense and not more than \$500.00 for any subsequent offense. An action under this section shall be brought in the same manner as for a traffic violation pursuant to 23 V.S.A. chapter 24 and shall be brought within 24 hours after the occurrence of the alleged violation.
- Sec. 3. 4 V.S.A. § 1102(b) is amended to read:
 - (b) The Judicial Bureau shall have jurisdiction of the following matters:

* * *

(5) Violations of 7 V.S.A. § 1007 1003(a), relating to furnishing tobacco products, tobacco substitutes, e-liquids, and tobacco paraphernalia to a person under 21 years of age.

* * *

- (33) Violations of 7 V.S.A. § 1013, relating to sale of flavored tobacco substitutes, flavored e-liquids, and menthol-flavored tobacco products.
- (34) Violations of 7 V.S.A. § 1014, relating to sale of discounted tobacco products, tobacco substitutes, e-liquids, and tobacco paraphernalia.
- Sec. 4. 7 V.S.A. § 661(c) is amended to read:

- (c) The provisions of subsection (b) of this section shall not apply to a violation of subsection 1005(a) of this title, relating to purchase of tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia by a person under 21 years of age.
- Sec. 5. 16 V.S.A. § 140 is amended to read:

§ 140. TOBACCO USE OF TOBACCO PRODUCTS, TOBACCO SUBSTITUTES, AND E-LIQUIDS PROHIBITED ON PUBLIC SCHOOL GROUNDS

No person shall be permitted to use tobacco products of, tobacco substitutes, or e-liquids, as those terms are defined in 7 V.S.A. § 1001, on public school grounds or at public school sponsored functions. Public school boards may adopt policies that include confiscation and appropriate referrals to law enforcement authorities.

- Sec. 6. 18 V.S.A. § 4226 is amended to read:
- § 4226. MINORS; TREATMENT; CONSENT
- (a)(1) If a minor 12 years of age or older is suspected to be dependent upon have a substance use disorder, including a dependence on regulated drugs as defined in section 4201 of this title, on alcohol, on nicotine, or on tobacco products or tobacco substitutes as defined in 7 V.S.A. § 1001, or to have venereal disease, or to be an alcoholic as defined in section 8401 of this title a sexually transmitted infection, and the finding of such dependency, disease, or alcoholism substance use disorder or infection is verified by a licensed physician health care professional, the minor may give:
- (A) his or her consent to medical treatment health care services and hospitalization; and
- (B) in the case of a drug dependent or alcoholic person an individual who has a substance use disorder, consent to nonmedical inpatient or outpatient treatment at a program approved by the Agency of Human Services to provide treatment for drug dependency or alcoholism substance use disorder if deemed necessary by the examining physician for diagnosis or treatment of such dependency or disease or alcoholism health care professional.
- (2) Consent under this section shall not be subject to disaffirmance due to minority of the person consenting. The consent of the parent or legal guardian of a minor consenting under this section shall not be necessary to authorize care as described in this subsection.

- (b) The parent, parents, or legal guardian shall be notified by the physician if the condition of a minor child requires immediate hospitalization as the result of drug usage, alcoholism, or alcohol use or for the treatment of a venereal disease sexually transmitted infection.
- (c) As used in this section, "health care professional" means an individual licensed as a physician under 26 V.S.A. chapter 23 or 33, an individual licensed as a physician assistant under 26 V.S.A. chapter 31, or an individual licensed as a registered nurse or advanced practice registered nurse under 26 V.S.A. chapter 28.

Sec. 7. 18 V.S.A. § 4803(a) is amended to read:

- (a) Creation. There is created the Substance Misuse Prevention Oversight and Advisory Council within the Department of Health to improve the health outcomes of all Vermonters through a consolidated and holistic approach to substance misuse prevention that addresses all categories of substances. The Council shall provide advice to the Governor and General Assembly for improving prevention policies and programming throughout the State and to ensure that population prevention measures are at the forefront of all policy determinations. The Advisory Council's prevention initiatives shall encompass all substances at risk of misuse, including:
 - (1) alcohol;
 - (2) cannabis;
- (3) controlled substances, such as opioids, cocaine, and methamphetamines; and
- (4) tobacco products and, tobacco substitutes, and e-liquids, as those terms are defined in 7 V.S.A. § 1001 and substances containing nicotine or that are otherwise intended for use with a tobacco substitute.

Sec. 8. 32 V.S.A. § 7702 is amended to read:

§ 7702. DEFINITIONS

As used in this chapter unless the context otherwise requires:

* * *

(15) "Other tobacco products" means any product manufactured from, derived from, or containing tobacco that is intended for human consumption by smoking, by chewing, or in any other manner, including. The term also includes products sold as a tobacco substitute, as defined in 7 V.S.A. § 1001(8), and including any liquids, whether nicotine based or not, or; eliquids, as defined in 7 V.S.A. § 1001; and delivery devices sold separately for

use with a tobacco substitute <u>or e-liquid</u>, but shall not include cigarettes, little cigars, roll-your-own tobacco, snuff, or new smokeless tobacco as defined in this section, or cannabis products as defined in 7 V.S.A. § 831.

* * *

Sec. 9. 18 V.S.A. § 9503 is amended to read:

§ 9503. VERMONT TOBACCO PREVENTION AND TREATMENT

- (a) Except as otherwise specifically provided, the tobacco prevention and treatment program shall be administered and coordinated statewide by the Department of Health, pursuant to the provisions of this chapter. The program shall be comprehensive and research-based.
- (b) The Department shall establish goals for reducing adult and youth smoking rates, including performance measures for each goal in conjunction with the Substance Misuse Prevention Oversight and Advisory Council established pursuant to section 4803 of this title. The services provided by a quitline approved by the Department of Health shall be offered and made available to any minor, upon his or her the minor's consent, who is a smoker or user of tobacco products, tobacco substitutes, or e-liquids, as those terms are defined in 7 V.S.A. § 1001.
- (c) The Department of Liquor and Lottery shall administer the component of the program that relates to enforcement activities.
 - (d) The Agency of Education shall administer school-based programs.
- (e) The Department shall pay all fees and costs of the surveillance and evaluation activities, including the costs associated with hiring a contractor to conduct an independent evaluation of the program.

Sec. 10. 33 V.S.A. § 1900 is amended to read:

§ 1900. DEFINITIONS

As used in this subchapter, unless otherwise indicated:

* * *

(10) "Tobacco" means all <u>of the</u> products listed in <u>the definition of</u> "tobacco products" in 7 V.S.A. § 1001(3).

* * *

Sec. 11. HEALTH EQUITY ADVISORY COMMISSION; MENTHOL TOBACCO PRODUCT BAN; REPORT

On or before January 15, 2025, in its annual report due pursuant to 18 V.S.A. § 252(e), the Health Equity Advisory Commission shall recommend to the General Assembly whether the sale of tobacco products containing menthol, including menthol cigarettes, should be banned in Vermont.

Sec. 12. TOBACCO SUBSTITUTES AND E-LIQUIDS; ADVERTISING RESTRICTIONS; REPORT

On or before December 1, 2024, the Office of the Attorney General shall report to the House Committees on Commerce and Economic Development and on Human Services and the Senate Committees on Economic Development, Housing and General Affairs and on Health and Welfare regarding whether and to what extent Vermont may legally restrict advertising and regulate the content of labels for tobacco substitutes, including oral nicotine products, and e-liquids in this State.

Sec. 13. DEPARTMENT OF HEALTH; VERMONT YOUTH RISK BEHAVIOR SURVEY; TOBACCO SALES; REPORT

On or before March 1, 2027, the Department of Health shall report to the House Committee on Human Services and the Senate Committee on Health and Welfare the results of the 2025 Vermont Youth Risk Behavior Survey that relate to youth use of tobacco products, tobacco substitutes, and e-liquids, along with a comparison of the rates of use from previous Vermont Youth Risk Behavior Surveys. In its report, the Department shall also provide data on retail sales of tobacco products, tobacco substitutes, and e-liquids during calendar years 2024, 2025, and 2026.

Sec. 14. DEPARTMENT OF HEALTH; SCHOOL-BASED USAGE AND CESSATION EFFORTS; REPORT

The Department of Health shall collaborate with relevant school and community partners to survey and report on the use of tobacco products, tobacco substitutes, and e-liquids, as well as on nicotine and tobacco cessation efforts, in Vermont's schools. On or before January 15, 2026, the Department shall report to the House Committees on Human Services and on Education and the Senate Committees on Health and Welfare and on Education with its findings and any recommendations for legislative action.

Sec. 15. EFFECTIVE DATES

- (a) Sec. 2 (7 V.S.A. chapter 40) shall take effect on January 1, 2025, except that 7 V.S.A. § 1013(a)(3) (prohibiting retail sale of menthol-flavored tobacco products) shall take effect on July 1, 2025.
- (b) Secs. 1 (findings), 6 (18 V.S.A. § 4226; minor consent to treatment), 9 (18 V.S.A. § 9503; tobacco prevention and treatment), 11 (Health Equity Advisory Commission; menthol ban; report), 12 (advertising restrictions; report), 13 (Youth Risk Behavior Survey; tobacco sales; report), and 14 (school-based usage and cessation efforts; report) and this section shall take effect on passage.
- (c) Secs. 3 (4 V.S.A. § 1102(b); Judicial Bureau jurisdiction), 4 (7 V.S.A. § 661(c); penalties), 5 (16 V.S.A. § 140; use prohibited on school grounds), 7 (18 V.S.A. § 4803(a); Substance Misuse Prevention Oversight and Advisory Council), 8 (32 V.S.A. § 7702; definition for tobacco tax purposes), and 10 (33 V.S.A. § 1900; definition for medical assistance statutes) shall take effect on January 1, 2025.

(Committee Vote: 10-0-1)

Rep. Ode of Burlington, for the Committee on Ways and Means, recommends that the report of the Committee on Human Services be amended as follows:

<u>First</u>: In Sec. 2, in 7 V.S.A. § 1001, striking out subdivision (7) in its entirety and inserting in lieu thereof a new subdivision (7) to read as follows:

(7) "E-liquid" means the solution, substance, or other material that contains nicotine and is used in or with a tobacco substitute, and that is heated or otherwise acted upon to produce an aerosol, vapor, or other emission to be inhaled or otherwise absorbed by the user. The term does not include cannabis products as defined in section 831 of this title or products that are regulated by the Cannabis Control Board.

<u>Second</u>: In Sec. 2, in 7 V.S.A. § 1001, striking out subdivision (22) in its entirety and inserting in lieu thereof a new subdivision (22) to read as follows:

- (8)(22)(A) "Tobacco substitute" means products any product that is not a tobacco product, as defined in subdivision (21) of this section, and that meets one or both of the following descriptions:
- (i) a product, including an electronic eigarettes cigarette or other electronic or battery-powered devices device, or any component, part, or accessory thereof, that contain or are contains or is designed to deliver nicotine or other substances into the body through the inhalation or other absorption of

<u>aerosol</u>, vapor, <u>or other emission</u> and that <u>have has</u> not been approved by the U.S. Food and Drug Administration for tobacco cessation or other medical purposes; <u>or</u>

- (ii) an oral nicotine product or any other item that is designed to deliver nicotine into the body, including a product or item containing or delivering nicotine that has been extracted from a tobacco plant or leaf.
- (B) Cannabis products as defined in section 831 of this title or products that have been approved by the U.S. Food and Drug Administration for tobacco cessation or other medical purposes shall not be considered to be tobacco substitutes.

<u>Third</u>: In Sec. 2, by striking out 7 V.S.A. § 1005 in its entirety and inserting in lieu thereof a new 7 V.S.A. § 1005 to read as follows:

§ 1005. PERSONS UNDER 21 YEARS OF AGE; POSSESSION <u>OR</u>

<u>PURCHASE</u> OF TOBACCO PRODUCTS; <u>MISREPRESENTING</u>

<u>AGE OR PURCHASING TOBACCO PRODUCTS</u>; <u>PENALTY</u>,

<u>TOBACCO SUBSTITUTES</u>, <u>E-LIQUIDS</u>, <u>OR TOBACCO</u>

<u>PARAPHERNALIA PROHIBITED</u>

- (a)(1) <u>Prohibited conduct.</u> A person under 21 years of age shall not possess, purchase, or attempt to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia unless:
- (A) the person is an employee of a holder of a tobacco license and is in possession of tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia to effect a sale in the course of employment; or
- (B) the person is in possession of tobacco products or tobacco paraphernalia in connection with Indigenous cultural tobacco practices.
- (2) A person under 21 years of age shall not misrepresent his or her the person's age to purchase or attempt to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia.
- (b) Offense. A person who possesses tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia in violation of subsection (a) of this section commits a civil violation and shall be subject to having the tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia immediately confiscated and shall be further subject to a civil penalty of \$25.00. An action under this subsection shall be brought in the same manner as a traffic violation pursuant to 23 V.S.A. chapter 24 referred to the Court Diversion Program for the purpose of enrollment in a tobacco cessation program approved by the

Department of Health. A person who fails to complete the program shall be subject to a civil penalty of \$50.00.

- (c) Issuance of notice of violation. A law enforcement officer shall issue a person who violates this section a notice of violation, in a form approved by the Court Administrator. The notice of violation shall require the person to provide the person's name and address and shall explain procedures under this section, including that:
- (1) the person shall contact the Diversion Program in the county where the offense occurred within 15 days;
- (2) failure to contact the Diversion Program within 15 days will result in the case being referred to the Judicial Bureau, where the person, if found liable for the violation, will be subject to a civil penalty;
- (3) no money should be submitted to pay any penalty until after adjudication; and
- (4) the person shall notify the Diversion Program if the person's address changes.
- (d) Summons and complaint. When a person is issued a notice of violation under this section, the law enforcement officer shall complete a summons and complaint for the offense and send it to the Diversion Program in the county where the offense occurred. The summons and complaint shall not be filed with the Judicial Bureau at that time.
- (e) Registration in tobacco cessation program. Within 15 days after receiving a notice of violation, the person shall contact the Diversion Program in the county where the offense occurred and register for a tobacco cessation program approved by the Department of Health. If the person fails to do so, the Diversion Program shall file the summons and complaint with the Judicial Bureau for adjudication under 4 V.S.A. chapter 29. The Diversion Program shall provide a copy of the summons and complaint to the law enforcement officer who issued the notice of violation and shall provide two copies to the person charged with the violation.
- (f) Notice to report to Diversion. Upon receipt from a law enforcement officer of a summons and complaint completed under this section, the Diversion Program shall send the person a notice to report to the Diversion Program. The notice to report shall provide that:
 - (1) the person is required to complete the tobacco cessation program;

- (2) if the person does not satisfactorily complete the tobacco cessation program, the case will be referred to the Judicial Bureau, where the person, if found liable for the violation, will be subject to a civil penalty; and
- (3) if the person satisfactorily completes the tobacco cessation program, no penalty shall be imposed.
 - (g) Diversion Program requirements.
- (1) Upon being contacted by a person who has been issued a notice of violation, the Diversion Program shall register the person in a tobacco cessation program approved by the Department of Health.
- (2) When a person has satisfactorily completed the tobacco cessation program, the Diversion Program shall do all of the following:
 - (A) Void the summons and complaint with no penalty due.
- (B) Send copies of the voided summons and complaint to the Judicial Bureau and to the law enforcement officer who completed them. Before sending copies of the voided summons and complaint to the Judicial Bureau under this subdivision, the Diversion Program shall redact all language containing the person's name, address, Social Security number, and any other information that identifies the person.
- (3) If a person does not satisfactorily complete the tobacco cessation program or if the person fails to pay the Diversion Program any required program fees, the Diversion Program shall file the summons and complaint with the Judicial Bureau for adjudication under 4 V.S.A. chapter 29. The Diversion Program shall provide a copy of the summons and complaint to the law enforcement officer who issued the notice of violation and shall provide two copies to the person charged with the violation.
- (4) A person aggrieved by a decision of the Diversion Program or of the tobacco cessation program may seek review of that decision pursuant to Rule 75 of the Vermont Rules of Civil Procedure.
- (e)(h) Confiscation of false identification. A In addition to the procedures set forth in subsections (b)–(g) of this section, a person under 21 years of age who misrepresents his or her the person's age by presenting false identification to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia shall be fined not more than \$50.00 or provide up to 10 hours of community service, or both have the person's false identification immediately confiscated.

<u>Fourth</u>: By striking out Sec. 15, effective dates, in its entirety and inserting in lieu thereof a new Sec. 15 to read as follows:

Sec. 15. EFFECTIVE DATES

- (a) Secs. 2 (7 V.S.A. chapter 40), 3 (4 V.S.A. § 1102(b); Judicial Bureau jurisdiction), 4 (7 V.S.A. § 661(c); penalties), 5 (16 V.S.A. § 140; use prohibited on school grounds), 7 (18 V.S.A. § 4803(a); Substance Misuse Prevention Oversight and Advisory Council), 8 (32 V.S.A. § 7702; definition for tobacco tax purposes), and 10 (33 V.S.A. § 1900; definition for medical assistance statutes) shall take effect on January 1, 2026.
- (b) Secs. 1 (findings), 6 (18 V.S.A. § 4226; minor consent to treatment), 9 (18 V.S.A. § 9503; tobacco prevention and treatment), 11 (Health Equity Advisory Commission; menthol ban; report), 12 (advertising restrictions; report), 13 (Youth Risk Behavior Survey; tobacco sales; report), and 14 (school-based usage and cessation efforts; report) and this section shall take effect on passage.

(Committee Vote: 7-5-0)

Amendment to be offered by Reps. Donahue of Northfield and Brumsted of Shelburne to the report of the Committee on Ways and Means on S. 18

That the report of the Committee on Ways and Means be amended by striking out the third instance of amendment in its entirety and inserting in lieu thereof the following:

Third: [Deleted.]

