1	TO THE HOUSE OF REPRESENTATIVES:
2	The Committee on Human Services to which was referred House Bill No.
3	469 entitled "An act relating to allowing remote witnesses and explainers for a
4	Ulysses clause in an advance directive" respectfully reports that it has
5	considered the same and recommends that the bill be amended by striking out
6	all after the enacting clause and inserting in lieu thereof the following:
7	Sec. 1. 18 V.S.A. § 9701 is amended to read:
8	§ 9701. DEFINITIONS
9	As used in this chapter:
10	* * *
11	(35) "Digital signature" means an electronic identifier that is intended
12	by the individual using it to have the same force and effect as a manual
13	signature and that meets all of the following requirements:
14	(A) uses an algorithm approved by either the National Institute of
15	Standards and Technology or by the Department of Health;
16	(B) is unique to the individual using it;
17	(C) is capable of verification;
18	(D) is under the sole control of the individual using it;
19	(E) is linked to data in a manner that invalidates the digital signature
20	if the data is changed;

1	(F) persists with the document and not by association in separate
2	files; and
3	(G) is bound to a digital certificate.
4	(36) "Remote witness" means a witness who is not physically present
5	when a principal signs an advance directive.
6	Sec. 2. 18 V.S.A. § 9703 is amended
7	§ 9703. FORM AND EXECUTION
8	(a) An adult with capacity may execute an advance directive at any time.
9	(b)(1) The advance directive shall be dated, executed by the principal or by
10	another individual in the principal's presence at the principal's express
11	direction if the principal is physically unable to do so, and signed in the
12	presence of by two or more witnesses at least 18 years of age, who shall sign
13	and affirm that the principal appeared to understand the nature of the document
14	and to be free from duress or undue influence at the time the advance directive
15	was signed.
16	(2) On and after April 1, 2024, the principal shall have either signed in
17	the physical presence of the witness or the following conditions shall have
18	been met if the witness is a remote witness:
19	(A) the principal and the remote witness were known to each other;
20	(B) based on communication between the principal and the remote
21	witness through a live, interactive, audio-video connection or by telephone, the

1	remote witness attested that the principal seemed to understand the nature of
2	the document and to be free from duress or undue influence at the time the
3	advance directive was signed; and
4	(C) the principal included on the advance directive the name and
5	contact information for the remote witness and the nature of the principal's
6	relationship to the remote witness.
7	(3) A health care provider may serve as a witness to the principal's
8	execution of the advance directive under this subsection.
9	(4) If the principal is being admitted to or is a resident of a nursing home
10	or residential care facility or is being admitted to or is a patient in a hospital at
11	the time of execution, the individual who explained the nature and effect of the
12	advance directive to the principal pursuant to subsection (d) or (e) of this
13	section may also serve as one of the witnesses to the principal's execution of
14	the advance directive under this subsection.
15	(c) Neither the agent appointed by the principal nor the principal's spouse,
16	parent, adult sibling, adult child, or adult grandchild may witness the advance
17	directive.
18	(d)(1) An advance directive shall not be effective if, at the time of
19	execution, the principal is being admitted to or is a resident of a nursing home
20	as defined in 33 V.S.A. § 7102 or a residential care facility, unless one of the
21	following individuals explains the nature and effect of an advance directive to

1	the principal and signs a statement affirming that <del>ne or sne</del> the individual has
2	provided the explanation:
3	(A) an ombudsman;
4	(B) a recognized member of the clergy;
5	(C) an attorney licensed to practice in this State;
6	(D) a Probate Division of the Superior Court designee;
7	(E) an individual designated by a hospital pursuant to subsection
8	9709(d) of this title;
9	(F) a mental health patient representative;
10	(G) an individual who is volunteering at the nursing home or
11	residential care facility without compensation and has received appropriate
12	training regarding the explanation of advance directives; or
13	(H) a clinician, as long as provided the clinician is not employed by
14	the nursing home or residential care facility at the time of the explanation.
15	(2) It is the intent of this subsection to ensure that residents of nursing
16	homes and residential care facilities are willingly and voluntarily executing
17	advance directives.
18	(3) The individual who explains the nature and effect of an advance
19	directive to the principal under this subsection may be physically present in the
20	same location as the principal at the time of the explanation or may deliver the

