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1	S.28
2	Introduced by Senators Hardy, Lyons, Clarkson, Gulick, Vyhovsky and White
3	Referred to Committee on Health and Welfare
4	Date: January 29, 2025
5	Subject: Health; health care professionals; legally protected health care;
6	limited-services pregnancy centers; Consumer Protection Act;
7	unprofessional conduct; medication abortions; fetal death reports
8	Statement of purpose of bill as introduced: This bill proposes to expand the
9	prohibition on untrue or misleading advertising by a limited-services
10	pregnancy center under the Consumer Protection Act to apply to any untrue or
11	misleading advertising about health care services. It would eliminate specific
12	responsibility for licensed health care providers who provide services at a
13	limited-services pregnancy center for the services provided at the center and
14	would remove language indicating that failure to ensure those services are
15	conducted in accordance with the law could constitute unprofessional conduct.
16	The bill would also clarify and expand the types of actions that could be
17	considered unprofessional conduct for physicians, physician assistants,
18	advanced practice registered nurses, and naturopathic physicians under their
19	licensure statutes. The bill would eliminate restrictions on a physician,
20	physician assistant, or advanced practice registered nurse prescribing
21	medication to terminate an individual's pregnancy based on asynchronous

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- 1 electronic or other online communication with the individual. It would also
- 2 specify that fetal death reports required by law must be kept confidential.

3	An act relating to access to certain legally protected health care services
4	It is hereby enacted by the General Assembly of the State of Vermont:
5	Sec. 1. 0.V.S.A. chapter 63, subchapter 11 is amonded to read:
6	Subchapter 11. Pregnancy Services Centers Health Care Services
7	§ 2491. FINDINGS; LEGISLATIVE INTENT
8	(a) Findings. The General Assembly finds that:
9	(1) Centers that seek to counsel clients against abortion, often referred
10	to as crisis pregnancy center, or limited-services pregnancy centers, have
11	become common across the county, including in Vermont. Accurate
12	information about the services that a lingited-services pregnancy center
13	performs, in addition to forthright acknowledgement of its limitations, is
14	essential to enable individuals in this State to make informed decisions about
15	their care. This includes individuals being informed of whether they are
16	receiving services from a licensed and qualified health care provider at a
17	limited-services pregnancy center, as this allows individuals to determine if
18	they need to seek medical care elsewhere in order to continue or terminate a
19	pregnancy.

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1	(?) Although some limited sorvices programay conters aponly
2	ack owledge in their advertising, on their websites, and at their facilities that
3	they no ther provide abortions nor refer clients to other providers of abortion
4	services, others provide confusing and misleading information to pregnant
5	individuals concemplating abortion by leading those individuals to believe that
6	their facilities offer abortion services and unbiased counseling. Some limited-
7	services pregnancy centers have promoted patently false or biased medical
8	claims about abortion, pregnancy, contraception, and reproductive health care
9	providers.
10	(3) False and misleading advertising by centers that do not offer or refer
11	clients for abortion is of special concern to the State because of the time-
12	sensitive and constitutionally protected native of the decision to continue or
13	terminate a pregnancy. When a pregnant individual is misled into believing
14	that a center offers services that it does not in fact offer or receives false or
15	misleading information regarding health care options, the individual loses time
16	crucial to the decision whether to terminate a pregnancy and may lose the
17	option to choose a particular method or to terminate a pregnancy at all.
18	(4) Telling the truth is how trained health care providers demonstrate
19	respect for patients, foster trust, promote self-determination, and cultivate an
20	environment where best practices in shared decision-making can flourish.
21	without veracity in information and communication, it is difficult for

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1	individuals to make informed, voluntary choices that are acceptial to one's
2	sence of personal agency and autonomy.
3	(3)(2) Advertising strategies and educational information about health
4	care options that lack transparency, use misleading or ambiguous terminology,
5	misrepresent or bfuscate services provided, or provide factually inaccurate
6	information are a form of manipulation that disrespects individuals,
7	undermines trust, broaders health disparity, and can result in patient harm.
8	<del>(b) Intent.</del>
9	(1) It is the intent of the General Assembly to ensure that the public is
10	provided with accurate, factual information about the types of health care
11	services that are available to pregnant individuals in this State. The General
12	Assembly respects the constitutionally protected right of each individual to
13	personal reproductive autonomy, which includes the right to receive clear,
14	honest, and nonmisleading information about the individual's options and to
15	make informed, voluntary choices after considering all relevant information.
16	(2) The General Assembly respects the right of limited vervices
17	pregnancy centers to counsel individuals against abortion, and nothing in this
18	subchapter should be construed to regulate, limit, or curtail such advoctey.
19	§ 2492. DEFINITIONS DEFINITION
20	As used in this subchapter-,