Amendment to be offered by Rep. Marcotte of Coventry to the report of the Committee on Human Services on S. 18

First: By adding a new section to be Sec. 14a to read as follows:

Sec. 14a. INVESTIGATOR POSITION CREATED; APPROPRIATION;

REPORT

- (a) One new permanent classified position, Investigator, is established in the Department of Liquor and Lottery to enforce, and to investigate potential violations of, Vermont laws relating to direct-to-consumer sales and delivery of alcohol and tobacco products, including 7 V.S.A. §§ 277, 279, 280, and 1010.
- (b)(1) The sum of \$160,000.00 is appropriated to the Department of Liquor and Lottery from the Tobacco Litigation Settlement Fund in fiscal year 2025 to fund the Investigator position established in subsection (a) of this section.
- (2) It is the intent of the General Assembly that the position established in subsection (a) of this section should be funded from the Tobacco Litigation Settlement Fund for fiscal years 2025 and 2026. It is also the intent of the

General Assembly that, beginning in fiscal year 2027, the funding for the Investigator position should be built into base funding for the Department of Liquor and Lottery's budget, with the amount of the salary and benefits for the Investigator position offset by an equivalent amount of the revenue generated to the Department or to the Office of the Attorney General, or both, by the Investigator's activities in enforcing and in investigating violations of Vermont law, with the remainder of the revenue deposited into the General Fund.

- (c) If the revenue generated by the Investigator's activities becomes insufficient to cover the cost of the position in the future, the Department of Liquor and Lottery shall propose eliminating the position as part of its next budget or budget adjustment presentation to the General Assembly.
- (d)(1) On or before March 15, 2025, the Department of Liquor and Lottery shall provide an update to the House Committees on Government Operations and Military Affairs and on Human Services and the Senate Committees on Economic Development, Housing and General Affairs and on Health and Welfare regarding the status of its implementation of the new Investigator position.
- (2) Annually on or before December 15, the Department of Liquor and Lottery shall report to the House Committees on Government Operations and Military Affairs and on Human Services and the Senate Committees on Economic Development, Housing and General Affairs and on Health and Welfare on the impact of the Investigator's activities on compliance with Vermont's laws relating to direct-to-consumer sales and delivery of alcohol and tobacco products.

<u>Second</u>: In Sec. 15, effective dates, by adding a new subsection to be subsection (d) to read as follows:

(d) Sec. 14a (Investigator position created; appropriation; report) shall take effect on July 1, 2024, with the first report under subdivision (d)(2) due on or before December 15, 2025.

Amendment to be offered by Rep. Maguire of Rutland City to the report of the Committee on Human Services on S. 18

<u>First</u>: In Sec. 2, 7 V.S.A. chapter 40, by striking out section 1013 in its entirety and inserting in lieu thereof the following:

§ 1013. FLAVORED TOBACCO SUBSTITUTES AND FLAVORED

E-LIQUIDS PROHIBITED

(a) No person shall engage in the retail sale of any flavored tobacco substitute or any flavored e-liquid.

- (b)(1) A person who violates subsection (a) of this section shall be subject to a civil penalty of not more than \$200.00 for the first offense and not more than \$500.00 for any subsequent offense.
- (2) An action under this section shall be brought in the same manner as for a traffic violation pursuant to 23 V.S.A. chapter 24 and shall be brought within 24 hours after the occurrence of the alleged violation.

<u>Second</u>: In Sec. 3, 4 V.S.A. § 1102(b), in subdivision (33), by striking out the comma following "<u>substitutes</u>" and inserting in lieu thereof "<u>and</u>" and, following "<u>e-liquids</u>," by striking out "<u>, and menthol-flavored tobacco products</u>"

Amendment to be offered by Rep. Galfetti of Barre Town to the report of the Committee on Human Services on S. 18

In Sec. 2, in 7 V.S.A. chapter 40, section 1013, by adding a new subsection to be subsection (c) to read as follows:

- (c) This section shall not apply to any product:
- (1) that has received a marketing authorization order or similar order from the U.S. Food and Drug Administration pursuant to 21 U.S.C. § 387j; or
- (2) that was on the market in the United States as of August 8, 2016, for which the manufacturer submitted a premarket tobacco product application to the U.S. Food and Drug Administration pursuant to 21 U.S.C. § 387j on or before September 9, 2020, and for which the application either remains under investigation by the U.S. Food and Drug Administration or a final decision on the application has not otherwise taken effect.

Amendment to be offered by Rep. Walker of Swanton to the report of the Committee on Human Services on S. 18

<u>First</u>: By adding Secs. 4a–4c to read as follows:

Sec. 4a. 7 V.S.A. § 831(3) is amended to read:

(3) "Cannabis product" means concentrated cannabis and a product that is composed of cannabis and other ingredients and is intended for use or consumption, including an edible product, ointment, and tincture. Cannabis product shall include includes a vaporizer cartridge containing cannabis oil that is intended for use with a battery-powered device and any device designed to deliver cannabis into the body through inhalation of vapor that is sold at a cannabis establishment licensed pursuant to chapter 33 of this title. "Cannabis product" does not mean a "tobacco product" as defined in 32 V.S.A. § 7702, a "tobacco substitute" as defined in section 1001 of this title, or "tobacco paraphernalia" as defined in section 1001 of this title.

Sec. 4b. 7 V.S.A. § 868 is amended to read:

§ 868. PROHIBITED PRODUCTS

- (a) The following are prohibited products and may not be cultivated, produced, or sold pursuant to a license issued under this chapter:
 - (1) cannabis flower with greater than 30 percent tetrahydrocannabinol;
- (2) flavored oil cannabis products sold prepackaged for use with battery-powered devices and any cannabis flower that contains characterizing flavor that is not naturally occurring in the cannabis;
- (3) <u>flavored oil cannabis products sold prepackaged for use with battery- powered devices and any cannabis flower that include a characterizing flavor in the name or description of the product;</u>
 - (4) edible cannabis products;
- (5) cannabis products that contain delta-9 tetrahydrocannabinol and nicotine or alcoholic beverages; and
- (4)(6) any cannabis, cannabis products, or packaging of such items that are designed to make the product more appealing to persons under 21 years of age.

* * *

Sec. 4c. 7 V.S.A. § 972(3) is amended to read:

(3) "Cannabis product" has the same meaning as provided in section 831 of this title means concentrated cannabis and a product that is composed of cannabis and other ingredients and is intended for use or consumption, including an edible product, ointment, and tincture. Cannabis product includes a vaporizer cartridge containing cannabis oil that is intended for use with a battery-powered device and any device designed to deliver cannabis into the body through inhalation of vapor that is sold at a cannabis establishment licensed pursuant to chapter 33 of this title. "Cannabis product" does not mean a "tobacco product" as defined in 32 V.S.A. § 7702, a "tobacco substitute" as defined in section 1001 of this title, or "tobacco paraphernalia" as defined in section 1001 of this title.

<u>Second</u>: In Sec. 15, effective dates, by inserting a new subsection to be subsection (d) to read as follows:

(d) Secs. 4a-4c shall take effect on January 1, 2026.

Amendment to be offered by Reps. Donahue of Northfield and Brumsted of Shelburne to the report of the Committee on Human Services on S. 18

<u>First</u>: In Sec. 2, 7 V.S.A. chapter 40, by striking out § 1005 in its entirety and inserting in lieu thereof a new § 1005 to read as follows: § 1005. PERSONS UNDER 21 YEARS OF AGE; POSSESSION OF

TOBACCO PRODUCTS, TOBACCO SUBSTITUTES, E-LIQUIDS, OR TOBACCO PARAPHERNALIA; MISREPRESENTING AGE OR PURCHASING TOBACCO PRODUCTS; PENALTY

- (a)(1) A person under 21 years of age shall not possess, purchase, or attempt to purchase tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia unless:
- (A) the person is an employee of a holder of a tobacco license and is in possession of tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia to effect a sale in the course of employment; or
- (B) the person is in possession of tobacco products or tobacco paraphernalia in connection with Indigenous cultural tobacco practices.
- (2) A person under 21 years of age shall not misrepresent his or her the person's age to purchase or attempt to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia.
- (b) A person who possesses tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia in violation of subsection (a) of this section shall be subject to having the tobacco products, tobacco substitutes, <u>e-liquids</u>, or tobacco paraphernalia immediately confiscated and shall be further subject to a civil penalty of \$25.00. An action under this subsection shall be brought in the same manner as a traffic violation pursuant to 23 V.S.A. chapter 24.
- (c) A person under 21 years of age who misrepresents his or her the person's age by presenting false identification to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia shall be fined not more than \$50.00 or provide up to 10 hours of community service, or both.

<u>Second</u>: By striking out Sec. 14, Department of Health; school-based usage and cessation efforts; report, it its entirety and inserting in lieu thereof a new Sec. 14 to read as follows:

Sec. 14. DEPARTMENT OF HEALTH; SCHOOL-BASED USAGE AND CESSATION EFFORTS; DIVERSION TO TOBACCO

CESSATION PROGRAM; REPORT

- (a) The Department of Health shall collaborate with relevant school and community partners to survey and report on the use of tobacco products, tobacco substitutes, and e-liquids, as well as on nicotine and tobacco cessation efforts, in Vermont's schools.
- (b) The Department of Health, in consultation with the Division of Liquor Control and the Court Diversion Program, shall develop one or more options for diversion to a tobacco cessation program as an alternative to the existing civil penalties and fines for a person under 21 years of age who possesses, purchases, or uses of false identification to purchase tobacco products, tobacco substitutes, e-liquids, or tobacco paraphernalia under 7 V.S.A. § 1005.
- (c) On or before January 15, 2026, the Department shall report to the House Committees on Human Services, on Education, and on Judiciary and the Senate Committees on Health and Welfare, on Education, and on Judiciary with its findings and recommendations regarding the use of tobacco products, tobacco substitutes, and e-liquids in schools; cessation efforts in schools; and options for one or more diversion programs as set forth in subsections (a) and (b) of this section.

NOTICE CALENDAR

Favorable with Amendment

H. 233

An act relating to pharmacy benefit management and Medicaid wholesale drug distribution

- **Rep.** Cordes of Lincoln, for the Committee on Health Care, recommends 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. chapter 77 is added to read:

CHAPTER 77. PHARMACY BENEFIT MANAGERS

Subchapter 1. General Provisions

§ 3601. PURPOSE

The purpose of this chapter is to establish standards and criteria for the licensure and regulation of pharmacy benefit managers providing claims processing services or other prescription drug or device services for health benefit plans by:

- (1) promoting, preserving, and protecting the public health, safety, and welfare through effective regulation and licensure of pharmacy benefit managers;
- (2) promoting the solvency of the commercial health insurance industry, the regulation of which is reserved to the states by the McCarran-Ferguson Act, 15 U.S.C. §§ 1011–1015, as well as providing for consumer savings and for fairness in prescription drug benefits;
- (3) providing for the powers and duties of the Commissioner of Financial Regulation; and
 - (4) prescribing penalties and fines for violations of this chapter.

§ 3602. DEFINITIONS

As used in this chapter:

- (1) "Claims processing services" means the administrative services performed in connection with the processing and adjudicating of claims relating to pharmacist services that include receiving payments for pharmacist services or making payments to pharmacists or pharmacies for pharmacy services, or both.
 - (2) "Commissioner" means the Commissioner of Financial Regulation.
- (3) "Covered person" means a member, policyholder, subscriber, enrollee, beneficiary, dependent, or other individual participating in a health benefit plan.
- (4) "Health benefit plan" means a policy, contract, certificate, or agreement entered into, offered, or issued by a health insurer to provide, deliver, arrange for, pay for, or reimburse any of the costs of physical, mental, or behavioral health care services.
- (5) "Health insurer" has the same meaning as in section 9402 of this title and includes:
- (A) health insurance companies, nonprofit hospital and medical service corporations, and health maintenance organizations;
- (B) employers, labor unions, and other group of persons organized in Vermont that provide a health benefit plan to beneficiaries who are employed or reside in Vermont; and
- (C) the State of Vermont and any agent or instrumentality of the State that offers, administers, or provides financial support to State government.

- (6) "Maximum allowable cost" means the per unit drug product reimbursement amount, excluding dispensing fees, for a group of equivalent multisource prescription drugs.
- (7) "Other prescription drug or device services" means services other than claims processing services provided directly or indirectly, whether in connection with or separate from claims processing services, and may include:
- (A) negotiating rebates, price concessions, discounts, or other financial incentives and arrangements with drug companies;
 - (B) disbursing or distributing rebates or price concessions, or both;
- (C) managing or participating in incentive programs or arrangements for pharmacist services;
- (D) negotiating or entering into contractual arrangements with pharmacists or pharmacies, or both;
 - (E) developing and maintaining formularies;
 - (F) designing prescription benefit programs; and
 - (G) advertising or promoting services.
- (8) "Pharmacist" means an individual licensed as a pharmacist pursuant to 26 V.S.A. chapter 36.
- (9) "Pharmacist services" means products, goods, and services, or a combination of these, provided as part of the practice of pharmacy.
- (10) "Pharmacy" means a place licensed by the Vermont Board of Pharmacy at which drugs, chemicals, medicines, prescriptions, and poisons are compounded, dispensed, or sold at retail.
- (11) "Pharmacy benefit management" means an arrangement for the procurement of prescription drugs at a negotiated rate for dispensation within this State to beneficiaries, the administration or management of prescription drug benefits provided by a health benefit plan for the benefit of beneficiaries, or any of the following services provided with regard to the administration of pharmacy benefits:
 - (A) mail service pharmacy;
- (B) claims processing, retail network management, and payment of claims to pharmacies for prescription drugs dispensed to beneficiaries;
 - (C) clinical formulary development and management services;
 - (D) rebate contracting and administration;

- (E) certain patient compliance, therapeutic intervention, and generic substitution programs; and
 - (F) disease or chronic care management programs.
- (12)(A) "Pharmacy benefit manager" means an individual, corporation, or other entity, including a wholly or partially owned or controlled subsidiary of a pharmacy benefit manager, that provides pharmacy benefit management services for health benefit plans.
 - (B) The term "pharmacy benefit manager" does not include:
 - (i) a health care facility licensed in this State;
 - (ii) a health care professional licensed in this State;
- (iii) a consultant who only provides advice as to the selection or performance of a pharmacy benefit manager;
- (iv) a health insurer to the extent that it performs any claims processing and other prescription drug or device services exclusively for its enrollees; or
- (v) an entity that provides pharmacy benefit management services for Vermont Medicaid.
- (13) "Pharmacy benefit manager affiliate" means a pharmacy or pharmacist that, directly or indirectly, through one or more intermediaries, is owned or controlled by, or is under common ownership or control with, a pharmacy benefit manager.

§ 3603. RULEMAKING

The Commissioner of Financial Regulation shall adopt rules in accordance with 3 V.S.A. chapter 25 to carry out the provisions of this chapter. The rules shall include, as appropriate, requirements that health insurers maintain the confidentiality of proprietary information and that pharmacy benefit managers file their advertising and solicitation materials with the Commissioner for approval prior to sending any such materials to patients or consumers.

§ 3604. REPORTING

Annually on or before January 15, the Department of Financial Regulation shall report to the House Committee on Health Care and the Senate Committees on Health and Welfare and on Finance regarding pharmacy benefit managers' compliance with the provisions of this chapter.

Subchapter 2. Pharmacy Benefit Manager Licensure and Regulation

§ 3611. LICENSURE

- (a) A person shall not establish or operate as a pharmacy benefit manager for health benefit plans in this State without first obtaining a license from the Commissioner of Financial Regulation.
- (b) A person applying for a pharmacy benefit manager license shall submit an application for licensure in the form and manner prescribed by the Commissioner and shall include with the application a nonrefundable application fee of \$2,500.00 and an initial licensure fee of \$1,000.00.
- (c) The Commissioner may refuse to issue or renew a pharmacy benefit manager license if the Commissioner determines that the applicant or any individual responsible for the conduct of the applicant's affairs is not competent, trustworthy, financially responsible, or of good personal and business reputation, or has been found to have violated the insurance laws of this State or any other jurisdiction, or has had an insurance or other certificate of authority or license denied or revoked for cause by any jurisdiction.
- (d) Unless surrendered, suspended, or revoked by the Commissioner, a license issued under this section shall remain valid, provided the pharmacy benefit manager does all of the following:
 - (1) Continues to do business in this State.
- (2) Complies with the provisions of this chapter and any applicable rules.
- (3) Submits a renewal application in the form and manner prescribed by the Commissioner and pays the annual license renewal fee of \$1,000.00. The renewal application and renewal fee shall be due to the Commissioner on or before 90 days prior to the anniversary of the effective date of the pharmacy benefit manager's initial or most recent license.
- (e) The Commissioner shall adopt rules pursuant to 3 V.S.A. chapter 25 to establish the licensing application, financial, and reporting requirements for pharmacy benefit managers in accordance with this section.

§ 3612. PROHIBITED PRACTICES

- (a) A participation contract between a pharmacy benefit manager and a pharmacist shall not prohibit, restrict, or penalize a pharmacy or pharmacist in any way from disclosing to any covered person any health care information that the pharmacy or pharmacist deems appropriate, including:
 - (1) the nature of treatment, risks, or alternatives to treatment;

- (2) the availability of alternate therapies, consultations, or tests;
- (3) the decision of utilization reviewers or similar persons to authorize or deny services;
 - (4) the process that is used to authorize or deny health care services; or
- (5) information on financial incentives and structures used by the health insurer.
- (b) A pharmacy benefit manager shall not prohibit a pharmacy or pharmacist from:
- (1) discussing information regarding the total cost for pharmacist services for a prescription drug;
- (2) providing information to a covered person regarding the covered person's cost-sharing amount for a prescription drug;
- (3) disclosing to a covered person the cash price for a prescription drug; or
- (4) selling a more affordable alternative to the covered person if a more affordable alternative is available.
- (c) A pharmacy benefit manager contract with a participating pharmacist or pharmacy shall not prohibit, restrict, or limit disclosure of information to the Commissioner, law enforcement, or State and federal government officials, provided that:
- (1) the recipient of the information represents that the recipient has the authority, to the extent provided by State or federal law, to maintain proprietary information as confidential; and
- (2) prior to disclosure of information designated as confidential, the pharmacist or pharmacy:
- (A) marks as confidential any document in which the information appears; and
- (B) requests confidential treatment for any oral communication of the information.
- (d) A pharmacy benefit manager shall not terminate a contract with or penalize a pharmacist or pharmacy due to the pharmacist or pharmacy:
- (1) disclosing information about pharmacy benefit manager practices, except for information determined to be a trade secret under State law or by the Commissioner, when disclosed in a manner other than in accordance with subsection (c) of this section; or

- (2) sharing any portion of the pharmacy benefit manager contract with the Commissioner pursuant to a complaint or query regarding the contract's compliance with the provisions of this chapter.
- (e)(1) A pharmacy benefit manager shall not require a covered person purchasing a covered prescription drug to pay an amount greater than the lesser of:
- (A) the cost-sharing amount under the terms of the health benefit plan, as determined in accordance with subdivision (2) of this subsection (e);
 - (B) the maximum allowable cost for the drug; or
- (C) the amount the covered person would pay for the drug, after application of any known discounts, if the covered person were paying the cash price.
- (2)(A) A pharmacy benefit manager shall attribute any amount paid by or on behalf of a covered person under subdivision (1) of this subsection (e), including any third-party payment, financial assistance, discount, coupon, or any other reduction in out-of-pocket expenses made by or on behalf of a covered person for prescription drugs, toward:
- (i) the out-of-pocket limits for prescription drug costs under 8 V.S.A. § 4089i;
 - (ii) the covered person's deductible, if any; and
- (iii) to the extent not inconsistent with Sec. 2707 of the Public Health Service Act, 42 U.S.C. § 300gg-6, the annual out-of-pocket maximums applicable to the covered person's health benefit plan.
- (B) The provisions of subdivision (A) of this subdivision (2) relating to a third-party payment, financial assistance, discount, coupon, or other reduction in out-of-pocket expenses made on behalf of a covered person shall only apply to a prescription drug:
- (i) for which there is no generic drug or interchangeable biological product, as those terms are defined in section 4601 of this title; or
- (ii) for which there is a generic drug or interchangeable biological product, as those terms are defined in section 4601 of this title, but for which the covered person has obtained access through prior authorization, a step therapy protocol, or the pharmacy benefit manager's or health benefit plan's exceptions and appeals process.
- (C) The provisions of subdivision (A) of this subdivision (2) shall apply to a high-deductible health plan only to the extent that it would not

disqualify the plan from eligibility for a health savings account pursuant to 26 U.S.C. § 223.