I	explanation to the principal through a live, interactive, audio-video connection
2	or by telephone.
3	(e) $\underline{(1)}$ An advance directive shall not be effective if, at the time of
4	execution, the principal is being admitted to or is a patient in a hospital, unless
5	one of the following individuals has explained explains the nature and effect of
6	an advance directive to the principal and signs a statement affirming that he or
7	she the individual has provided the explanation:
8	(1)(A) an ombudsman;
9	(2)(B) a recognized member of the clergy;
10	(3)(C) an attorney licensed to practice in this State;
11	(4)(D) a Probate Division of the Superior Court designee;
12	(5)(E) an individual designated by the hospital pursuant to subsection
13	9709(d) of this title; or
14	(6)(F) a mental health patient representative.
15	(2) The individual who explains the nature and effect of an advance
16	directive to the principal under this subsection may be physically present in the
17	same location as the principal at the time of the explanation or may deliver the
18	explanation to the principal through a live, interactive, audio-video connection
19	or by telephone.
20	(f) A durable power of attorney for health care, terminal care document, or
21	advance directive executed prior to the enactment of this chapter shall be a

1	valid advance directive if the document complies with the statutory
2	requirements in effect at the time the document was executed or with the
3	provisions of this chapter.
4	(g) A principal, a witness, or an individual who explains an advance
5	directive under subsection (d) or (e) of this section may sign the advance
6	directive or the explanation affirmation statement using a digital signature,
7	provided that, for a remote witness, the conditions set forth in subdivision
8	(b)(2) of this section shall be met.
9	Sec. 3. 18 V.S.A. § 9707(h) is amended to read:
10	(h)(1) An advance directive executed in accordance with section 9703 of
11	this title may contain a provision permitting the agent, in the event that the
12	principal lacks capacity, to authorize or withhold health care over the
13	principal's objection. In order to be valid, the provision shall comply with the
14	following requirements:
15	(A) An agent shall be named in the provision.
16	(B) The agent shall accept in writing the responsibility of authorizing
17	or withholding health care over the principal's objection in the event the
18	principal lacks capacity.
19	(C) A clinician for the principal shall sign the provision and affirm
20	that the principal appeared to understand the benefits, risks, and alternatives to
21	the health care being authorized or rejected by the principal in the provision.

(D)(i) An ombudsman, a mental health patient representative, attorney licensed to practice law in this State, or the Probate Division of the Superior Court designee shall sign a statement affirming that he or she the individual has explained the nature and effect of the provision to the principal, and that the principal appeared to understand the explanation and be free from duress or undue influence.

- (ii) If the principal is a patient in a hospital when the provision is executed, the ombudsman, mental health patient representative, attorney, or Probate Division of the Superior Court designee shall be independent of the hospital and not an interested individual.
- (E) The provision shall specify the treatments to which it applies and shall include an explicit statement that the principal desires or does not desire the proposed treatments even over the principal's objection at the time treatment is being offered or withheld. The provision may include a statement expressly granting to the health care agent the authority to consent to the principal's voluntary hospitalization.
- (F) The provision shall include an acknowledgment that the principal is knowingly and voluntarily waiving the right to refuse or receive treatment at a time of incapacity, and that the principal understands that a clinician will determine capacity.

1	(2) A provision executed in compliance with subdivision (1) of this
2	subsection shall be effective when the principal's clinician and a second
3	clinician have determined pursuant to subdivision 9706(a)(1) of this title that
4	the principal lacks capacity.
5	(3) If an advance directive contains a provision executed in compliance
6	with this section:
7	(A) The agent may, in the event the principal lacks capacity, make
8	health care decisions over the principal's objection, provided that the decisions
9	are made in compliance with subsection 9711(d) of this title.
10	(B) A clinician shall follow instructions of the agent authorizing or
11	withholding health care over the principal's objection.
12	(4)(A) The first time a principal executes a provision under this
13	subsection (h):
14	(i) the principal's clinician shall be physically present in the same
15	location as the principal to assess the principal's understanding of the benefits,
16	risks, and alternatives to the health care being authorized or rejected in the
17	provision in accordance with subdivision (1)(C) of this subsection (h); and
18	(ii) the individual explaining the nature and effect of the provision
19	in accordance with subdivision (1)(D) of this subsection (h) shall be physically
20	present in the same location as the principal at the time of the explanation.

