
This act summary is provided for the convenience of the public and members of the General Assembly. It is intended to provide a general summary of the act and may not be exhaustive. It has been prepared by the staff of the Office of Legislative Counsel without input from members of the General Assembly. It is not intended to aid in the interpretation of legislation or to serve as a source of legislative intent.

Act No. 22 (S.36). An act relating to the delivery and payment of certain services provided through the Agency of Human Services, services for persons who are incapacitated, and Human Services Board proceedings

Subjects: Medicaid; human services; mental health; substance use disorder; long-term residential treatment

This act requires the Agency of Human Services (AHS) to provide coverage for medically necessary high-intensity, medically monitored residential treatment episodes and medically necessary low-intensity, clinically managed residential treatment episodes when prescribed by a health care professional employed by a residential program who is practicing within the scope of the health care professional's license and the residential treatment program is participating in Vermont's Medicaid program. It further requires that coverage of these residential treatment episodes be for the entire length of stay prescribed by the health care professional.

This act requires AHS to conduct a review of the Medicaid payment model for residential substance use disorder treatment services and submit the results of the review to the General Assembly on or before December 1, 2025.

This act eliminates a repeal that would have prohibited individuals who are incapacitated due to use of alcohol or other drugs from being held at a Department of Corrections' facility. It requires the Departments of Health and of Mental Health's existing plan to expand services and programming for individuals incapacitated due to use of alcohol or other drugs to prioritize Chittenden County. It also requires the submission of two presentations to the General Assembly on or before February 15, 2026. The first is a joint presentation from the Departments of Health and of Mental Health on efforts to expand services and programming for individuals who are incapacitated due to use of alcohol or other drugs. The second is a presentation from the Department of Corrections on efforts to reinstate the practice of connecting individuals who are in a correctional facility due to incapacitation from alcohol or other drug use with appropriate community-based substance use recovery providers.

This act requires AHS, in consultation with the Human Services Board, the Office of the Attorney General, each of the Agency's departments with cases before the Human Services Board, community partners, and individuals with lived experience as appellants before the Board, to submit a report by December 15, 2025, with various recommendations on Board proceedings. Some of the reporting requirements include a proposal for attorney training and a proposal on resolving potential appeals prior to reaching the Board. It also requires the Board, in consultation with AHS, each of the Agency's departments with cases before the Human Services Board, the Office of Attorney General, community partners, and individuals with lived experience as appellants before the Board, to submit a report by December 15, 2025, with various recommendations on Board proceedings. Some of the reporting requirements include a

proposal to improve understanding of Board processes and accessibility to appellants and a proposal for the exchange of periodic feedback as part of a continual quality improvement process.

Effective Date: July 1, 2025