(f) A pharmacy benefit manager shall not conduct or participate in spread pricing in this State, which means that a pharmacy benefit manager must ensure that the total amount required to be paid by a health benefit plan and a covered person for a prescription drug covered under the plan does not exceed the amount paid to the pharmacy for dispensing the drug.

§ 3613. ENFORCEMENT; RIGHT OF ACTION

- (a) The Commissioner of Financial Regulation shall enforce compliance with the provisions of this chapter.
- (b)(1) The Commissioner may examine or audit the books and records of a pharmacy benefit manager providing claims processing services or other prescription drug or device services for a health benefit plan to determine compliance with this chapter.
- (2) Information or data acquired in the course of an examination or audit under subdivision (1) of this subsection shall be considered proprietary and confidential, shall be exempt from public inspection and copying under the Public Records Act, shall not be subject to subpoena, and shall not be subject to discovery or admissible in evidence in any private civil action.
- (3) The Office of the Health Care Advocate shall have the right to receive or review copies of all materials provided to or reviewed by the Commissioner under this chapter in order to protect and promote patients' and consumers' interests in accordance with the Office's duties under chapter 229 of this title. The Office of the Health Care Advocate shall not further disclose any confidential or proprietary information provided to the Office pursuant to this subdivision. Information provided to the Office pursuant to this subdivision shall not be subject to subpoena and shall not be subject to discovery or admissible in evidence in any private civil action.
- (c) The Commissioner may use any document or information provided pursuant to subsection 3612(c) or (d) of this chapter in the performance of the Commissioner's duties to determine compliance with this chapter.
- (d) The Commissioner may impose an administrative penalty on a pharmacy benefit manager or the health insurer with which it is contracted, or both, for a violation of this chapter in accordance with 8 V.S.A. § 3661.
- (e) A pharmacy, pharmacist, or other person injured by a pharmacy benefit manager's violation of this chapter may bring an action in Superior Court against the pharmacy benefit manager for injunctive relief, compensatory and

punitive damages, costs and reasonable attorney's fees, and other appropriate relief.

§ 3614. COMPLIANCE; CONSISTENCY WITH FEDERAL LAW

Nothing in this chapter is intended or should be construed to conflict with applicable federal law.

§ 3615. CHARGES FOR EXAMINATIONS, APPLICATIONS, REVIEWS,

AND INVESTIGATIONS

The Department of Financial Regulation may charge its reasonable expenses in administering the provisions of this chapter to pharmacy benefit managers in the manner provided for in 8 V.S.A. § 18.

Subchapter 3. Pharmacy Benefit Manager Relations with Health Insurers

§ 3621. INSURER AUDIT OF PHARMACY BENEFIT MANAGER

ACTIVITIES

In order to enable periodic verification of pricing arrangements in administrative-services-only contracts, pharmacy benefit managers shall allow access, in accordance with rules adopted by the Commissioner, by the health insurer who is a party to the administrative-services-only contract to financial and contractual information necessary to conduct a complete and independent audit designed to verify the following:

- (1) full pass through of negotiated drug prices and fees associated with all drugs dispensed to beneficiaries of the health benefit plan in both retail and mail order settings or resulting from any of the pharmacy benefit management functions defined in the contract;
- (2) full pass through of all financial remuneration associated with all drugs dispensed to beneficiaries of the health benefit plan in both retail and mail order settings or resulting from any of the pharmacy benefit management functions defined in the contract; and
- (3) any other verifications relating to the pricing arrangements and activities of the pharmacy benefit manager required by the contract if required by the Commissioner.

§ 3622. PHARMACY BENEFIT MANAGERS; REQUIRED PRACTICES WITH RESPECT TO HEALTH INSURERS

(a) A pharmacy benefit manager that provides pharmacy benefit management for a health benefit plan has a fiduciary duty to its health insurer client that includes a duty to be fair and truthful toward the health insurer; to

- act in the health insurer's best interests; and to perform its duties with care, skill, prudence, and diligence. In the case of a health benefit plan offered by a health insurer as defined by subdivision 3602(5)(A) of this title, the health insurer shall remain responsible for administering the health benefit plan in accordance with the health insurance policy or subscriber contract or plan and in compliance with all applicable provisions of Title 8 and this title.
- (b) A pharmacy benefit manager shall provide notice to the health insurer that the terms contained in subsection (c) of this section may be included in the contract between the pharmacy benefit manager and the health insurer.
- (c) A pharmacy benefit manager that provides pharmacy benefit management for a health plan shall do all of the following:
- (1) Provide all financial and utilization information requested by a health insurer relating to the provision of benefits to beneficiaries through that health insurer's health benefit plan and all financial and utilization information relating to services to that health insurer. A pharmacy benefit manager providing information under this subsection may designate that material as confidential. Information designated as confidential by a pharmacy benefit manager and provided to a health insurer under this subsection shall not be disclosed by the health insurer to any person without the consent of the pharmacy benefit manager, except that disclosure may be made by the health insurer:
- (A) in a court filing under the consumer protection provisions of 9 V.S.A. chapter 63, provided that the information shall be filed under seal and that prior to the information being unsealed, the court shall give notice and an opportunity to be heard to the pharmacy benefit manager on why the information should remain confidential;
 - (B) to State and federal government officials;
 - (C) when authorized by 9 V.S.A. chapter 63;
 - (D) when ordered by a court for good cause shown; or
- (E) when ordered by the Commissioner as to a health insurer as defined in subdivision 3602(5)(A) of this chapter pursuant to the provisions of Title 8 and this title.
- (2) Notify a health insurer in writing of any proposed or ongoing activity, policy, or practice of the pharmacy benefit manager that presents, directly or indirectly, any conflict of interest with the requirements of this section.

- (3) With regard to the dispensation of a substitute prescription drug for a prescribed drug to a beneficiary in which the substitute drug costs more than the prescribed drug and the pharmacy benefit manager receives a benefit or payment directly or indirectly, disclose to the health insurer the cost of both drugs and the benefit or payment directly or indirectly accruing to the pharmacy benefit manager as a result of the substitution.
- (4) If the pharmacy benefit manager derives any payment or benefit for the dispensation of prescription drugs within the State based on volume of sales for certain prescription drugs or classes or brands of drugs within the State, pass that payment or benefit on in full to the health insurer.
- (5) Disclose to the health insurer all financial terms and arrangements for remuneration of any kind that apply between the pharmacy benefit manager and any prescription drug manufacturer that relate to benefits provided to beneficiaries under or services to the health insurer's health benefit plan, including formulary management and drug-switch programs, educational support, claims processing, and pharmacy network fees charged from retail pharmacies and data sales fees. A pharmacy benefit manager providing information under this subsection may designate that material as confidential. Information designated as confidential by a pharmacy benefit manager and provided to a health insurer under this subsection shall not be disclosed by the health insurer to any person without the consent of the pharmacy benefit manager, except that disclosure may be made by the health insurer:
- (A) in a court filing under the consumer protection provisions of 9 V.S.A. chapter 63, provided that the information shall be filed under seal and that prior to the information being unsealed, the court shall give notice and an opportunity to be heard to the pharmacy benefit manager on why the information should remain confidential;
 - (B) when authorized by 9 V.S.A. chapter 63;
 - (C) when ordered by a court for good cause shown; or
- (D) when ordered by the Commissioner as to a health insurer as defined in subdivision 3602(5)(A) of this title pursuant to the provisions of Title 8 and this title.
- (d) A pharmacy benefit manager contract with a health insurer shall not contain any provision purporting to reserve discretion to the pharmacy benefit manager to move a drug to a higher tier or remove a drug from its drug formulary any more frequently than two times per year.

(e) Compliance with the requirements of this section is required for pharmacy benefit managers entering into contracts with a health insurer in this State for pharmacy benefit management in this State.

Subchapter 4. Pharmacy Benefit Manager Relations with Pharmacies

§ 3631. PHARMACY BENEFIT MANAGERS; REQUIRED PRACTICES

WITH RESPECT TO PHARMACIES

- (a) Within 14 calendar days following receipt of a pharmacy claim, a pharmacy benefit manager or other entity paying pharmacy claims shall do one of the following:
 - (1) Pay or reimburse the claim.
- (2) Notify the pharmacy in writing that the claim is contested or denied. The notice shall include specific reasons supporting the contest or denial and a description of any additional information required for the pharmacy benefit manager or other payer to determine liability for the claim.
- (b) In addition to the practices prohibited by section 3612 of this chapter, a pharmacy benefit manager or other entity paying pharmacy claims shall not require a pharmacy to pass through any portion of the insured's co-payment, or patient responsibility, to the pharmacy benefit manager or other payer.
- (c) For each drug for which a pharmacy benefit manager establishes a maximum allowable cost in order to determine the reimbursement rate, the pharmacy benefit manager shall do all of the following:
- (1) Make available, in a format that is readily accessible and understandable by a pharmacist, the actual maximum allowable cost for each drug and the source used to determine the maximum allowable cost, which shall not be dependent upon individual beneficiary identification or benefit stage.
- (2) Update the maximum allowable cost at least once every seven calendar days. In order to be subject to maximum allowable cost, a drug must be widely available for purchase by all pharmacies in the State, without limitations, from national or regional wholesalers and must not be obsolete or temporarily unavailable.
- (3) Establish or maintain a reasonable administrative appeals process to allow a dispensing pharmacy provider to contest a listed maximum allowable cost.
- (4)(A) Respond in writing to any appealing pharmacy provider within 10 calendar days after receipt of an appeal, provided that, except as provided

- in subdivision (B) of this subdivision (4), a dispensing pharmacy provider shall file any appeal within 10 calendar days from the date its claim for reimbursement is adjudicated.
- (B) A pharmacy benefit manager shall allow a dispensing pharmacy provider to appeal after the 10-calendar-day appeal period set forth in subdivision (A) of this subdivision (4) if the prescription claim is subject to an audit initiated by the pharmacy benefit manager or its auditing agent.
- (5) For a denied appeal, provide the reason for the denial and identify the national drug code and a Vermont-licensed wholesaler of an equivalent drug product that may be purchased by contracted pharmacies at or below the maximum allowable cost.
 - (6) For an appeal in which the appealing pharmacy is successful:
- (A) make the change in the maximum allowable cost within 30 business days after the redetermination; and
- (B) allow the appealing pharmacy or pharmacist to reverse and rebill the claim in question.
- (d) A pharmacy benefit manager shall not reimburse a pharmacy or pharmacist in this State an amount less than the amount the pharmacy benefit manager reimburses a pharmacy benefit manager affiliate for providing the same pharmacist services.
- (e) A pharmacy benefit manager shall not restrict, limit, or impose requirements on a licensed pharmacy in excess of those set forth by the Vermont Board of Pharmacy or by other State or federal law, nor shall it withhold reimbursement for services on the basis of noncompliance with participation requirements.
- (f) A pharmacy benefit manager shall provide notice to all participating pharmacies prior to changing its drug formulary.
- (g)(1) A pharmacy benefit manager or other third party that reimburses a 340B covered entity for drugs that are subject to an agreement under 42 U.S.C. § 256b through the 340B drug pricing program shall not reimburse the 340B covered entity for pharmacy-dispensed drugs at a rate lower than that paid for the same drug to pharmacies that are not 340B covered entities, and the pharmacy benefit manager shall not assess any fee, charge-back, or other adjustment on the 340B covered entity on the basis that the covered entity participates in the 340B program as set forth in 42 U.S.C. § 256b.
- (2) With respect to a patient who is eligible to receive drugs that are subject to an agreement under 42 U.S.C. § 256b through the 340B drug pricing

program, a pharmacy benefit manager or other third party that makes payment for the drugs shall not discriminate against a 340B covered entity in a manner that prevents or interferes with the patient's choice to receive the drugs from the 340B covered entity.

- (3) As used in this section, "other third party" does not include Vermont Medicaid.
 - (h) A pharmacy benefit manager shall not:
- (1) require a claim for a drug to include a modifier or supplemental transmission, or both, to indicate that the drug is a 340B drug unless the claim is for payment, directly or indirectly, by Medicaid; or
- (2) restrict access to a pharmacy network or adjust reimbursement rates based on a pharmacy's participation in a 340B contract pharmacy arrangement.
- Sec. 2. 8 V.S.A. § 4084 is amended to read:

§ 4084. ADVERTISING PRACTICES

- (a) No company doing business in this State, and no insurance agent or broker, shall use in connection with the solicitation of health insurance or pharmacy benefit management any advertising copy or advertising practice or any plan of solicitation which that is materially misleading or deceptive. An advertising copy or advertising practice or plan of solicitation shall be considered to be materially misleading or deceptive if by implication or otherwise it transmits information in such manner or of such substance that a prospective applicant for health insurance may be misled thereby to his or her by it to the applicant's material damage.
- (b)(1) If the Commissioner finds that any such advertising copy or advertising practice or plan of solicitation is materially misleading or deceptive he or she, the Commissioner shall order the company or the agent or broker using such copy or practice or plan to cease and desist from such use.
- (2) Before making any such finding and order, the Commissioner shall give notice, not less than 10 days in advance, and a hearing to the company, agent, or broker affected.
- (3) If the Commissioner finds, after due notice and hearing, that any authorized insurer, <u>licensed pharmacy benefit manager</u>, licensed insurance agent, or licensed insurance broker has <u>wilfully intentionally</u> violated any such order to cease and desist he or she, the Commissioner may suspend or revoke the license of such insurer, <u>pharmacy benefit manager</u>, agent, or broker.

Sec. 3. 8 V.S.A. § 4089j is amended to read:

§ 4089j. RETAIL PHARMACIES; FILLING OF PRESCRIPTIONS

(a) As used in this section:

* * *

(6) "Direct solicitation" means direct contact, including telephone, computer, e-mail, instant messaging, or in-person contact, by a pharmacy provider or its agent to a beneficiary of a plan offered by a health insurer without the beneficiary's consent for the purpose of marketing the pharmacy provider's services.

* * *

- (d)(1) A health insurer or pharmacy benefit manager shall permit a participating network pharmacy to perform all pharmacy services within the lawful scope of the profession of pharmacy as set forth in 26 V.S.A. chapter 36.
- (2) A health insurer or pharmacy benefit manager shall not do any of the following:

* * *

- (F)(i) Exclude any amount paid by or on behalf of a covered individual, including any third-party payment, financial assistance, discount, coupon, or other reduction, when calculating a covered individual's contribution toward:
- (I) the out-of-pocket limits for prescription drug costs under section 4089i of this title;
 - (II) the covered individual's deductible, if any; or
- (III) to the extent not inconsistent with Sec. 2707 of the Public Health Service Act, 42 U.S.C. § 300gg-6, the annual out-of-pocket maximums applicable to the covered individual's health benefit plan.
- (ii) The provisions of subdivision (i) of this subdivision (F) relating to a third-party payment, financial assistance, discount, coupon, or other reduction in out-of-pocket expenses made on behalf of a covered person shall only apply to a prescription drug:
- (I) for which there is no generic drug or interchangeable biological product, as those terms are defined in 18 V.S.A. § 4601; or
- (II) for which there is a generic drug or interchangeable biological product, as those terms are defined in 18 V.S.A. § 4601, but for

which the covered person has obtained access through prior authorization, a step therapy protocol, or the pharmacy benefit manager's or health benefit plan's exceptions and appeals process.

(iii) The provisions of subdivision (i) of this subdivision (F) shall apply to a high-deductible health plan only to the extent that it would not disqualify the plan from eligibility for a health savings account pursuant to 26 U.S.C. § 223.

* * *

- (5) A health insurer or pharmacy benefit manager shall adhere to the definitions of prescription drugs and the requirements and guidance regarding the pharmacy profession established by State and federal law and the Vermont Board of Pharmacy and shall not establish classifications of or distinctions between prescription drugs, impose penalties on prescription drug claims, attempt to dictate the behavior of pharmacies or pharmacists, or place restrictions on pharmacies or pharmacists that are more restrictive than or inconsistent with State or federal law or with rules adopted or guidance provided by the Board of Pharmacy.
- (6) A pharmacy benefit manager or licensed pharmacy shall not make a direct solicitation to the beneficiary of a plan offered by a health insurer unless one or more of the following applies:
- (A) the beneficiary has given written permission to the supplier or the ordering health care professional to contact the beneficiary regarding the furnishing of a prescription item that is to be rented or purchased;
- (B) the supplier has furnished a prescription item to the beneficiary and is contacting the beneficiary to coordinate delivery of the item; or
- (C) if the contact relates to the furnishing of a prescription item other than a prescription item already furnished to the beneficiary, the supplier has furnished at least one prescription item to the beneficiary within the 15-month period preceding the date on which the supplier attempts to make the contact.
 - (8) The provisions of this subsection shall not apply to Medicaid.
- (e) A health insurer or pharmacy benefit manager shall not alter a patient's prescription drug order or the pharmacy chosen by the patient without the patient's consent; provided, however, that nothing in this subsection shall be construed to affect the duty of a pharmacist to substitute a lower-cost drug or biological product in accordance with the provisions of 18 V.S.A. § 4605.
- Sec. 4. REPEALS; CONTROLLING LAWS
 - (a) The following are repealed on July 1, 2029:

- (1) 18 V.S.A. § 9421 (pharmacy benefit management; registration; insurer audit of pharmacy benefit manager activities); and
- (2) 18 V.S.A. chapter 221, subchapter 9 (§§ 9471–9474; pharmacy benefit managers).
- (b) To the extent that any provision of 18 V.S.A. § 9421 or 18 V.S.A. chapter 221, subchapter 9 is found to conflict with one or more provisions of 18 V.S.A. chapter 77 prior to July 1, 2029, the provisions of 18 V.S.A. chapter 77, as enacted in this act and as may be further amended, shall control.