I	(B) If a principal later amends a provision executed under this
2	subsection (h) by executing a new advance directive pursuant to section 9703
3	of this title that includes a provision permitting the agent to authorize or
4	withhold health care over the principal's objection pursuant to this subsection
5	(h), or the principal executes a new advance directive that maintains a
6	provision previously executed under this subsection (h):
7	(i) the clinician may be physically present in the same location as
8	the principal to assess the principal's understanding of the benefits, risks, and
9	alternatives to the health care being authorized or rejected in the provision in
10	accordance with subdivision (1)(C) of this subsection (h) or may assess the
11	principal's understanding based on the clinician's interactions with the
12	principal through a live, interactive, audio-video connection; and
13	(ii) the individual explaining the nature and effect of the provision
14	in accordance with subdivision (1)(D) of this subsection (h) may be physically
15	present in the same location as the principal at the time of the explanation or
16	may deliver the explanation to the principal through a live, interactive, audio-
17	video connection.
18	(C) The clinician and the individual providing the explanation do not
19	need to be physically present at the same time as one another or otherwise

1	coordinate the timing or performance of their respective duties under
2	subdivisions (1)(C) and (D) of this subsection (h).
3	(5) The agent who is permitted to authorize or withhold health care over
4	the principal's objection pursuant to this subsection does not need to be
5	physically present for any portion of the principal's execution of that provision
6	or of the advance directive.
7	(6) The principal, the agent, the clinician, and the individual who
8	explained the provision under subdivision (1)(D) of this subsection (h), or any
9	one or more of them, may sign the provision, acceptance, or explanation
10	affirmation statement, as applicable, using a digital signature.
11	Sec. 4. 18 V.S.A. § 9721 is amended to read:
12	§ 9721. REMOTE WITNESSES AND EXPLAINERS FOR A LIMITED
13	TIME THROUGH MARCH 31, 2024
14	(a) As used in this section, "remote witness" means a witness who is not
15	physically present when a principal signs an advance directive. [Repealed.]
16	(b)(1) Notwithstanding any provision of subsection 9703(b) of this title to
17	the contrary, an advance directive executed by a principal between February
18	15, 2020 and June 15, 2020 shall be deemed to be valid even if the principal
19	signed the advance directive outside the physical presence of one or both of the
20	required witnesses, provided all of the following conditions were met with
21	respect to each remote witness:

1	(A) the principal and the remote withess were known to each other,
2	(B) the remote witness was informed about the role of a witness to
3	the execution of an advance directive; and
4	(C) the principal included on the advance directive the name and
5	contact information for the witness.
6	(2) An advance directive executed as set forth in subdivision (1) of this
7	subsection shall be valid until June 30, 2021 unless amended, revoked, or
8	suspended by the principal in accordance with this chapter prior to that date.
9	(c)(1) Notwithstanding any provision of subsection 9703(b) of this title to
10	the contrary, an advance directive executed by a principal between June 15,
11	2020 and March 31, 2024 shall be deemed to be valid even if the principal
12	signed the advance directive outside the physical presence of one or both of the
13	required witnesses, provided all of the following conditions are met with
14	respect to each remote witness:
15	(A) the principal and the remote witness were known to each other;
16	(B) based on video or telephonic communication between the
17	principal and the remote witness, the remote witness attested that the principal
18	seemed to understand the nature of the document and to be free from duress or
19	undue influence at the time the advance directive was signed; and

1	(C) the principal included on the advance directive the name and
2	contact information for the remote witness and the nature of the principal's
3	relationship to the remote witness.
4	(2) An advance directive executed as set forth in subdivision (1) of this
5	subsection shall remain valid unless amended, revoked, or suspended by the
6	principal in accordance with this chapter.
7	(d)(1) Notwithstanding any provision of subsection 9703(d) or (e) of this
8	title to the contrary, an advance directive executed by a principal between
9	February 15, 2020 and March 31, 2024 while the principal was being admitted
10	to or was a resident of a nursing home or residential care facility or was being
11	admitted to or was a patient in a hospital shall be deemed to be valid even if
12	the individual who explained the nature and effect of the advance directive to
13	the principal in accordance with subsection 9703(d) or (e) of this title, as
14	applicable, was not physically present in the same location as the principal at
15	the time of the explanation, provided the individual delivering the explanation
16	was communicating with the principal by video or telephone.
17	(2) An advance directive executed in accordance with this subsection

shall remain valid as set forth in subsection (b) or (c) of this section, as

accordance with section 9703 of this chapter.

(e) On and after April 1, 2024, advance directives shall only be executed in

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applicable.

1	Sec. 5. EFFECTIVE DATE
2	This act shall take effect on April 1, 2024.
3	and that after passage the title of the bill be amended to read: "An act
4	relating to remote and electronic processes for executing an advance directive'
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15	(Committee vote:)
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17	Representative
18	FOR THE COMMITTEE