

**No. 116. An act relating to miscellaneous amendments to the Department of Health's reporting and programming requirements.**

(H.293)

It is hereby enacted by the General Assembly of the State of Vermont:

\* \* Community Violence Prevention Program Report \* \* \*

Sec. 1. 18 V.S.A. § 13 is amended to read:

§ 13. COMMUNITY VIOLENCE PREVENTION PROGRAM

\* \* \*

~~(d)(1) The Commissioner of Health, in consultation and collaboration with the Chief Prevention Officer, the Department of Public Safety, the Director of Violence Prevention, the Executive Director of Racial Equity, and the Council for Equitable Youth Justice, shall report on the Community Violence Prevention Program:~~

~~(A) on or before September 1, 2023 and December 1, 2023 to the Joint Legislative Justice Oversight Committee; and~~

~~(B) on or before January 15, 2024, and annually on that date thereafter, to the Senate and House Committees on Judiciary, the Senate Committee on Health and Welfare, the House Committee on Human Services, and the House Committee on Health Care.~~

~~(2) The report required by this subsection shall include:~~

~~(A) a complete description of the Community Violence Prevention Program grant application and award process;~~

~~(B) guidelines for the award of grants developed under subdivision  
(b)(2) of this section;~~

~~(C) the number of applications submitted and grants awarded, and the  
amount of each grant awarded;~~

~~(D) detailed descriptions of the programs and purposes for which all  
grants were awarded;~~

~~(E) the impacts and outcomes of funded projects; and~~

~~(F) descriptions of any grants applied for or awarded. [Repealed.]~~

\* \* \* Cancer Registry Disclosure Requirements \* \* \*

Sec. 2. 18 V.S.A. § 155 is amended to read:

§ 155. DISCLOSURE

\* \* \*

(b) The Commissioner may furnish confidential information to the National Breast and Cervical Cancer Early Detection Program, other states' cancer registries, federal cancer control agencies, or health researchers in order to collaborate in a national cancer registry or to collaborate in cancer control and prevention research studies. However, before releasing confidential information, the Commissioner shall first obtain from such state registries, agencies, or researchers ~~an agreement in writing to keep~~ written assurances acceptable to the Commissioner that the identifying information shall be kept confidential and privileged as required by law. In the case of researchers, the Commissioner shall also first obtain written evidence of the approval of ~~their~~

~~academic committee for the protection of human subjects established in~~  
~~accordance with 45 C.F.R. part 46~~ an institutional review board or privacy  
board in accordance with 45 C.F.R. § 164.512(i)(1)(i)(A) and (B).

\* \* \* Amyotrophic Lateral Sclerosis Registry Disclosure Requirements and

Reporting \* \* \*

Sec. 3. 18 V.S.A. § 174 is amended to read:

§ 174. CONFIDENTIALITY

(a)(1) All identifying information regarding an individual patient or health care provider is exempt from public inspection and copying under the Public Records Act and shall be kept confidential.

(2) Notwithstanding subdivision (1) of this subsection, the Commissioner may enter into data sharing and protection agreements with researchers or state, regional, or national amyotrophic lateral sclerosis registries for bidirectional data exchange, provided access under such agreements is consistent with the privacy, security, and disclosure protections in this chapter. In the case of researchers, the Commissioner shall also first obtain written evidence of the approval of ~~their academic committee for the protection of human subjects established in accordance with 45 C.F.R. Part 46~~ an institutional review board or privacy board in accordance with 45 C.F.R. § 164.512(i)(1)(i)(A) and (B). The Commissioner shall disclose the minimum information necessary to accomplish a specified research purpose.

\* \* \*

Sec. 4. 18 V.S.A. § 175 is amended to read:

§ 175. ANNUAL REPORT

Annually, on or before ~~January 15~~ November 1, the Department shall submit a written report to the Governor, the House Committee on Human Services, and the Senate Committee on Health and Welfare containing the statewide prevalence and incidence estimates of amyotrophic lateral sclerosis, including any trends occurring over time across the State. Reports shall not contain information that directly or indirectly identifies an individual patient or health care provider.