Sec. 5. APPLICABILITY

- (a)(1) The provisions of Sec. 1 of this act (18 V.S.A. chapter 77, pharmacy benefit managers) relating to contracting and to benefit design shall apply to a contract or health benefit plan issued, offered, renewed, or recredentialed on or after January 1, 2025, including any health insurer that performs claims processing or other prescription drug or device services through a third party, but in no event later than July 1, 2029.
- (2) At least annually through 2029, a pharmacy benefit manager that provides pharmacy benefit management for a health benefit plan and uses spread pricing shall disclose to the health insurer, the Department of Financial Regulation, the Green Mountain Care Board, and the Office of the Health Care Advocate the aggregate amount the pharmacy benefit manager retained on all claims charged to the health insurer for prescriptions filled during the preceding calendar year in excess of the amount the pharmacy benefit manager reimbursed pharmacies.
- (b) A person doing business in this State as a pharmacy benefit manager on or before January 1, 2025 shall have 12 months following that date to come into compliance with the licensure provisions of Sec. 1 of this act (18 V.S.A. chapter 77, pharmacy benefit managers).

Sec. 6. PHARMACY BENEFIT MANAGER REGULATION; POSITIONS; APPROPRIATION

- (a) The following permanent positions are created in the Department of Financial Regulation:
 - (1) one exempt Enforcement Attorney;
 - (2) one classified Pharmacy Benefit Manager (PBM) Investigator; and
- (3) one classified Pharmacy Benefit Manager (PBM) Licensing/Consumer Services Investigator.

(b) The sum of \$405,000.00 is appropriated to the Department of Financial Regulation from the Insurance Regulatory and Supervision Fund in fiscal year 2025 to support the Department's pharmacy benefit manager regulation activities as set forth in this act.

Sec. 7. EFFECTIVE DATE

This act shall take effect on July 1, 2024.

and that after passage the title of the bill be amended to read: "An act relating to licensure and regulation of pharmacy benefit managers"

(Committee Vote: 11-0-0)

H. 534

An act relating to retail theft

Rep. Notte of Rutland City, for the Committee on Judiciary, recommends 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. § 2575 is amended to read:

§ 2575. OFFENSE OF RETAIL THEFT

A person commits the offense of retail theft when the person, with intent of depriving a merchant wrongfully of the lawful possession of merchandise, money, or credit:

(1) takes and carries away or causes to be taken and carried away or aids and abets the carrying away of, any merchandise from a retail mercantile establishment without paying the retail value of the merchandise; or

* * *

Sec. 2. 13 V.S.A. § 2577 is amended to read:

§ 2577. PENALTY

- (a) A person convicted of the offense of retail theft of merchandise having a retail value not in excess of \$900.00 shall be punished by a fine of not more than \$500.00 or imprisonment for not more than six months, or both.
- (b) A person convicted of the offense of retail theft of merchandise having a retail value in excess of \$900.00 shall be punished by a fine of not more than
 - \$1,000.00 or imprisonment for not more than 10 years, or both.

* * *

- (d)(1) A person who commits more than one retail theft offense in violation of subdivision 2575(1) of this title in one or more locations within a 14-day period and within a single county shall be punished by a fine of not more than \$1,000.00 or imprisonment for not more than 10 years, or both, if the aggregate retail value of the merchandise taken away exceeds \$900.00.
 - (2) This subsection shall be repealed on July 1, 2027.

Sec. 3. INTENT

It is the intent of the General Assembly that the Department of Corrections reinstitute the Community Restitution Program and ensure that it is appropriately staffed and resourced so that it may be offered in all 14 counties as a sentencing alternative.

Sec. 4. 13 V.S.A. § 7030 is amended to read:

§ 7030. SENTENCING ALTERNATIVES

- (a) In determining which of the following should be ordered, the court shall consider the nature and circumstances of the crime; the history and character of the defendant; the defendant's family circumstances and relationships; the impact of any sentence upon the defendant's minor children; the need for treatment; and the risk to self, others, and the community at large presented by the defendant:
 - (1) A deferred sentence pursuant to section 7041 of this title.
- (2) Referral to a community reparative board pursuant to 28 V.S.A. chapter 12 in the case of an offender who has pled guilty to a nonviolent felony, a nonviolent misdemeanor, or a misdemeanor that does not involve the subject areas prohibited for referral to a community justice center under 24 V.S.A. § 1967. Referral to a community reparative board pursuant to this subdivision does not require the court to place the offender on probation. The offender shall return to court for further sentencing if the reparative board does not accept the case or if the offender fails to complete the reparative board program to the satisfaction of the board in a time deemed reasonable by the board.
- (3) <u>Community restitution pursuant to a policy adopted by the</u> Commissioner of Corrections.
 - (4) Probation pursuant to 28 V.S.A. § 205.
 - (4)(5) Supervised community sentence pursuant to 28 V.S.A. § 352.
 - (5)(6) Sentence of imprisonment.

(b) When ordering a sentence of probation, the court may require participation in the Restorative Justice Program established by 28 V.S.A. chapter 12 as a condition of the sentence.

Sec. 5. EFFECTIVE DATE

This act shall take effect on passage.

(Committee Vote: 10-0-1)

H. 612

An act relating to miscellaneous cannabis amendments

Rep. Birong of Vergennes, for the Committee on Government Operations and Military Affairs, recommends the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 6 V.S.A. § 562(4) is amended to read:

- (4)(A) "Hemp products" or "hemp-infused products" means all products with the federally defined tetrahydrocannabinol concentration level for hemp derived from, or made by, processing hemp plants or plant parts, which are prepared in a form available for commercial sale, including cosmetics, personal care products, food intended for animal or human consumption, cloth, cordage, fiber, fuel, paint, paper, construction materials, plastics, and any product containing one or more hemp-derived cannabinoids, such as cannabidiol.
- (B) Notwithstanding subdivision (A) of this subdivision (4), "hemp products" and "hemp-infused products" do not include any substance, manufacturing intermediary, or product that:
- (i) is prohibited or deemed a regulated cannabis product by administrative rule of the Cannabis Control Board; or
- (ii) contains more than 0.3 percent total tetrahydrocannabinol on a dry-weight basis.
- (C) A hemp-derived product or substance that is excluded from the definition of "hemp products" or "hemp-infused products" pursuant to subdivision (B) of this subdivision (4) shall be considered a cannabis product as defined by 7 V.S.A. § 831(3); provided, however, that a person duly licensed or registered by the Cannabis Control Board lawfully may possess such products in conformity with the person's license or hemp processor registration.
- Sec. 2. 7 V.S.A. § 861(18) is amended to read:

(18) "Controls," "is controlled by," and "under common control" mean the power to direct, or cause the direction or management and policies of a person, whether through the direct or beneficial ownership of voting securities, by contract, or otherwise. A person who directly or beneficially owns has a 10 percent or more ownership interest or equity interest, or the equivalent thereof, in the assets, capital, profits, or stock of another person shall be deemed to control the person.

Sec. 3. 7 V.S.A. § 868 is amended to read:

§ 868. PROHIBITED PRODUCTS

- (a) The Except as provided in section 907 of this title relating to a retailer with a medical endorsement, the following are prohibited products and may not be cultivated, produced, or sold pursuant to a license issued under this chapter:
 - (1) cannabis flower with greater than 30 percent tetrahydrocannabinol;
- (2) flavored oil cannabis products sold prepackaged for use with battery- powered devices and any cannabis flower that contains characterizing flavor that is not naturally occurring in the cannabis;
- (3) cannabis products that contain delta-9 tetrahydrocannabinol and nicotine or alcoholic beverages; and
- (4) any cannabis, cannabis products, or packaging of such items that are designed to make the product more appealing to persons under 21 years of age.
- (b)(1) Except as provided by subdivision (2) of this subsection <u>and in section 907 of this title relating to a retailer with a medical endorsement</u>, solid and liquid concentrate cannabis products with greater than 60 percent tetrahydrocannabinol may be produced by a licensee and sold to another licensee in accordance with subchapter 3 of this chapter but shall not be sold to the public by a licensed retailer or integrated licensee.
- (2) Liquid concentrate cannabis products with greater than 60 percent tetrahydrocannabinol that are prepackaged for use with battery-powered devices shall be permitted to be sold to the public by a licensed retailer or integrated licensee.
- Sec. 4. 7 V.S.A. § 881 is amended to read:

§ 881. RULEMAKING; CANNABIS ESTABLISHMENTS

- (a) The Board shall adopt rules to implement and administer this chapter in accordance with subdivisions (1)–(8) of this subsection.
 - (1) Rules concerning any cannabis establishment shall include:

- (A) the form and content of license and renewal applications;
- (B) qualifications for licensure that are directly and demonstrably related to the operation of a cannabis establishment, including:
- (i) a requirement to submit an operating plan, which shall include information concerning:
- (I) the type of business organization, the identity of its controlling owners and principals, and the identity of the controlling owners and principals of its affiliates; and
- (II) the sources, amount, and nature of its capital, assets, and financing; the identity of its financiers; and the identity of the controlling owners and principals of its financiers;
- (ii) a requirement to file an amendment to its operating plan in the event of a significant change in organization, operation, or financing; and
- (iii) the requirement for a fingerprint-based criminal history record check and regulatory record check pursuant to section 883 of this title;
- (C) oversight requirements, including provisions to ensure that a licensed establishment complies with State and federal regulatory requirements governing insurance, securities, workers' compensation, unemployment insurance, and occupational health and safety;
 - (D) inspection requirements;
- (E) records to be kept by licensees and the required availability of the records;
 - (F) employment and training requirements;
- (G) security requirements, including any appropriate lighting, physical security, video, and alarm requirements;
 - (H) health and safety requirements;
- (I) regulation of additives to cannabis and cannabis products, including cannabidiol derived from hemp and substances that are toxic or designed to make the product more addictive, more appealing to persons under 21 years of age, or to mislead consumers;
- (J) procedures for seed-to-sale traceability of cannabis, including any requirements for tracking software;
 - (K) regulation of the storage and transportation of cannabis;
 - (L) sanitary requirements;

- (M) procedures for the renewal of a license, which shall allow renewal applications to be submitted up to 90 days prior to the expiration of the cannabis establishment's license;
 - (N) procedures for suspension and revocation of a license;
- (O) requirements for banking and financial transactions, including provisions to ensure that the Board, the Department of Financial Regulation, and financial institutions have access to relevant information concerning licensed establishments to comply with State and federal regulatory requirements;
- (P) disclosure or eligibility requirements for a financier, its owners and principals, and its affiliates, which may include:
- (i) requirements to disclose information to a licensed establishment, the Board, or the Department of Financial Regulation;
- (ii) a minimum age requirement and a requirement to conduct a background check for natural persons;
- (iii) requirements to ensure that a financier complies with applicable State and federal laws governing financial institutions, licensed lenders, and other financial service providers; and
- (iv) any other requirements, conditions, or limitations on the type or amount of loans or capital investments made by a financier or its affiliates, which the Board, in consultation with the Department of Financial Regulation, determines are necessary to protect the public health, safety, and general welfare:
- (Q) policies and procedures for conducting outreach and promoting participation in the regulated cannabis market by diverse groups of individuals, including those who have been disproportionately harmed by cannabis prohibition;
 - (R) advertising and marketing; and
- (S) requirements for cannabis control testing of hemp, hemp-infused products, cannabis, and cannabis products.
 - (2)(A) Rules concerning cultivators shall include:
- (i) creation of a tiered system of licensing based on the plant canopy size of the cultivation operation or plant count for breeding stock;
- (ii) pesticides or classes of pesticides that may be used by cultivators, provided that any rules adopted under this subdivision shall

comply with and shall be at least as stringent as the Agency of Agriculture, Food and Markets' Vermont Pesticide Control Regulations;

- (iii) standards for indoor cultivation of cannabis;
- (iv) procedures and standards for testing cannabis for contaminants, potency, and quality assurance and control;
- (v) labeling requirements for cannabis sold to retailers and integrated licensees, including health warnings developed in consultation with the Department of Health;
- (vi) regulation of visits to the establishments, including the number of visitors allowed at any one time and record keeping concerning visitors; and
 - (vii) facility inspection requirements and procedures; and
- (viii) performance standards that would allow the Board to relegate a cultivator into a lower tier or expand into a tier that may not be otherwise available to new applicants.

* * *

- (5) Rules concerning retailers shall include:
 - (A) requirements for proper verification of age of customers;
- (B) restrictions that cannabis shall be stored behind a counter or other barrier to ensure a customer does not have direct access to the cannabis;
- (C) requirements that if the retailer sells hemp or hemp products, the hemp and hemp products are clearly labeled as such;
- (D) requirements for opaque, child-resistant packaging of cannabis products and child-deterrent packaging for cannabis at point of sale to customer; and
- (E) requirements and procedures for facility inspection to occur at least annually;
- (F) location or siting requirements that increase the geographic distribution of new cannabis retail establishments based on population and market needs; and
- (G) requirements for a medical-use endorsement, including rules requiring access for patients who are under 21 years of age.

* * *

Sec. 5. 7 V.S.A. § 907 is amended to read:

§ 907. RETAILER LICENSE

- (a) A retailer licensed under this chapter may:
- (1) purchase cannabis and cannabis products from a licensed cannabis establishment; and
- (2) transport, possess, package, and sell cannabis and cannabis products to the public for consumption off the registered premises or for cultivation.
- (b) In a single transaction, a retailer may provide one ounce of cannabis or the equivalent in cannabis products, or a combination thereof, to a person 21 years of age or older upon verification of a valid government-issued photograph identification card.

(c)(1) Packaging shall include:

- (A) the strain and variety of cannabis contained;
- (B) the potency of the cannabis represented by the amount of tetrahydrocannabinol and cannabidiol in milligrams total and per serving;
- (C) a "produced on" date reflecting the date that the cultivator finished producing the cannabis;
 - (D) appropriate warnings as prescribed by the Board in rule; and
- (E) any additional requirements contained in rules adopted by the Board in accordance with this chapter.
- (2) Packaging shall not be designed to appeal to persons under 21 years of age.
- (d) A retailer shall display a safety information flyer at the point of purchase and offer a customer a copy of the flyer with each purchase. A retailer shall inform the customer that if the customer elects not to receive the flyer, the information contained in the flyer is available on the website for the Board. The flyer shall be developed by the Board in consultation with the Department of Health, posted on the Board's website, and supplied to the retailer free of charge. At a minimum, the flyer or flyers shall contain information concerning the methods for administering cannabis, the amount of time it may take for cannabis products to take effect, the risks of driving under the influence of cannabis, the potential health risks of cannabis use, the symptoms of problematic usage, how to receive help for cannabis abuse, and a warning that cannabis possession is illegal under federal law.
- (e) Delivery of cannabis to customers is prohibited, except as provided in subsection (f) of this section.

- (f) A retailer may obtain a medical-use endorsement in compliance with rules adopted by the Board and the endorsement shall permit the retailer to:
- (1) sell tax-free cannabis and cannabis products to registered patients directly or through their registered caregivers:
- (A) that are otherwise prohibited for sale to nonmedical customers pursuant to subdivisions 868(a)(1) and (b)(1) of this title;
- (B) that are otherwise prohibited for sale to nonmedical customers if they are determined to be appropriate for use by a registered patient as determined by the Board through rulemaking; and
- (C) quantities in excess of the single transaction limit in subsection (b) of this section provided they do not exceed the per patient possession limit in section 952 of this title.
- (2) deliver cannabis and cannabis products to registered patients directly or through their registered caregivers; and
- (3) allow registered patients to purchase directly or through their registered caregivers cannabis and cannabis products without leaving their vehicles.
- Sec. 6. 7 V.S.A. § 910 is amended to read:

§ 910. CANNABIS ESTABLISHMENT FEE SCHEDULE

The following fees shall apply to each person or product licensed by the Board:

* * *

(4) Retailers.

- (A) Retailers that sell cannabis and cannabis products to consumers shall be assessed an annual licensing fee of \$10,000.00.
- (B) Retailers that include a medical-use endorsement shall be assessed an annual licensing fee of \$10,250.00.

* * *

Sec. 7. 7 V.S.A. § 951(8) is amended to read:

- (8) "Qualifying medical condition" means:
- (A) cancer, multiple sclerosis, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, glaucoma, Crohn's disease, Parkinson's disease, post-traumatic stress disorder, ulcerative

<u>colitis</u>, or the treatment of these conditions, if the disease or the treatment results in severe, persistent, and intractable symptoms; or

- (B) a disease or medical condition or its treatment that is chronic, debilitating, and produces one or more of the following intractable symptoms: cachexia or wasting syndrome, chronic pain, severe nausea, or seizures.
- Sec. 8. 7 V.S.A. § 955 is amended to read:

§ 955. REGISTRATION; FEES

- (a) A registration card shall expire one year after the date of issuance for patients with a qualifying medical condition of chronic pain and the caregivers who serve those patients. For all other patients and the caregivers who serve those patients, a registration card shall expire three years after the date of issuance. A patient or caregiver may renew the card according to protocols adopted by the Board.
- (b) The Board shall charge and collect a \$50.00 registration and renewal fee for patients and caregivers. Fees shall be deposited in the Cannabis Regulation Fund as provided in section 845 of this title.
- Sec. 9. 7 V.S.A. § 977 is amended to read:

§ 977. FEES

- (a) The Board shall charge and collect the following fees for dispensaries:
 - (1) a one-time \$2,500.00 \$1,000.00 application fee;
 - (2) a \$20,000.00 registration fee for the first year of operation;
- (3) an annual renewal fee of \$25,000.00 for a subsequent year of operation \$5,000.00; and
- (4)(3) an annual Registry identification or renewal card fee of \$50.00 to be paid by the dispensary for each owner, principal, financier, and employee of the dispensary.
- (b) Fees shall be deposited in the Cannabis Regulation Fund as provided in section 845 of this title.
- Sec. 10. 7 V.S.A. § 978(f) is amended to read:
- (f) The Board may charge and collect fees for review of advertisements. [Repealed.]
- Sec. 11. 18 V.S.A. § 4230(d) is amended to read:
- (d) Canabis-infused Cannabis-infused products. Only the portion of a cannabis-infused product that is attributable to cannabis shall count toward the

possession limits of this section. The weight of cannabis that is attributable to cannabis-infused products shall be determined according to methods set forth in rule by the Department of Public Safety in accordance with chapter 86 of this title (therapeutic use of cannabis) Cannabis Control Board.

