

1 H.764

2 Introduced by Representatives Dobrovich of Williamstown, Bosch of

3 Clarendon, Burtt of Cabot, Coffin of Cavendish, Galfetti of

4 Barre Town, Goslant of Northfield, Kleppner of Burlington,

5 Pinsonault of Dorset, and Tagliavia of Corinth

6 Referred to Committee on

7 Date:

8 Subject: Health; mental health; inpatient psychiatric bed capacity; certificate of

9 need

10 Statement of purpose of bill as introduced: This bill proposes to exclude

11 expenditures related to the construction or renovation of psychiatric units

12 within a licensed hospital from the certificate of need requirements. It further

13 proposes to create the Psychiatric Inpatient Capacity Working Group.

14 An act relating to inpatient psychiatric bed capacity

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

16 Sec. 1. 18 V.S.A. § 9435 is amended to read:

17 § 9435. EXCLUSIONS

18 \* \* \*

19 (m) Excluded from this subchapter are:

1                   (1) psychiatric hospitals, as defined in section 1902 of this title, that are  
2                   licensed or are proposed to be established and licensed pursuant to chapter 43  
3                   of this title; and

4                   (2) expenditures related to the construction or renovation of psychiatric  
5                   units within a hospital licensed pursuant to chapter 43 of this title.

6                   Sec. 2. PSYCHIATRIC INPATIENT CAPACITY WORKING GROUP

7                   (a) Creation. There is created the Psychiatric Inpatient Capacity Working  
8                   Group to explore the need for additional inpatient psychiatric beds in the State  
9                   and address barriers to their construction.

10                   (b) Membership. The Working Group shall be composed of the following  
11                   members:

12                   (1) the Commissioner of Mental Health or designee, who shall serve as  
13                   chair;

14                   (2) the Secretary of Human Services or designee;

15                   (3) a member with lived experience of inpatient psychiatric treatment,  
16                   appointed by the Vermont Psychiatric Survivors;

17                   (4) a member with lived experience as the parent, spouse, child, or  
18                   sibling of an individual who has experienced inpatient psychiatric treatment,  
19                   appointed by the Vermont chapter of the National Alliance on Mental Illness;

20                   (5) a psychiatrist licensed pursuant to 26 V.S.A. chapter 23 or 33,  
21                   appointed by the Vermont Medical Society;

1                   (6) a psychologist licensed pursuant to 26 V.S.A. chapter 55, appointed  
2                   by the Vermont Psychological Association;  
3                   (7) a clinical mental health counselor licensed pursuant to 26 V.S.A.  
4                   chapter 65, appointed by the Board of Allied Mental Health Practitioners;  
5                   (8) a member, appointed by the Vermont Association of Hospitals and  
6                   Health Systems; and  
7                   (9) a member, appointed by the Vermont League of Cities and Towns.  
8                   (c) Powers and duties. The Working Group shall provide  
9                   recommendations on:  
10                   (1) whether additional inpatient psychiatric beds are needed in the State,  
11                   and, if so, for which geographic locations and special populations;  
12                   (2) how to eliminate any identified barriers to the development of new  
13                   inpatient psychiatric beds; and  
14                   (3) a plan to increase inpatient psychiatric beds in the State by 25  
15                   percent of the fiscal year 2026 total by July 2028, in a manner that is consistent  
16                   with the recommendations of subdivision (1) of this subsection, if the Working  
17                   Group determines that additional beds are needed.  
18                   (d) Assistance. The Working Group shall have the administrative,  
19                   technical, and legal assistance of the Department of Mental Health.  
20                   (e) Report. On or before January 15, 2027, the Working Group shall  
21                   submit a written report to the House Committees on Appropriations and on

1       Health Care and to the Senate Committees on Appropriations and on Health  
2       and Welfare with its findings and any recommendations for legislative action.

3       (f) Meetings.

4       (1) The Chair shall call the first meeting of the Working Group to occur  
5       on or before August 15, 2026.

6       (2) A majority of the membership shall constitute a quorum.

7       (3) The Working Group shall cease to exist on February 1, 2027.

8       (g) Compensation and reimbursement. For attendance at meetings,  
9       members of the Working Group who are not attending in their professional  
10      capacity shall be entitled to per diem compensation and reimbursement of  
11      expenses as permitted under 32 V.S.A. § 1010 for not more than four meetings.  
12      Payments to members of the Working Group authorized under this subsection  
13      shall be made from monies appropriated to the Department of Mental Health.

14      Sec. 3. EFFECTIVE DATE

15      This act shall take effect on July 1, 2026.