\* \* \* Health Equity Data Reporting \* \* \*

Sec. 5. 18 V.S.A. § 252 is amended to read:

§ 252. HEALTH EQUITY ADVISORY COMMISSION

\* \* \*

(e) Report. ~~Annually, on~~ On or before January 15 of odd-numbered years, the Advisory Commission shall submit a written report to the Senate Committee on Health and Welfare and to the House Committees on Health Care and on Human Services with its findings and any recommendations for legislative action. The Advisory Commission is encouraged to base recommendations on the data collected and analysis completed pursuant to section 253 of this title.

\* \* \*

Sec. 6. 18 V.S.A. § 253 is amended to read:

§ 253. DATA RESPONSIVE TO HEALTH EQUITY INQUIRIES

\* \* \*

(b)(1) The Department of Health shall systematically analyze such health equity data using the smallest appropriate units of analysis feasible to detect racial and ethnic disparities, as well as disparities along the lines of primary language, sex, disability status, sexual orientation, gender identity, and socioeconomic status, and report the results of such analysis on the Department's website periodically, but not less than biannually. The Department's analysis shall be used to measure over time the impact of actions taken to reduce health disparities in Vermont. The data informing the Department's analysis shall be made available to the public in accordance with State and federal law.

(2) ~~Annually~~ Every three years beginning in 2029, on or before January 15, the Department shall submit a report containing the results of the analysis conducted pursuant to subdivision (1) of this subsection to the Senate Committee on Health and Welfare and to the House Committees on Health Care and on Human Services.

\* \* \* Emergency Service Provider Wellness Commission Report \* \* \*

Sec. 7. 18 V.S.A. § 7257b(h) is amended to read:

(h) ~~Notwithstanding 2 V.S.A. § 20(d), the Commission shall report its conclusions and recommendations to the Governor and General Assembly as~~

~~the Commission deems necessary but not less frequently than once per calendar year. The report shall disclose individually identifiable health information only to the extent necessary to convey the Commission's conclusions and recommendations, and any such disclosures shall be limited to information already known to the public. The report shall be available to the public through the Department of Health. [Repealed.]~~

\* \* \* Service Members and Veterans; Food Service Licensing \* \* \*

Sec. 8. 2018 Acts and Resolves No. 119, Sec. 8 is amended to read:

Sec. 8. REPORTING; UTILIZATION BY SERVICE MEMBERS AND  
VETERANS

\* \* \*

~~(d) The Commissioner of Health shall, on or before February 1 of each year, report to the House Committees on Commerce and Economic Development, on General, Housing, and Military Affairs, and on Government Operations and the Senate Committees on Economic Development, Housing and General Affairs and on Government Operations regarding the number of service members and veterans who, during the previous calendar year, were deemed to have knowledge of the prevention of food-borne disease, be able to apply the Hazard Analysis Critical Control Point principles, and have met the criteria for "demonstration of knowledge" requirements set forth by the Department of Health in rule for the purposes of obtaining a food establishment license as provided pursuant to 18 V.S.A. § 4303(b) and the total~~

~~number of food establishment licenses issued to those service members and veterans.~~ [Repealed.]

\* \* \* Recovery Service Organizations \* \* \*

Sec. 9. REPORT; RECOVERY SERVICE ORGANIZATIONS

On or before February 15, 2027, the Department of Health, in consultation with other Agency of Human Services' departments and recovery service organizations, shall submit a written report to the House Committees on Appropriations, on Health Care, and on Human Services and to the Senate Committees on Appropriations and on Health and Welfare containing information on the total actual income and expenditures for recovery service organizations in fiscal years 2024–2026. Specifically, the report shall address:

- (1) public funding sources, including all appropriated State funds, federal funds, and municipal funds;
- (2) recipients of recovery service organization funding;
- (3) an analysis of recovery service organization grant performance measures and outcomes; and
- (4) any recommendations for enhancing the financial stability of recovery service organizations.

\* \* \* Repeals \* \* \*

Sec. 10. REPEALS

(a) 18 V.S.A. § 5208 (Department of Health; report on statistics) is repealed.

(b) 18 V.S.A. § 1756 (lead screening; annual report) is repealed.

\* \* \* Effective Date \* \* \*

Sec. 11. EFFECTIVE DATE

This act shall take effect on July 1, 2026.

Date Governor signed bill: June 8, 2026