- Sec. 12. 20 V.S.A. § 2730(b) is amended to read:
 - (b) The term "public building" does not include:

* * *

- (5) A farm building that is used in the outdoor cultivation of cannabis by a person licensed pursuant to 7 V.S.A. chapter 33 in accordance with such chapter and related rules.
- Sec. 13. 32 V.S.A. § 7902 is amended to read:

§ 7902. CANNABIS EXCISE TAX

- (a) There is imposed a cannabis excise tax equal to 14 percent of the sales price of each retail sale in this State of cannabis and cannabis products, including food or beverages.
- (b) The tax imposed by this section shall be paid by the purchaser to the retailer or integrated licensee. Each retailer or integrated licensee shall collect from the purchaser the full amount of the tax payable on each taxable sale.
- (c) The tax imposed by this section is separate from and in addition to the general sales and use tax imposed by chapter 233 of this title. The tax imposed by this section shall not be part of the sales price to which the general sales and use tax applies. The cannabis excise tax shall be separately itemized from the general sales and use tax on the receipt provided to the purchaser.
- (d) The following sales shall be exempt from the tax imposed under this section:
- (1) sales under any circumstances in which the State is without power to impose the tax; and
- (2) sales made by any dispensary as authorized under 7 V.S.A. chapter 37 or any retailer licensed with a medical-use endorsement as authorized under 7 V.S.A. chapter 33, provided that the cannabis or cannabis product is sold only to registered qualifying patients directly or through their registered caregivers. A retailer that sells cannabis or cannabis products that are exempt from tax pursuant to this subdivision shall retain information pertaining to each exempt transaction as required by the Commissioner of Taxes.

Sec. 14. 32 V.S.A. § 9741 is amended to read:

§ 9741. SALES NOT COVERED

Retail sales and use of the following shall be exempt from the tax on retail sales imposed under section 9771 of this title and the use tax imposed under section 9773 of this title:

* * *

(55) Cannabis and cannabis products, as defined under 7 V.S.A. § 831, sold by any dispensary as authorized under 7 V.S.A. chapter 37 or any retailer licensed with a medical-use endorsement as authorized under 7 V.S.A. chapter 33, provided that the cannabis or cannabis product is sold only to registered qualifying patients directly or through their registered caregivers. A retailer that sells cannabis or cannabis products that are exempt from tax pursuant to this subdivision shall retain information pertaining to each exempt transaction as required by the Commissioner of Taxes.

* * *

Sec. 15. TRANSFER AND APPROPRIATION

Notwithstanding 7 V.S.A. § 845(c), in fiscal year 2025:

- (1) \$500,000.00 is transferred from the Cannabis Regulation Fund established pursuant to 7 V.S.A. § 845 to the Cannabis Business Development Fund established pursuant to 7 V.S.A. § 987; and
- (2) \$500,000.00 is appropriated from the Cannabis Business 19 Development Fund to the Agency of Commerce and Community Development to fund technical assistance and provide loans and grants pursuant to 7 V.S.A. § 987.
- Sec. 16. 7 V.S.A. § 869 is amended to read:

§ 869. CULTIVATION OF CANNABIS; ENVIRONMENTAL AND LAND USE STANDARDS; REGULATION OF CULTIVATION

(a) A cannabis establishment shall not be regulated as "farming" under the Required Agricultural Practices, 6 V.S.A. chapter 215, or other State law, and cannabis produced from cultivation shall not be considered an agricultural product, farm crop, or agricultural crop for the purposes of 32 V.S.A. chapter 124, 32 V.S.A. § 9741, or other relevant State law.

* * *

- (f) Notwithstanding subsection (a) of this section, a cultivator licensed under this chapter who initiates cultivation of cannabis outdoors on a parcel of land shall:
- (1) be regulated in the same manner as "farming" and not as "development" on the tract of land where cultivation occurs for the purposes of permitting under 10 V.S.A. chapter 151;
- (2)(A) not be regulated by a municipal bylaw adopted under 24 V.S.A. chapter 117 in the same manner that Required Agricultural Practices are not regulated by a municipal bylaw under 24 V.S.A. § 4413(d)(1)(A), except that there shall be the following minimum setback distance between the cannabis plant canopy and a property boundary or edge of a highway:
- (i) if the cultivation occurs in a cannabis cultivation district adopted by a municipality pursuant to 24 V.S.A. § 4414a, the setback shall be not larger than 25 feet as established by the municipality; and
- (ii) if the cultivation occurs outside of cannabis cultivation district adopted by a municipality pursuant to 24 V.S.A. § 4414a or no cannabis cultivation district has been adopted by the municipality, the setback shall be not larger than 100 feet as established by the municipality;
- (B) if a municipality does not have zoning, the setback shall be 10 feet;
- (3) be eligible to enroll in the Use Value Appraisal Program under 32 V.S.A. chapter 124 for the cultivation of cannabis;
- (4) be exempt under 32 V.S.A. § 9741(3), (25), and (50) from the tax on retail sales imposed under 32 V.S.A. § 9771; and
- (5) be entitled to the rebuttable presumption that cultivation does not constitute a nuisance under 12 V.S.A. chapter 195 in the same manner as "agricultural activities" are entitled to the rebuttable presumption, provided that, notwithstanding 12 V.S.A. § 5753(a)(1)(A), the cultivation is complying with subsections (b) and (d) of this section.
- Sec. 17. 24 V.S.A. § 4414a is added to read:

§ 4414a. CANNABIS CULTIVATION DISTRICT

A municipality, after consultation with the municipal cannabis control commission, if one exists, may adopt a bylaw identifying cannabis cultivation districts where the outdoor cultivation of cannabis is preferred within the municipality. Cultivation of cannabis within a cannabis cultivation district shall be presumed not to result in an undue effect on the character of the area

affected. The adoption of a cannabis cultivation district shall not have the effect of prohibiting cultivation of outdoor cannabis in the municipality.

Sec. 18. EFFECTIVE DATES

Sec. 6, 7 V.S.A. § 910, shall take effect on July 1, 2025, and the remainder of the act shall take effect on passage.

(Committee Vote: 9-3-0)

H. 645

An act relating to the expansion of approaches to restorative justice

- **Rep. Dolan of Essex Junction**, for the Committee on Judiciary, recommends the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:
- Sec. 1. 3 V.S.A. chapter 7 is amended to read:

CHAPTER 7. ATTORNEY GENERAL

Subchapter 1. Election; Authority; Duties

§ 151. ELECTION AND TERM

* * *

Subchapter 2. Restorative Justice Approaches

§ 162a. DEFINITIONS

As used in this subchapter:

- (1) "Child" has the same meaning as in 33 V.S.A. § 5102(2).
- (2) "Pre-charge diversion" means a referral of an individual to a community-based restorative justice provider by a law enforcement officer or prosecutor after the referring officer or prosecutor has determined that probable cause exists that the individual has committed a criminal offense and before the individual is criminally charged with the offense or before a petition is filed in family court for the offense.
 - (3) "Youth" has the same meaning as in 33 V.S.A. § 5102(29).

§ 163. JUVENILE COURT DIVERSION PROJECT PROGRAM

- (a) Purpose.
- (1) The Attorney General shall develop and administer a juvenile court diversion project program, for both pre-charge and post-charge referrals to youth-appropriate community-based restorative justice providers, for the purpose of assisting juveniles children or youth charged with delinquent acts.

In consultation with the diversion programs, the Attorney General shall adopt a policies and procedures manual in compliance with this section.

- (2) The program shall be designed to provide a restorative option for children or youth alleged to have caused harm in violation of a criminal statute or who have been charged with violating a criminal statute and subject to a delinquency or youthful offender petition filed with the Family Division of the Superior Court, as well as for victims or those acting on a victim's behalf who have been allegedly harmed by the responsible party. The juvenile diversion program can accept referrals to the program as follows:
- (A) Pre-charge by law enforcement or prosecutors pursuant to a policy adopted in accordance with subdivisions (c)(1)–(2) of this section.
- (B) Post-charge by prosecutors for children or youth charged with a first or a second misdemeanor or a first nonviolent felony, or other offenses as the prosecutor deems appropriate, pursuant to subdivision (c)(3) of this section.
- (b) The diversion program administered by the Attorney General shall support the operation of diversion programs in local communities through grants of financial assistance to, or by contracting for services with, municipalities, private groups, or other local organizations. The Attorney General may require local financial contributions as a condition of receipt of project funding. Administration; report.
- (1) The Attorney General shall support the operation of diversion programs in each of the State's counties through grants of financial assistance to, or contracts for services with, a single municipality or organization to provide community-based restorative justice programs and services in each county. Upon approval of the Attorney General, the single municipality or organization receiving a grant pursuant to this section may issue subgrants to diversion providers or execute subcontracts for diversion services.
- (2) The Attorney General may require local financial contributions as a condition of receipt of program funding.
- (3) In consultation with community-based restorative justice providers, the Office of the Attorney General shall develop program outcomes following the designated State of Vermont performance accountability framework and, in consultation with the Department of State's Attorneys and Sheriffs, the Office of the Defender General, the Center for Crime Victim Services, the Judiciary, and the Division of Racial Justice Statistics of the Office of Racial Equity, report annually on or before December 1 to the General Assembly on services provided and outcome indicators. As components of the report required by

this subsection, the Attorney General shall include data on the number of precharge and post-charge diversion program referrals in each county; race, gender, age, and other demographic variables, whenever possible; offenses charged and crime types; successful completion rates; and possible causes of any geographical disparities.

- (4) The Attorney General is authorized to accept grants and gifts for the purposes of this section, such acceptance being pursuant to 32 V.S.A. § 5.
- (5) In consultation with community-based restorative justice providers, the Center for Crime Victims Services, the Department of State's Attorneys and Sheriffs' Victim Advocates, the Division for Racial Justice Statistics of the Office of Racial Equity, and the State Archivist, the Attorney General shall adopt a policies and procedures manual for community-based restorative justice providers to promote a uniform system across the State in compliance with this section. The manual shall include policies and procedures related to:
- (A) informing victims of their rights and role in pre-charge and postcharge diversion, including that such information is available in writing upon request;
- (B) the timely notification to victims of a referral to pre- and postcharge diversion;
 - (C) an invitation to victims to engage in the restorative process;
- (D) how to share information with a victim concerning a restorative agreement's conditions related to the victim and any progress made on such conditions;
- (E) best practices for collecting data from all parties that engage with the pre-charge and post-charge diversion programs; and
- (F) confidentiality expectations for all parties who engage in the restorative process.
- (c) All diversion projects receiving financial assistance from the Attorney General shall adhere to the following provisions: <u>Juvenile diversion program</u> policy and referral requirements.
- (1) The diversion project shall only accept persons against whom charges have been filed and the court has found probable cause but are not yet adjudicated.
- (2) Alleged offenders shall be informed of their right to the advice and assistance of private counsel or the public defender at all stages of the diversion process, including the initial decision to participate, and the decision

to accept the diversion contract, so that the candidate may give his or her informed consent.

- (3) The participant shall be informed that his or her selection of the diversion contract is voluntary.
- (4) Each State's Attorney, in cooperation with the Attorney General and the diversion program, shall develop clear criteria for deciding what types of offenses and offenders will be eligible for diversion; however, the State's Attorney shall retain final discretion over the referral of each case for diversion. The provisions of 33 V.S.A. § 5225(e) and § 5280(e) shall apply.
- (5) All information gathered in the course of the diversion process shall be held strictly confidential and shall not be released without the participant's prior consent (except that research and reports that do not require or establish the identity of individual participants are allowed).
- (6) Information related to the present offense that is divulged during the diversion program shall not be used in the prosecutor's case. However, the fact of participation and success, or reasons for failure may become part of the prosecutor's records.
- (7) The diversion project shall maintain sufficient records so that the reasons for success or failure of the program in particular cases and overall can be investigated by program staff.
- (8) Diversion projects shall be set up to respect the rights of participants.
- (9) Each participant shall pay a fee to the local juvenile court diversion project. The amount of the fee shall be determined by project officers based upon the financial capabilities of the participant. The fee shall not exceed \$150.00. The fee shall be a debt due from the participant, and payment of such shall be required for successful completion of the Program. Notwithstanding 32 V.S.A. § 502(a), fees collected under this subdivision shall be retained and used solely for the purpose of the Court Diversion Program.

Juvenile pre-charge diversion policy required. In order for a county's community-based restorative justice provider to be eligible to receive pre-charge diversion referrals pursuant to this section, the county's State's Attorney's office shall adopt a juvenile pre-charge diversion referral policy. To encourage fair and consistent juvenile pre-charge diversion referral policies and methods statewide, the Department of State's Attorneys and Sheriffs and the Community Justice Unit shall publicly post the policies adopted by each State's Attorney's office.

- (2) Juvenile pre-charge diversion policy contents. A county's State's Attorney's juvenile pre-charge diversion program policy shall include the following:
- (A) A list of offenses that presumptively qualify for juvenile precharge diversion.
- (B) Any additional criteria to determine whether a child or youth is eligible to participate in juvenile pre-charge diversion.
- (C) The appropriate documentation to accompany a referral to juvenile pre-charge diversion, including the name and contact information of the child or youth and the child or youth's parent or legal guardian; the name and contact information of the victim or victims; and a factual statement or affidavit of probable cause of the alleged incident.
- (D) A procedure for returning a case to the law enforcement agency or the prosecutor, including when:
- (i) the prosecutor withdraws any juvenile pre-charge referral from the juvenile pre-charge diversion program;
- (ii) the community-based restorative justice provider determines that the matter is not appropriate for juvenile pre-charge programming; and
- (iii) when a child or youth does not successfully complete juvenile pre-charge diversion programming.
- (E) A statement reiterating that the State's Attorney retains final discretion over the cases that are eligible for diversion and may deviate from the adopted policy in accordance with such discretion.
- (3) Juvenile post-charge diversion requirements. Each State's Attorney, in cooperation with the Office of the Attorney General and the juvenile post-charge diversion program, shall develop clear criteria for deciding what types of offenses and offenders will be eligible for diversion; however, the State's Attorney shall retain final discretion over the referral of each case for diversion. All juvenile post-charge diversion programs receiving financial assistance from the Attorney General shall adhere to the following:
- (A) The juvenile post-charge diversion program for children or youth shall only accept individuals against whom a petition has been filed and the court has found probable cause, but are not adjudicated.
- (B) A prosecutor may refer a child or youth to diversion either before or after a preliminary hearing and shall notify in writing to the diversion program and the court of the prosecutor's referral to diversion.

- (C) If a child or youth is charged with a qualifying crime as defined in 13 V.S.A. § 7601(4)(A) and the crime is a misdemeanor, the prosecutor shall provide the child or youth with the opportunity to participate in the court diversion program unless the prosecutor states on the record at the preliminary hearing or a subsequent hearing why a referral to the post-charge program would not serve the ends of justice. Factors considered in the ends-of-justice determination include the child's or youth's delinquency record, the views of the alleged victim or victims, and the need for probationary supervision.
- (D) Notwithstanding this subsection (c), the diversion program may accept cases pursuant to 33 V.S.A. §§ 5225(c) and 5280(e).
- (d) The Attorney General is authorized to accept grants and gifts for the purposes of this section, such acceptance being pursuant to 32 V.S.A. § 5. Confidentiality.
- (1) The matter shall become confidential when notice of a pre-charge referral is provided to the juvenile diversion program, or when notice of a post-charge referral is provided to the court.
- (2) All information related to any offense gathered in the course of the juvenile diversion process shall be held strictly confidential and shall not be released without the participant's prior consent.
- (3) Information related to any offense that a person divulges in preparation for, during, or as a follow-up to the provision of the juvenile diversion programming shall not be used against the person in any criminal, civil, family, juvenile, or administrative investigation, prosecution, or case for any purpose, including impeachment or cross-examination. However, the fact of participation and success, or reasons for failure, may become part of the prosecutor's records. This subsection shall not be construed to prohibit the limited disclosure or use of information to specific persons in the following circumstances:
- (A) Where there is a threat or statement of a plan that a person may reasonably believe is likely to result in death or bodily injury to themselves or others or damage to the property of another person.
- (B) When disclosure is necessary to report bodily harm any party causes another during restorative justice programming.
- (C) Where there is a reasonable suspicion of abuse or neglect of a child or vulnerable adult and a report is made pursuant to the provisions of 33 V.S.A. § 4914 or 33 V.S.A. § 6903 or to comply with any law.
- (D) Where a court or administrative tribunal determines that the materials were submitted by a participant in the program for the purpose of

avoiding discovery of the material in a court or administrative proceeding. If a participant wishes to avail themselves of this provision, the participant may disclose this information in camera to a judicial officer for the purposes of seeking such a ruling.

- (4)(A) Notwithstanding subdivision (2) of this subsection (d), if law enforcement or the prosecutor refers a case to diversion, upon the victim's request, the juvenile diversion program shall provide information relating to the conditions of the diversion contract regarding the victim, progress made on such conditions, and information that assists with obtaining the victim's compensation.
- (B) Victim information that is not part of the public record shall not be released without the victim's prior consent.
- (C) Nothing in this section shall be construed to prohibit a victim's exercise of rights as otherwise provided by law.

(e) Rights and responsibilities.

- (1) Within 30 days after the two-year anniversary of a successful completion of juvenile diversion, the court shall provide notice to all parties of record of the court's intention to order the expungement of all court files and records, law enforcement records other than entries in the juvenile court diversion program's centralized filing system, fingerprints, and photographs applicable to the proceeding. However, the court shall not order expungement if the participant does not satisfy each of subdivisions (A) (D) of this subdivision. The court shall give the State's Attorney an opportunity for a hearing to contest the expungement of the records. The court shall expunge the records if it finds:
- (A) two years have elapsed since the successful completion of juvenile diversion by the participant;
- (B) the participant has not been convicted of a subsequent felony or misdemeanor during the two-year period, and no proceedings are pending seeking such conviction;
- (C) rehabilitation of the participant has been attained to the satisfaction of the court; and
- (D) the participant does not owe restitution related to the case. <u>Juvenile</u> court diversion programs shall be set up to respect the rights of participants.
- (2) The court may expunge any records that were sealed pursuant to this subsection 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 subdivision, the court shall provide written notice of its intent to expunge the record to the State's Attorney's office that prosecuted the case.

- (A) Diversion candidates shall be informed of their right to the advice, assistance, and access to private counsel or the public defender at all stages of the diversion process, including the initial decision to participate and the decision to accept the juvenile diversion contract, so that the candidate may give informed consent.
- (B) For the pre-charge diversion program, notwithstanding the financial need determination pursuant to 13 V.S.A. § 5236, the diversion program shall inform the candidate that a public defender is available for consultation at public expense upon the request of the candidate.
- (3)(A) 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.
- (B) The special index and related documents specified in subdivision (A) of this subdivision (3) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.
- (C) Inspection of the expungement order and the certificate may be permitted only upon petition by the person who is the subject of the case. 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.
- (D) The Court Administrator shall establish policies for implementing this subsection (e). Any victims shall be notified of the victim's rights and role in the pre-charge diversion process, including notification of a candidate's referral to the pre-charge diversion program by the pre-charge diversion program.
- (f) Except as otherwise provided in this section, upon the entry of an order expunging files and records under this section, the proceedings in the matter shall be considered never to have occurred, all index references thereto shall be deleted, and the participant, the court, and law enforcement officers and departments shall reply to any request for information that no record exists with respect to such participant inquiry in any matter. Copies of the order shall be sent to each agency or official named therein. Records; deletion and expungement.

(1) Pre-charge diversion records deletion.

- (A) Not later than 10 days after the successful completion of the precharge diversion program, the juvenile diversion program shall notify the victim, law enforcement agency, and the State's Attorney's office of the participant's successful completion. Payment of restitution is required for successful completion.
- (B) Two years after the diversion program notifies the State's Attorney's office of the participant's successful completion, the Attorney General shall provide a certified notice that all records held by the diversion program shall be deleted.
- (C) Two years after the diversion program notifies the law enforcement agency and the State's Attorney's office of the participant's successful completion, the Attorney General shall provide a certified notice that all public records held by the law enforcement agency and the State's Attorney's office shall be deleted. Public records do not include the Valcour database or other similar nonpublic law enforcement databases.

(2) Pre-charge diversion case index.

- (A) The Community Justice Unit shall keep a special index of precharge diversion cases that have been deleted pursuant to this section together with the notice of deletion provided by the Attorney General. The index shall list only the name of the diversion participant, the individual's date of birth, a case number, date of case closure, location of programming, and the offense that was the subject of the deletion.
- (B) The special index and related documents specified in subdivision (A) of this subdivision (2) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.
- (C) Inspection of the certified notice may be permitted only upon request by the person who is the subject of the case. The Attorney General may permit special access to the index and the documents for research purposes pursuant to subdivision (g)(2) of this section.
- (D) The Community Justice Unit shall establish policies for implementing subsections (1)–(4) of this subsection (f).
- (3) Effect of Deletion. Except as otherwise provided in this section, upon the certified notice to delete files and records under this section, the matter shall be considered never to have occurred; all index references thereto shall be deleted; and the participant, the Community Justice Unit, law enforcement officers and departments, prosecutors, the referring entity, and the

diversion program shall reply to any request for information that no record exists with respect to such participant inquiry in any matter. Copies of the certified notice shall be sent to each agency, entity, or official named therein.

- (4) Deletion Applicability. The process of automatically deleting records as provided in this section shall only apply to those persons who completed pre-charge diversion on or after July 1, 2025. Any person who completed pre-charge diversion prior to July 1, 2025 must apply to the court to have the person's records deleted. Deletion shall occur if the requirements of subdivisions (1)–(3) of this subsection (f) are met.
- (5) Post-charge diversion records expungement. Within 30 days after the two-year anniversary of a successful completion of juvenile post-charge diversion, the court shall provide notice to all parties of record of the court's intention to order the expungement of all court files and records, law enforcement records, fingerprints, and photographs other than entries in the court diversion program's centralized filing system applicable to the proceeding. However, the court shall not order expungement if the participant does not satisfy each of subdivisions (A)–(C) of this subdivision. The court shall give the State's Attorney an opportunity for a hearing to contest the expungement of the records. The court shall expunge the records if it finds:
- (A) two years have elapsed since the successful completion of the juvenile post-charge diversion program by the participant;
- (B) the participant has not been convicted of a subsequent felony or misdemeanor during the two-year period, and no proceedings are pending seeking such conviction; and
 - (C) the participant does not owe restitution related to the case.
- (6) Expungement of sealed records. The court may expunge any records that were sealed pursuant to this subsection 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 subdivision, the court shall provide written notice of its intent to expunge the record to the State's Attorney's office that prosecuted the case.

(7) Post-charge diversion case index.

(A) The court and the Office of the Attorney General shall keep a special index of post-charge diversion 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, the person's date of birth, the docket number, date of case closure, the court of jurisdiction, and the offense that was the subject of the expungement.

- (B) The special index and related documents specified in subdivision (A) of this subdivision (7) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.
- (C) Inspection of the expungement order and the certificate may be permitted only upon petition by the person who is the subject of the case. 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.
- (D) The Court Administrator shall establish policies for implementing subdivisions (5)–(9) of this subsection (f).
- (8) Effect of Expungement. Except as otherwise provided in this section, upon the entry of an order expunging files and records under this section, the proceedings in the matter shall be considered never to have occurred; all index references thereto shall be deleted; and the participant, the court, law enforcement officers and departments, prosecutors, the referring entity, and the diversion program shall reply to any request for information that no record exists with respect to such participant inquiry in any matter. Copies of the order shall be sent to each agency, entity, or official named therein.
- (9) Expungement Applicability. The process of automatically expunging records as provided in this section shall only apply to those persons who completed diversion on or after July 1, 2002. Any person who completed diversion prior to July 1, 2002 must apply to the court to have the person's records expunged. Expungement shall occur if the requirements of subdivisions (5)–(8) of this subsection (f) are met.
- (g) The process of automatically expunging records as provided in this section shall only apply to those persons who completed diversion on or after July 1, 2002. Any person who completed diversion prior to July 1, 2002 must apply to the court to have his or her records expunged. Expungement shall occur if the requirements of subsection (e) of this section are met.
- (h) Subject to the approval of the Attorney General, the Vermont Association of Court Diversion Programs may develop and administer programs to assist persons under this section charged with delinquent, eriminal, and civil offenses
- (i) Notwithstanding subdivision (c)(1) of this section, the diversion program may accept cases from the Youth Substance Awareness Safety Program pursuant to 7 V.S.A. § 656 or 18 V.S.A. § 4230b. The confidentiality

provisions of this section shall become effective when a notice of violation is issued under 7 V.S.A. § 656(b) or 18 V.S.A. § 4230b(b) and shall remain in effect unless the person fails to register with or complete the Youth Substance Awareness Safety Program.

- (j) Notwithstanding subdivision (c)(1) of this section, the diversion program may accept cases pursuant to 33 V.S.A. §§ 5225 5280. Public records act exemption.
- (1) Except as otherwise provided by this section, any records or information produced or acquired pursuant to this section shall be exempt from public inspection or copying under Vermont's Public Records Act.
- (2) Notwithstanding subdivision (1) of this subsection, a law enforcement agency, State's Attorney's office, court, or community-based restorative justice provider may disclose information to colleges, universities, public agencies of the State, and nonprofit research organizations that a community-based restorative justice provider has agreements with for use in connection with research projects of a public service nature, but no person associated with those institutions or agencies shall disclose that information in any manner that would reveal the identity of an individual who provided the information to the community-based restorative justice provider.

§ 164. ADULT COURT DIVERSION PROGRAM

(a) Purpose.

- (1) The Attorney General shall develop and administer an adult court diversion program, for both pre-charge and post-charge referrals, in all counties. In consultation with diversion programs, the Attorney General shall adopt a policies and procedures manual in compliance with this section.
- (2) The program shall be designed to provide a restorative option for persons alleged to have caused harm in violation of a criminal statute or who have been charged with violating a criminal statute as well as for victims or those acting on a victim's behalf who have been allegedly harmed by the responsible party. The diversion program can accept referrals to the program as follows:
- (A) Pre-charge by law enforcement or prosecutors pursuant to a policy adopted in accordance with subdivisions (c)(1)–(2) of this section.
- (B) Post-charge by prosecutors for persons charged with a first or a second misdemeanor or a first nonviolent felony, or other offenses as the prosecutor deems appropriate, pursuant to subdivision (c)(3) of this section.

- (C) Post-charge by prosecutors of persons who have been charged with an offense and who have substance abuse or mental health treatment needs regardless of the person's prior criminal history record, except a person charged with a felony offense that is a crime listed in 13 V.S.A. § 5301(7) shall not be eligible under this section. Persons who have attained 18 years of age who are subject to a petition in the Family Division pursuant to 33 V.S.A. chapter 52 or 52A shall also be eligible under this section. Programming for these persons is intended to support access to appropriate treatment or other resources with the aim of improving the person's health and reducing future adverse involvement in the justice system.
- (b) The program shall be designed for two purposes: <u>Administration</u>; report.
- (1) To assist adults who have been charged with a first or a second misdemeanor or a first nonviolent felony. The Attorney General shall support the operation of diversion programs in each of the State's counties through grants of financial assistance to, or contracts for services with, a single municipality or organization to provide community-based restorative justice programs and services in each county. Upon approval of the Attorney General, the single municipality or organization receiving a grant pursuant to this section may issue subgrants to diversion providers or execute subcontracts for diversion services.
- (2) To assist persons who have been charged with an offense and who have substance abuse or mental health treatment needs regardless of the person's prior criminal history record, except a person charged with a felony offense that is a crime listed in 13 V.S.A. § 5301(7) shall not be eligible under this section. Persons who have attained 18 years of age who are subject to a petition in the Family Division pursuant to 33 V.S.A. chapters 52 or 52A shall also be eligible under this section. Programming for these persons is intended to support access to appropriate treatment or other resources with the aim of improving the person's health and reducing future adverse involvement in the justice system. The Attorney General may require local financial contributions as a condition of receipt of program funding.
- (3) In consultation with community-based restorative justice providers, the Office of the Attorney General shall develop program outcomes following the designated State of Vermont performance accountability framework and, in consultation with the Department of State's Attorneys and Sheriffs, the Office of the Defender General, the Center for Crime Victim Services, the Judiciary, and the Division of Racial Justice Statistics of the Office of Racial Equity, report annually on or before December 1 to the General Assembly on services provided and outcome indicators. As components of the report required by

this subsection, the Attorney General shall include data on the number of precharge and post-charge diversion program referrals in each county; race, gender, age, and other demographic variables, whenever possible; offenses charged and crime types; successful completion rates; and possible causes of any geographical disparities.

- (4) The Attorney General is authorized to accept grants and gifts for the purposes of this section, such acceptance being pursuant to 32 V.S.A. § 5.
- (5) In consultation with community-based restorative justice providers, the Center for Crime Victims Services, the Department of State's Attorneys and Sheriffs' Victim Advocates, the Division for Racial Justice Statistics of the Office of Racial Equity, and the State Archivist, the Attorney General shall adopt a policies and procedures manual for community-based restorative justice providers to promote a uniform system across the State in compliance with this section. The manual shall include the following policies and procedures related to:
- (A) informing victims of their rights and role in pre-charge and postcharge diversion, including that such information is available in writing upon request;
- (B) the timely notification victims of a referral to pre-charge and post-charge diversion;
 - (C) an invitation to victims to engage in the restorative process;
- (D) how to share information with a victim concerning a restorative agreement's conditions related to the victim and any progress made on such conditions;
- (E) best practices for collecting data from all parties that engage with the pre-charge and post-charge diversion programs; and
- (F) confidentiality expectations for all parties who engage in the restorative process.
- (c) The program shall support the operation of diversion programs in local communities through grants of financial assistance to, or contracts for services with, municipalities, private groups, or other local organizations. The Attorney General may require local financial contributions as a condition of receipt of program funding. Adult diversion program policy and referral requirements.
- (1) Adult pre-charge diversion policy required. In order for a county's community-based restorative justice provider to be eligible to receive referrals pursuant to this section, the State's Attorney's office shall adopt an adult pre-

- charge diversion referral policy. To encourage fair and consistent pre-charge and post-charge diversion referral policies and methods statewide, the Department of State's Attorneys and Sheriffs and the Community Justice Unit shall publicly post the policies adopted by each State's Attorney's office.
- (2) Adult pre-charge diversion policy contents. A county's State's Attorney's pre-charge diversion program policy shall include the following:
- (A) a list of offenses that presumptively qualify for pre-charge diversion;
- (B) additional criteria to determine whether a responsible party is eligible to participate in pre-charge diversion;
- (C) appropriate documentation to accompany a referral to pre-charge diversion, including the name and contact information of the responsible party, the name and contact information of the victim or victims, and a factual statement or affidavit of probable cause of the alleged offense;
- (D) a procedure for returning a case to the law enforcement agency or the prosecutor, including when:
- (i) the prosecutor withdraws a pre-charge referral from the diversion program;
- (ii) the community-based restorative justice provider determines that the matter is not appropriate for pre-charge programming; and
- (iii) a person does not successfully complete pre-charge diversion programming; and
- (E) a statement reiterating that the State's Attorney retains final discretion over the cases that are eligible for diversion and may deviate from the adopted policy in accordance with such discretion.
- (3) Adult post-charge diversion requirements. Each State's Attorney, in cooperation with the Office of the Attorney General and the adult post-charge diversion program, shall develop clear criteria for deciding what types of offenses and offenders will be eligible for diversion; however, the State's Attorney shall retain final discretion over the referral of each case for diversion. All adult post-charge diversion programs receiving financial assistance from the Attorney General shall adhere to the following:
- (A) The post-charge diversion program for adults shall only accept person against whom charges have been filed and the court has found probable cause, but are not adjudicated.

- (B) A prosecutor may refer a person to diversion either before or after arraignment and shall notify in writing the diversion program and the court of the prosecutor's of the referral to diversion.
- (C) If a person is charged with a qualifying crime as defined in 13 V.S.A. § 7601(4)(A) and the crime is a misdemeanor, the prosecutor shall provide the person with the opportunity to participate in the court diversion program unless the prosecutor states on the record at arraignment or a subsequent hearing why a referral to the post-charge program would not serve the ends of justice. Factors considered in the ends-of-justice determination include the person's criminal record, the views of any victims, or the need for probationary supervision.
- (D) Notwithstanding this subsection (c), the diversion program may accept cases pursuant to 33 V.S.A. §§ 5225 and 5280.
- (d) The Office of the Attorney General shall develop program outcomes following the designated State of Vermont performance accountability framework and, in consultation with the Department of State's Attorneys and Sheriffs, the Office of the Defender General, the Center for Crime Victim Services, and the Judiciary, report annually on or before December 1 to the General Assembly on services provided and outcome indicators. As a component of the report required by this subsection, the Attorney General shall include data on diversion program referrals in each county and possible causes of any geographical disparities. Confidentiality.
- (1) The matter shall become confidential when notice of a pre-charge referral is provided to the diversion program, or when notice of a post-charge referral is provided to the court. However, persons who are subject to conditions of release imposed pursuant to 13 V.S.A. § 7554 and who are referred to diversion pursuant to subdivision (a)(2)(C) of this section, the matter shall become confidential upon the successful completion of diversion.
- (2) All information gathered in the course of the adult diversion process shall be held strictly confidential and shall not be released without the participant's prior consent.
- (3) Information related to any offense that a person divulges in preparation for, during, or as a follow-up to the provision of the adult diversion programming shall not be used against the person in any criminal, civil, family, juvenile, or administrative investigation, prosecution, or case for any purpose, including impeachment or cross-examination. However, the fact of participation and success, or reasons for failure, may become part of the prosecutor's records. This subsection shall not be construed to prohibit the

limited disclosure or use of information to specific persons in the following circumstances:

- (A) Where there is a threat or statement of a plan that a person may reasonably believe is likely to result in death or bodily injury to themselves or others or damage to the property of another person.
- (B) When disclosure is necessary to report bodily harm any party causes another during restorative justice programming.
- (C) Where there is a reasonable suspicion of abuse or neglect of a child or vulnerable adult and a report is made pursuant to the provisions of 33 V.S.A. § 4914 or 33 V.S.A. § 6903 or to comply with any law.
- (D) Where a court or administrative tribunal determines that the materials were submitted by a participant in the program for the purpose of avoiding discovery of the material in a court or administrative proceeding. If a participant wishes to avail themselves of this provision, the participant may disclose this information in camera to a judicial officer for the purposes of seeking such a ruling.
- (4)(A) Notwithstanding subdivision (2) of this subsection (d), if law enforcement or the prosecutor refers a case to diversion, upon the victim's request, the adult diversion program shall provide information relating to the conditions of the diversion contract regarding the victim, progress made on such conditions, and information that assists with obtaining the victim's compensation.
- (B) Victim information that is not part of the public record shall not be released without the victim's prior consent.
- (C) Nothing in this section shall be construed to prohibit a victim's exercise of rights as otherwise provided by law.
- (e) All adult court diversion programs receiving financial assistance from the Attorney General shall adhere to the following provisions: Rights and responsibilities.
- (1) The diversion program shall accept only persons against whom charges have been filed and the court has found probable cause, but are not yet adjudicated. The prosecuting attorney may refer a person to diversion either before or after arraignment and shall notify in writing the diversion program and the court of his or her intention to refer the person to diversion. The matter shall become confidential when notice is provided to the court, except that for persons who are subject to conditions of release imposed pursuant to 13 V.S.A. § 7554 and who are referred to diversion pursuant to subdivision (b)(2) of this section, the matter shall become confidential upon the successful

completion of diversion. If a person is charged with a qualifying crime as defined in 13 V.S.A. § 7601(4)(A) and the crime is a misdemeanor, the prosecutor shall provide the person with the opportunity to participate in the court diversion program unless the prosecutor states on the record at arraignment or a subsequent hearing why a referral to the program would not serve the ends of justice. If the prosecuting attorney prosecutor refers a case to diversion, the prosecuting attorney prosecutor may release information to the victim upon a showing of legitimate need and subject to an appropriate protective agreement defining the purpose for which the information is being released and in all other respects maintaining the confidentiality of the information; otherwise, files held by the court, the prosecuting attorney prosecutor, and the law enforcement agency related to the charges shall be confidential and shall remain confidential unless:

- (A) the diversion program declines to accept the case;
- (B) the person declines to participate in diversion;
- (C) the diversion program accepts the case, but the person does not successfully complete diversion; or
- (D) the prosecuting attorney prosecutor recalls the referral to diversion. Adult court diversion programs shall be set up to respect the rights of participants.
- (2) Alleged offenders shall be informed of their right to the advice and assistance of private counsel or the public defender at all stages of the diversion process, including the initial decision to participate, and the decision to accept the adult diversion contract, so that the candidate may give informed consent.
- (A) Diversion candidates shall be informed of their right to the advice, assistance, and access to private counsel or the public defender at all stages of the diversion process, including the initial decision to participate and the decision to accept the diversion contract, so that the candidate may give informed consent.
- (B) For the pre-charge diversion program, notwithstanding the financial need determination pursuant to 13 V.S.A. § 5236, the diversion program shall inform the candidate that a public defender is available for consultation at public expense upon the request of the diversion candidate.
- (3) The participant shall be informed that his or her selection of the adult diversion contract is voluntary. The candidate shall be informed that participation in the diversion program is voluntary.

- (4) Each State's Attorney, in cooperation with the Office of the Attorney General and the adult court diversion program, shall develop clear criteria for deciding what types of offenses and offenders will be eligible for diversion; however, the State's Attorney shall retain final discretion over the referral of each case for diversion.
- (5) All information gathered in the course of the adult diversion process shall be held strictly confidential and shall not be released without the participant's prior consent (except that research and reports that do not establish the identity of individual participants are allowed).
- (A) The pre-charge and post-charge diversion programs may charge fees to its participants, which shall be paid to the local adult court diversion program. If a fee is charged, it shall be determined by program officers or employees based upon the financial capabilities of the participant. The fee shall not exceed \$300.00. Any fee charged shall be a debt due from the participant.
- (B) Notwithstanding 32 V.S.A. § 502(a), fees collected pursuant to this subdivision (4) shall be retained and used solely for the purpose of the adult court diversion program.
- (6)(5) Information related to the present offense that is divulged during the adult diversion program shall not be used against the person in the person's eriminal or juvenile case for any purpose, including impeachment or cross-examination. However, the fact of participation and success, or reasons for failure, may become part of the prosecutor's records. Any victims shall be notified of the victim's rights and role in the pre-charge diversion process, including notification of a candidate's referral to the pre-charge diversion program by the pre-charge diversion program.
- (7)(A) Irrespective of whether a record was expunged, the adult court diversion program shall maintain sufficient records so that the reasons for success or failure of the program in particular cases and overall can be investigated by program staff. These records shall include a centralized statewide filing system that will include the following information about individuals who have successfully completed an adult court diversion program:
 - (i) name and date of birth;
 - (ii) offense charged and date of offense;
 - (iii) place of residence;
 - (iv) county where diversion process took place; and
 - (v) date of completion of diversion process.

- (B) These records shall not be available to anyone other than the participant and his or her attorney, State's Attorneys, the Attorney General, and directors of adult court diversion programs.
- (C) Notwithstanding subdivision (B) of this subdivision (e)(7), the Attorney General shall, upon request, provide to a participant or his or her attorney sufficient documentation to show that the participant successfully completed diversion.
- (8) Adult court diversion programs shall be set up to respect the rights of participants.
- (9) Each participant shall pay a fee to the local adult court diversion program. The amount of the fee shall be determined by program officers or employees based upon the financial capabilities of the participant. The fee shall not exceed \$300.00. The fee shall be a debt due from the participant, and payment of such shall be required for successful completion of the program. Notwithstanding 32 V.S.A. § 502(a), fees collected under this subdivision shall be retained and used solely for the purpose of the court diversion program.
- (f) The Attorney General is authorized to accept grants and gifts for the purposes of this section, such acceptance being pursuant to 32 V.S.A. § 5. Records; deletion and expungement.

(1) Pre-charge diversion records deletion.

- (A) Not later than 10 days after the successful completion of the precharge diversion program, the juvenile diversion program shall notify the victim, law enforcement agency, and the State's Attorney's office of the participant's successful completion. Payment of restitution is required for successful completion.
- (B) Two years after the diversion program notifies the State's Attorney's office of the participant's successful completion, the Attorney General shall provide a certified notice that all records held by the diversion program shall be deleted.
- (C) Two years after the diversion program notifies the law enforcement agency and the State's Attorney's office of the participant's successful completion, the Attorney General shall provide a certified notice that all public records held by the law enforcement agency and the State's Attorney's office shall be deleted. Public records do not include the Valcour database or other similar nonpublic law enforcement databases.

(2) Pre-charge diversion case index.

- (A) The Community Justice Unit shall keep a special index of precharge diversion cases that have been deleted pursuant to this section together with the notice of deletion provided by the Attorney General. The index shall list only the name of the diversion participant, the individual's date of birth, a case number, date of case closure, location of programming, and the offense that was the subject of the deletion.
- (B) The special index and related documents specified in subdivision (A) of this subdivision (2) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.
- (C) Inspection of the certified notice may be permitted only upon request by the person who is the subject of the case. The Attorney General may permit special access to the index and the documents for research purposes pursuant to subdivision (g)(2) of this section.
- (D) The Community Justice Unit shall establish policies for implementing subsections (1)–(4) of this subsection (f).
- (3) Effect of Deletion. Except as otherwise provided in this section, upon the certified notice to delete files and records under this section, the matter shall be considered never to have occurred; all index references thereto shall be deleted; and the participant, the Community Justice Unit, law enforcement officers and departments, prosecutors, the referring entity, and the diversion program shall reply to any request for information that no record exists with respect to such participant inquiry in any matter. Copies of the certified notice shall be sent to each agency, entity, or official named therein.
- (4) Deletion Applicability. The process of automatically deleting records as provided in this section shall only apply to those persons who completed pre-charge diversion on or after July 1, 2025. Any person who completed pre-charge diversion prior to July 1, 2025 must apply to the court to have the person's records deleted. Deletion shall occur if the requirements of subdivisions (1)–(3) of this subsection (f) are met.
- (5) Post-charge diversion records expungement. Within 30 days after the two-year anniversary of a successful completion of adult post-charge diversion, the court shall provide notice to all parties of record of the court's intention to order the expungement of all court files and records, law enforcement records, fingerprints, and photographs other than entries in the adult court diversion program's centralized filing system applicable to the proceeding. However, the court shall not order expungement if the participant does not satisfy each of subdivisions (A)–(C) of this subdivision. The court

shall give the State's Attorney an opportunity for a hearing to contest the expungement of the records. The court shall expunge the records if it finds:

- (A) two years have elapsed since the successful completion of the adult post-charge diversion program by the participant;
- (B) the participant has not been convicted of a subsequent felony or misdemeanor during the two-year period, and no proceedings are pending seeking such conviction; and
 - (C) the participant does not owe restitution related to the case.
- (6) Expungement of sealed records. The court may expunge any records that were sealed pursuant to this subsection 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 subdivision, the court shall provide written notice of its intent to expunge the record to the State's Attorney's office that prosecuted the case.
 - (7) Post-charge diversion case index.
- (A) The court and the Office of the Attorney General shall keep a special index of post-charge diversion 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, the person's date of birth, the docket number, date of case closure, location of programming, and the criminal offense that was the subject of the expungement.
- (B) The special index and related documents specified in subdivision (A) of this subdivision (7) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.
- (C) Inspection of the expungement order and the certificate may be permitted only upon petition by the person who is the subject of the case. 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.
- (D) The Court Administrator shall establish policies for implementing subdivisions (5)–(9) of this subsection (f).
- (8) Effect of Expungement. Except as otherwise provided in this section, upon the entry of an order expunging files and records under this section, the proceedings in the matter shall be considered never to have occurred; all index references thereto shall be deleted; and the participant, the court, law enforcement officers and departments, prosecutors, the referring

entity, and the diversion program shall reply to any request for information that no record exists with respect to such participant inquiry in any matter. Copies of the order shall be sent to each agency, entity, or official named therein.

(9) Expungement Applicability. The process of automatically expunging records as provided in this section shall only apply to those persons who completed diversion on or after July 1, 2002. Any person who completed diversion prior to July 1, 2002 must apply to the court to have the person's records expunged. Expungement shall occur if the requirements of this subsection (f) are met.

(g) Public records act exemption.

- (1) Within 30 days after the two-year anniversary of a successful completion of adult diversion, the court shall provide notice to all parties of record of the court's intention to order the expungement of all court files and records, law enforcement records other than entries in the adult court diversion program's centralized filing system, fingerprints, and photographs applicable to the proceeding. However, the court shall not order expungement if the participant does not satisfy each of subdivisions (A) (D) of this subdivision. The court shall give the State's Attorney an opportunity for a hearing to contest the expungement of the records. The court shall expunge the records if it finds:
- (A) two years have elapsed since the successful completion of the adult diversion program by the participant;
- (B) the participant has not been convicted of a subsequent felony or misdemeanor during the two-year period, and no proceedings are pending seeking such conviction;
- (C) rehabilitation of the participant has been attained to the satisfaction of the court; and
- (D) the participant does not owe restitution related to the case. Except as otherwise provided in this section, any records or information produced or acquired pursuant to this section shall be exempt from public inspection or copying under Vermont's Public Records Act and shall be kept confidential.
- (2) The court may expunge any records that were sealed pursuant to this subsection 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 subdivision, the court shall provide written notice of its intent to expunge the record to the State's Attorney's office that prosecuted the case.

Notwithstanding subdivision (1) of this subsection, a law enforcement agency, State's Attorney's office, court, or community-based restorative justice provider-may disclose information to colleges, universities, public agencies of the State, and nonprofit research organizations that a community-based restorative justice provider has agreements with for use in connection with research projects of a public service nature, but no person associated with those institutions or agencies shall disclose that information in any manner that would reveal the identity of an individual who provided the information to the community-based restorative justice provider.

- (3)(A) 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.
- (B) The special index and related documents specified in subdivision (A) of this subdivision (3) shall be confidential and shall be physically and electronically segregated in a manner that ensures confidentiality and that limits access to authorized persons.
- (C) Inspection of the expungement order and the certificate may be permitted only upon petition by the person who is the subject of the case. 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.
- (D) The Court Administrator shall establish policies for implementing this subsection (g).
- (h) Except as otherwise provided in this section, upon the entry of an order expunging files and records under this section, the proceedings in the matter shall be considered never to have occurred, all index references thereto shall be deleted, and the participant, the court, and law enforcement officers and departments shall reply to any request for information that no record exists with respect to such participant inquiry in any matter. Copies of the order shall be sent to each agency or official named therein.

(i) [Repealed.]

(j) The process of automatically expunging records as provided in this section shall only apply to those persons who completed diversion on or after July 1, 2002. Any person who completed diversion prior to July 1, 2002 must apply to the court to have his or her records expunged. Expungement shall occur if the requirements of subsection (g) of this section are met.

- (k) The Attorney General, in consultation with the Vermont Association of Court Diversion Programs, may develop and administer programs to assist persons under this section charged with delinquent, criminal, and civil offenses.
- (1) Notwithstanding subdivision (e)(1) of this section, the diversion program may accept cases from the Youth Substance Awareness Safety Program pursuant to 7 V.S.A. § 656 or 18 V.S.A. § 4230b. The confidentiality provisions of this section shall become effective when a notice of violation is issued under 7 V.S.A. § 656(b) or 18 V.S.A. § 4230b(b) and shall remain in effect unless the person fails to register with or complete the Youth Substance Awareness Safety Program.
- (m) Notwithstanding subdivision (e)(1) of this section, the diversion program may accept cases pursuant to 33 V.S.A. §§ 5225 and 5280.

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§ 165 161. PUBLIC CONTRACT ADVOCATE

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Sec. 2. 7 V.S.A. § 656 is amended to read:

§ 656. PERSON 16 YEARS OF AGE OR OLDER AND UNDER 21 YEARS OF AGE MISREPRESENTING AGE, PROCURING, POSSESSING, OR CONSUMING ALCOHOLIC BEVERAGES; CIVIL VIOLATION

* * *

- (b) Issuance of notice of violation. A law enforcement officer shall issue a person who violates this section a notice of violation, in a form approved by the Court Administrator. The notice of violation shall require the person to provide his or her the person's name and address and shall explain procedures under this section, including that:
- (1) the person shall contact the Diversion Program in the county where the offense occurred within 15 days;
- (2) failure to contact the Diversion Program within 15 days will result in the case being referred to the Judicial Bureau, where the person, if found liable for the violation, will be subject to a civil penalty and a suspension of the person's operator's license and may face substantially increased insurance rates;

- (3) no money should be submitted to pay any penalty until after adjudication; and
- (4) the person shall notify the Diversion Program if the person's address changes.

* * *

- (d) Registration in Youth Substance Abuse Safety Program. Within 15 days after receiving a notice of violation, the person shall contact the Diversion Program in the county where the offense occurred and register for the Youth Substance Abuse Safety Program. If the person fails to do so, the Diversion Program shall file the summons and complaint with the Judicial Bureau for adjudication under 4 V.S.A. chapter 29. The Diversion Program shall provide a copy of the summons and complaint to the law enforcement officer who issued the notice of violation and shall provide two copies to the person charged with the violation.
- (e) Notice to report to Diversion. Upon receipt from a law enforcement officer of a summons and complaint completed under this section, the Diversion Program shall send the person a notice to report to the Diversion Program. The notice to report shall provide that:
- (1) The person is required to complete all conditions related to the offense imposed by the Diversion Program, including substance abuse screening and, if deemed appropriate following the screening, substance abuse assessment or substance abuse counseling, or both.
- (2) If the person does not satisfactorily complete the substance abuse screening, any required substance abuse assessment or substance abuse counseling, or any other condition related to the offense imposed by the Diversion Program, the case will be referred to the Judicial Bureau, where the person, if found liable for the violation, shall be assessed a civil penalty, the person's driver's license will be suspended, and the person's automobile insurance rates may increase substantially.
- (3) If the person satisfactorily completes the substance abuse screening, any required substance abuse assessment or substance abuse counseling, and any other condition related to the offense imposed by the Diversion Program, no penalty shall be imposed and the person's operator's license shall not be suspended.
 - (f) Diversion Program requirements.
- (1) Upon being contacted by a person who has been issued a notice of violation, the Diversion Program shall register the person in the Youth Substance Abuse Safety Program. Pursuant to the Youth Substance Abuse

Safety Program, the Diversion Program shall impose conditions on the person. The conditions imposed shall include only conditions related to the offense and in every case shall include a condition requiring satisfactory completion of substance abuse screening using an evidence-based tool and, if deemed appropriate following the screening, substance abuse assessment and substance abuse education or substance abuse counseling, or both. If the screener recommends substance abuse counseling, the person shall choose a State-certified or State-licensed substance abuse counselor or substance abuse treatment provider to provide the services.

- (2) Substance abuse screening required under this subsection shall be completed within 60 days after the Diversion Program receives a summons and complaint. The person shall complete all conditions at his or her the person's own expense.
- (3) When a person has satisfactorily completed substance abuse screening, any required substance abuse education or substance abuse counseling, and any other condition related to the offense that the Diversion Program has imposed, the Diversion Program shall:
 - (A) void Void the summons and complaint with no penalty due; and.
- (B) send Send copies of the voided summons and complaint to the Judicial Bureau and to the law enforcement officer who completed them. Before sending copies of the voided summons and complaint to the Judicial Bureau under this subdivision, the Diversion Program shall redact all language containing the person's name, address, Social Security number, and any other information that identifies the person.
- (4) If a person does not satisfactorily complete substance abuse screening, any required substance abuse education or substance abuse counseling, or any other condition related to the offense imposed by the Diversion Program or if the person fails to pay the Diversion Program any required program fees, the Diversion Program shall file the summons and complaint with the Judicial Bureau for adjudication under 4 V.S.A. chapter 29. The Diversion Program shall provide a copy of the summons and complaint to the law enforcement officer who issued the notice of violation and shall provide two copies to the person charged with the violation.
- (5) A person aggrieved by a decision of the Diversion Program or alcohol counselor may seek review of that decision pursuant to Rule 75 of the Vermont Rules of Civil Procedure.
- (6) Notwithstanding 3 V.S.A. §§ 163(a)(2)(C) and 164(a)(2)(C), the adult or juvenile diversion programs shall accept cases from the Youth

Substance Awareness Safety Program pursuant to this section. The confidentiality provisions of 3 V.S.A. § 163 or 164 shall become effective when a notice of violation is issued pursuant to subsection (b) of this section and shall remain in effect unless the person fails to register with or complete the Youth Substance Awareness Safety Program.

* * *

Sec. 3. 18 V.S.A. § 4230b is amended to read:

§ 4230b. CANNABIS POSSESSION BY A PERSON 16 YEARS OF AGE OR OLDER AND UNDER 21 YEARS OF AGE; CIVIL VIOLATION

* * *

- (b) Issuance of notice of violation. A law enforcement officer shall issue a person who violates this section with a notice of violation, in a form approved by the Court Administrator. The notice of violation shall require the person to provide his or her the person's name and address and shall explain procedures under this section, including that:
- (1) the person shall contact the Diversion Program in the county where the offense occurred within 15 days;
- (2) failure to contact the Diversion Program within 15 days will result in the case being referred to the Judicial Bureau, where the person, if found liable for the violation, will be subject to a civil penalty and a suspension of the person's operator's license and may face substantially increased insurance rates;
- (3) no money should be submitted to pay any penalty until after adjudication; and
- (4) the person shall notify the Diversion Program if the person's address changes.

* * *

(d) Registration in Youth Substance Awareness Safety Program. Within 15 days after receiving a notice of violation, the person shall contact the Diversion Program in the county where the offense occurred and register for the Youth Substance Awareness Safety Program. If the person fails to do so, the Diversion Program shall file the summons and complaint with the Judicial Bureau for adjudication under 4 V.S.A. chapter 29. The Diversion Program shall provide a copy of the summons and complaint to the law enforcement

officer who issued the notice of violation and shall provide two copies to the person charged with the violation.

- (e) Notice to report to Diversion. Upon receipt from a law enforcement officer of a summons and complaint completed under this section, the Diversion Program shall send the person a notice to report to the Diversion Program. The notice to report shall provide that:
- (1) The person is required to complete all conditions related to the offense imposed by the Diversion Program, including substance abuse screening and, if deemed appropriate following the screening, substance abuse assessment or substance abuse counseling, or both.
- (2) If the person does not satisfactorily complete the substance abuse screening, any required substance abuse assessment or substance abuse counseling, or any other condition related to the offense imposed by the Diversion Program, the case will be referred to the Judicial Bureau, where the person, if found liable for the violation, shall be assessed a civil penalty, the person's driver's license will be suspended, and the person's automobile insurance rates may increase substantially.
- (3) If the person satisfactorily completes the substance abuse screening, any required substance abuse assessment or substance abuse counseling, and any other condition related to the offense imposed by the Diversion Program, no penalty shall be imposed and the person's operator's license shall not be suspended.

(f) Diversion Program requirements.

- (1) Upon being contacted by a person who has been issued a notice of violation, the Diversion Program shall register the person in the Youth Substance Awareness Safety Program. Pursuant to the Youth Substance Awareness Safety Program, the Diversion Program shall impose conditions on the person. The conditions imposed shall include only conditions related to the offense and in every case shall include a condition requiring satisfactory completion of substance abuse screening using an evidence-based tool and, if deemed appropriate following the screening, substance abuse assessment and substance abuse education or substance abuse counseling, or both. If the screener recommends substance abuse counseling, the person shall choose a State-certified or State-licensed substance abuse counselor or substance abuse treatment provider to provide the services.
- (2) Substance abuse screening required under this subsection shall be completed within 60 days after the Diversion Program receives a summons

and complaint. The person shall complete all conditions at his or her the person's own expense.

- (3) When a person has satisfactorily completed substance abuse screening, any required substance abuse education or substance abuse counseling, and any other condition related to the offense that the Diversion Program has imposed, the Diversion Program shall:
 - (A) Void the summons and complaint with no penalty due.
- (B) Send copies of the voided summons and complaint to the Judicial Bureau and to the law enforcement officer who completed them. Before sending copies of the voided summons and complaint to the Judicial Bureau under this subdivision, the Diversion Program shall redact all language containing the person's name, address, Social Security number, and any other information that identifies the person.
- (4) If a person does not satisfactorily complete substance abuse screening, any required substance abuse education or substance abuse counseling, or any other condition related to the offense imposed by the Diversion Program or if the person fails to pay the Diversion Program any required Program fees, the Diversion Program shall file the summons and complaint with the Judicial Bureau for adjudication under 4 V.S.A. chapter 29. The Diversion Program shall provide a copy of the summons and complaint to the law enforcement officer who issued the notice of violation and shall provide two copies to the person charged with the violation.
- (5) A person aggrieved by a decision of the Diversion Program or alcohol counselor may seek review of that decision pursuant to Rule 75 of the Vermont Rules of Civil Procedure.
- (6) Notwithstanding 3 V.S.A. §§ 163(a)(2)(C) and 164(a)(2)(C), the adult or juvenile diversion programs shall accept cases from the Youth Substance Awareness Safety Program pursuant to this section, 18 V.S.A. § 4230f(e)(1), or 18 V.S.A. § 4230f(e)(2). The confidentiality provisions of 3 V.S.A. § 163 or 164 shall become effective when a notice of violation is issued pursuant to subsection (b) of this section, 18 V.S.A. § 4230f(e)(1), or 18 V.S.A. § 4230f(e)(2) and shall remain in effect unless the person fails to register with or complete the Youth Substance Awareness Safety Program.

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Sec. 4. RESTORATIVE JUSTICE; POST-ADJUDICATION REPARATIVE PROGRAM WORKING GROUP; REPORT

- (a) Creation. There is created the Post-Adjudication Reparative Program Working Group to create a Post-Adjudication Reparative Program (the "Program") that promotes uniform access to the appropriate community-based service providers for individuals sentenced to reparative boards and probation pursuant to 13 V.S.A. § 7030(a)(2) and (a)(3). The Working Group shall also study establishing a stable and reliable funding structure to support the operation of the appropriate community-based service providers.
- (b) Membership. The Working Group shall be composed of the following members:
 - (1) the Commissioner of Corrections or designee;
 - (2) the Chief Judge of the Vermont Superior Court or designee; and
- (3) five representatives selected from different geographic regions of the State to represent the State's community-based restorative justice providers currently receiving reparative board funding from the Department of Corrections appointed by the providers.
- (c) Powers and duties. The Working Group shall study the following issues:
 - (1) defining the Program and its scope;
- (2) determining the offenses that presumptively qualify for referral to the Program;
- (3) establishing any eligibility requirements for individuals sentenced to a reparative board or probation to be referred to the Program;
- (4) designing uniform operational procedures for Program referrals from the courts, intake, data collection, participant success standards, and case closures;
- (5) assessing the necessary capacity and resources of the Judiciary, the Department of Corrections, and the community-based restorative justice providers to operate the Program;
- (6) exploring an approach to achieve greater stability and reliability for the community-based restorative justice providers, including the Designated Agency model; and
- (7) consulting with the Office of the Attorney General, the Department of State's Attorneys and Sheriffs, the Office of the Defender General, the

Center for Crime Victim Services, and other stakeholders as necessary, on considerations to incorporate into the Program.

- (d) Assistance. The Working Group shall have the administrative, technical, and legal assistance of the Department of Corrections.
 - (e) Report and updates.
- (1) On or before January 15, 2025, the Working Group shall provide an update to the Senate Committee on Judiciary and House Committees on Corrections and Institutions and on Judiciary concerning any progress.
- (2) On or before July 15, 2025, the Working Group shall provide an update to the Joint Legislatives Justice Oversight Committee concerning any progress.
- (3) On or before November 15, 2025, the Working Group shall submit a written report in the form of proposed legislation to the Joint Legislative Justice Oversight Committee, the Senate Committee on Judiciary, and the House Committees on Corrections and Institutions and on Judiciary.

(f) Meetings.

- (1) The Chief Judge of the Vermont Superior Court or designee shall call the first meeting of the Working Group to occur on or before August 1, 2024.
 - (2) The Working Group shall meet not more than six times per year.
- (3) The Chief Judge of the Vermont Superior Court or designee shall serve as the Chair of the Working Group.
 - (4) A majority of the membership shall constitute a quorum.
 - (5) The Working Group shall cease to exist on January 15, 2026.
- (g) Compensation and reimbursement. Members of the Working Group who are not employees of the State of Vermont and who are not otherwise compensated or reimbursed for their attendance shall be entitled to compensation and reimbursement of expenses pursuant to 32 V.S.A. § 1010 for not more than six meetings per year.
- Sec. 5. DEPARTMENT OF STATE'S ATTORNEYS AND SHERIFFS;

POSITION; APPROPRIATION

(a) On July 1, 2024, a new, permanent, exempt Director of Policy position is created in the Department of State's Attorneys and Sheriffs. In addition to any other duties deemed appropriate by the Department, the Director of Policy

shall supervise the development, oversight, and compliance work related to the Department's internal, external, and State-mandated policies.

(b) The position of Director of Policy established in subsection (a) of this section shall be subject to a General Fund appropriation in FY 2025.

Sec. 6. OFFICE OF THE ATTORNEY GENERAL; DIVERSION PROGRAM POSITION; APPROPRIATION

- (a) On July 1, 2024, a new, permanent, classified Diversion Program Coordinator position is created in the Office of the Attorney General. In addition to any other duties deemed appropriate by the Attorney General, the Diversion Program Coordinator shall assist in the administration of the diversion programs governed by the Office of the Attorney General.
- (b) The position of Diversion Program Coordinator established in subsection (a) of this section shall be subject to a General Fund appropriation in FY 2025.

Sec. 7. COMMUNITY JUSTICE UNIT; DIVERSION PROGRAM ADMINISTRATION PLAN; REPORT

In counties where there is more than one pre-charge and post-charge diversion provider, the Community Justice Unit of the Office of the Attorney General shall collaborate with each county's juvenile and adult pre-charge and post-charge providers and each county's State's Attorney or designee to develop a plan to streamline the administration and provision of juvenile and adult pre-charge and post-charge diversion programs on or before July 1, 2027. The Community Justice Unit shall report on such plan in the 2027 annual report required pursuant to 3 V.S.A. §§ 163(b)(2) and 164(b)(2).

Sec. 8. OFFICE OF THE ATTORNEY GENERAL; PRE-CHARGE DIVERSION PROVIDERS; GRANTS

Notwithstanding 3 V.S.A. §§ 163(b)(1) and 164(b)(1), in counties where there is more than one pre-charge or post-charge diversion provider, the Attorney General shall offer to grant or contract directly with all pre-charge providers in that county or provide for subgranting or subcontracting by the current post-charge provider in that county.

Sec. 9. OFFICE OF THE ATTORNEY GENERAL; COMMUNITY REFERRALS; FUNDING ALTERNATIVES; REPORT

(a) On or before December 1, 2024, the Office of the Attorney General, in consultation with community-based restorative justice providers, the

Department of Public Safety, the Vermont Association of Chiefs of Police, the Office of Racial Equity, and other stakeholders as needed, shall submit a written report outlining funding alternatives for community referrals to the Senate and House Committees on Judiciary. The report shall include funding alternatives considering:

- (1) state and local funding options;
- (2) entities through which funding could be provided; and
- (3) oversight requirements.
- (b) As used in this section, "community referrals" mean referrals to community-based restorative justice providers that do not involve criminal offenses for which probable cause has been established.

Sec. 10. REDESIGNATION

24 V.S.A. §§ 1961–1969 are redesignated at 28 V.S.A. §§ 915–923.

Sec. 11. REPEALS

Sec. 8 of this act is repealed on July 1, 2029.

Sec. 12. EFFECTIVE DATES

This act shall take effect on July 1, 2024 except that Sec. 1 (juvenile and adult pre-charge and post-charge diversion) and Sec. 8 (Attorney General pre-charge diversion grants) shall take effect on July 1, 2025.

(Committee Vote: 8-3-0)

Rep. Andrews of Westford, for the Committee on Ways and Means, recommends the bill ought to pass when amended as recommended by the Committee on Judiciary.

(Committee Vote: 9-1-2)

Rep. Squirrell of Underhill, for the Committee on Appropriations, recommends the report of the Committee on Judiciary be amended as follows:

<u>First</u>: By striking out Sec. 5, Department of State's Attorneys and Sheriffs; position; appropriation, in its entirety and inserting in lieu thereof a new Sec. 5 to read as follows:

Sec. 5. DEPARTMENT OF STATE'S ATTORNEYS AND SHERIFFS; POSITION; APPROPRIATION

To the extent funds are available, a new, permanent, exempt Director of Policy position is created in fiscal year 2025 within the Department of State's Attorneys and Sheriffs. In addition to any other duties deemed appropriate by

the Department, the Director of Policy shall supervise the development, oversight, and compliance work related to the Department's internal, external, and State-mandated policies.

<u>Second</u>: By striking out Sec. 6, Office of the Attorney General; diversion program position; appropriation, in its entirety and inserting in lieu thereof a new Sec. 6 to read as follows:

Sec. 6. OFFICE OF THE ATTORNEY GENERAL; POSITION; APPROPRIATION

To the extent funds are available, a new, permanent, classified Diversion Program Coordinator position is created in fiscal year 2025 within the Office of the Attorney General. In addition to any other duties deemed appropriate by the Attorney General, the Diversion Program Coordinator shall assist in the administration of the diversion programs governed by the Office of the Attorney General.

(Committee Vote: 8-4-0)

For Informational Purposes

NOTICE OF CROSSOVER DATES

The Committee on Joint Rules adopted the following Crossover dates:

- (1) All **House/Senate** bills must be reported out of the last committee of reference (including the Committees on Appropriations and on Ways and Means/Finance, except as provided below in (2) and the exceptions listed below) on or before **Friday, March 15, 2024** and filed with the Clerk/Secretary so they may be placed on the Calendar for Notice the next legislative day Committee bills must be voted out of Committee by **Friday, March 15, 2024.**
- (2) All **House/Senate** bills referred pursuant to House Rule 35(a) or Senate Rule 31 to the Committees on Appropriations and on Ways and Means/Finance must be reported out by the last of those committees on or before **Friday**, **March 22**, **2024** and filed with the Clerk/Secretary so they may be placed on the Calendar for Notice the next legislative day.

Exceptions the foregoing deadlines include the major money bills (the general Appropriations bill ("The Big Bill"), the Transportation Capital bill, the Capital Construction bill, the Pay Act, and the Fee and miscellaneous tax bills).

JOINT FISCAL COMMITTEE NOTICES

Grants and Positions that have been submitted to the Joint Fiscal Committee by the Administration, under 32 V.S.A. §5(b)(3)(D):

JFO #3187: Two (2) limited-service positions to the Public Service Department, Vermont Community Broadband Board: Administrative Services Manager III and Data and Information Project Manager. Positions will carry out work related to the federal Broadband Equity, Access and Deployment (BEAD) program. This program has the potential to bring in additional Broadband investment, provided local applications are successful. Positions are fully funded through 11/30/2027 and are funded by previously approved JFO #3136.

[Received February 26, 2024]

JFO #3186: \$4,525,801.81 to the Agency of Agriculture, Food and Markets from the U.S. Department of Agriculture. The majority of funds to be subawards to Vermont's agricultural businesses and organizations to build resilience in the middle of the food supply chain and to support market development for small farms and food businesses. Includes full funding for one (1) limited-service position, Agriculture Development Specialist II and 50% support for one (1) limited-service position, Contracts and Grants Specialist I. The other 50% for the position will come from already approved JFO #2982.

[Received February 8, 2024]

JFO #3185: \$70,000.00 to the Attorney General's Office from the Sears Consumer Protection and Education Fund to improve accessibility and outreach of the Vermont Consumer Assistance Program to underserved populations in Vermont.

[Received January 31, 2024]

JFO #3184: Three (3) limited-service positions to the Agency of Human Services, Department of Health. One (1) Substance Abuse Program Evaluator, funded through 8/31/28; and one (1) Public Health Specialist II, and one (1) Family Service Specialist both funded through 9/29/2024. The positions are fully funded by previously approved JFO requests #3036 and #1891. These positions will support Vermont's Overdose Data to Action program and the Maternal Mortality Review Panel.

[Received January 31, 2024]

JFO #3183: \$182,500.00 to the Agency of Natural Resources, Department of Forests, Parks and Recreation. Funds will be used to complete the purchase of

a conservation easement on a 183-acre parcel of land in Townshend, Vermont (Peterson Farm). [Note: Remainder of the easement (\$82,500) is supported by a State appropriation agreement between the department and the VHCB. Closing costs, including department staff time, is funded by already budgeted federal funds. Ongoing enforcement costs are managed by the department's Lands and Facilities Trust Fund. A \$15,000.00 stewardship contribution to this fund will be made by the landowner at the time of the sale.]

[Received January 31, 2024]

JFO #3182: \$125,000.00 to Agency of Natural Resources, Department of Environmental Conservation from the New England Interstate Water Pollution Control Commission to expand current monitoring of cyanotoxins in Lake Champlain and Vermont inland lakes.

[Received January 31, 2024]

JFO #3181: \$409,960.00 to the Agency of Commerce and Community Development, Department of Housing and Community Development from the U.S. Department of the Interior/National Park Service. Funds will be used for the preservation, repair, and restoration of the Old Constitution House, located in Windsor, Vermont. The first Constitution of Vermont was adopted on this site, then known as Elijah West's Tavern, on July 8, 1777. [Note: A State match of \$53,714.00 is accomplished within the agency budget through the reduction of a fraction of an existing position base and existing capital bill funds.]

[Received January 31, 2024]

JFO #3180: One (1) limited-service position, Administrative Services Director III, to the Agency of Administration, Recovery Office. Position will ensure that flood recovery projects are integrated with existing state and federal programs. Will also ensure compliance and tracking of already awarded grants as well as those anticipated in the wake of the July 2023 flooding event. Position is funded through already approved JFO Request #3165 as well as Acts 74 (2021) and 185 (2022). The position is fully funded through 7/31/2027.

[Received January 31, 2024]

JFO #3179: Two (2) limited-service positions. One (1) to the Department of Mental Health, Project AWARE Lead Coordinator and one (1) to the Agency of Education, Project AWARE Co-Coordinator. The positions will liaison to coordinate and expand the state's efforts to develop sustainable infrastructure for school-based mental health. Both positions are fully funded through 9/29/28 from previous SAMHSA grant award JFO #2934.

[Received January 26, 2024]

JFO #3178: \$456,436.00 to the Agency of Natural Resources, Secretary's Office from the U.S. Environmental Protection Agency. Funds will support (1) limited-service position, Environmental Analyst IV. This position will serve as administrative lead developing the updated Climate Action Plan with the Vermont Climate Council and perform added work required by the EPA grant. Position is funded through 6/30/2027.

[Received January 11, 2024]

JFO #3177: \$2,543,564.00 to the Agency of Natural Resources, Secretary's Office from the U.S. Environmental Protection Agency. Funding is phase one of a two-phase funding opportunity aimed to support Vermont with climate change mitigation planning efforts. A comprehensive climate action plan will be developed, to overlap with and be synonymous to the required update to Vermont's Climate Action Plan in 2025.

[Received January 12, 2024]

JFO #3176: \$250,000.00 to the Agency of Human Services, Department of Mental Health from the National Association of State Mental Health Program Directors. These funds will increase rapid access to behavioral health care by supporting the peer service component of the mental health urgent care clinic being established in Chittenden County. This clinic will offer an alternative to seeking mental health care in emergency departments

[Received January 11, 2024]