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1	(1) "Abortion" means any medical treatment intended to induce the
2	tern ination of, or to terminate, a clinically diagnosable pregnancy except for
3	the purpose of producing a live birth.
4	(2) "Olient" means an individual who is inquiring about or seeking
5	services at a pregnancy services center.
6	(3) "Emergency contraception" means any drug approved by the U.S.
7	Food and Drug Administration as a contraceptive method for use after sexual
8	intercourse, whether provided over the counter or by prescription.
9	(4) "Health information" means any oral or written information in any
10	form or medium that relates to health insurance or the past, present, or future
11	physical or mental health or condition of a client.
12	(5) "Limited-services pregnancy center" means a pregnancy services
13	center that does not directly provide, or provide referrals to clients for,
14	abortions or emergency contraception.
15	(6) "Pregnancy services center" means a facility, including a mobile
16	facility, where the primary purpose is to provide services to individuals who
17	are or may be pregnant and that either offers obstetric ultrasounds, obstetric
18	sonograms, or prenatal care to pregnant individuals or has the appearance of a
19	medical facility. A pregnancy services center has the appearance of a medical
20	factility if two or more of the following factors are present.

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1	(1) The conter offers programay testing or programay diagnosis, or
2	bott-
3	(B) The center has staff or volunteers who wear medical attire or
4	uniforms.
5	(C) The center contains one or more examination tables.
6	(D) The conter contains a private or semiprivate room or area
7	containing medical supplies or medical instruments.
8	(E) The center has staff or volunteers who collect health information
9	from clients.
10	(F) The center is located on the same premises as a State-licensed
11	medical facility or provider or shares facility space with a State-licensed
12	medical provider.
13	(7) "Premises" means land and improvements or appurtenances or any
14	part thereof.
15	"health care services" means services for the diagnosis, prevention, treatment,
16	cure, or relief of a physical, dental, behavioral, or mental health condition or
17	substance use disorder, including counseling, procedures, products, devices,
18	and medications.
19	§ 2493. UNFAIR AND DECEPTIVE ACT
20	(a) It is an unfair and deceptive act and practice in commerce and a
21	violation of section 2455 of this title for any finited-services pregnancy center

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1	parson to discominate or cause to be discominated to the public any advertising
2	about the <u>health care</u> services or proposed services performed at that center in
3	this State that is untrue or clearly designed to mislead the public about the
4	nature of the services provided. Advertising includes representations made
5	directly to consumers; marketing practices; communication in any print
6	medium, such as newspapers, magazines, mailers, or handouts; and any
7	broadcast medium, such as television or radio, telephone marketing, or
8	advertising over the Internet internet such as through websites and, web ads
9	advertisements, and social media. For purposes of this chapter, advertising or
10	the provision of services by a limited services pregnancy center about health
11	<u>care services</u> is an act in commerce.
12	(b) Health care providers certified, registered, or licensed under Title 26 of
13	the Vermont Statutes Annotated who are employed by, contracted to provide
14	services for or on behalf of, or volunteer to provide services at a limited-
15	services pregnancy center shall be responsible for conducting and providing
16	health care services, information, and counseling at the center. The failure of a
17	health care professional certified, registered, or licensed under Title 26 of the
18	Vermont Statutes Annotated to conduct or to ensure that health care services,
19	information, and counseling at the limited-services pregnancy services center
20	are conducted in accordance with State law and professional standards of

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1	practice may constitute unprofessional conduct under 2 VS A § 1200 and 26
2	V.S A. § 1354. [Repealed.]
3	(c) The Attorney General has the same authority to make rules, conduct
4	civil investigations, and bring civil actions with respect to violations of
5	subsection (a) of this section as provided under subchapter 1 of this chapter.
6	Sec. 2. 18 V.S.A. § 5222 is amended to read:
7	§ 5222. REPORTS
8	(a)(1) The following fead deaths shall be reported by the hospital,
9	physician, or funeral director directly to the Commissioner within seven days
10	after delivery on forms prescribed by the Department:
11	(1)(A) All fetal deaths of 20 or more weeks of gestation or, if
12	gestational age is unknown, of 400 or more grams, 15 or more ounces, fetal
13	weight shall be reported.
14	(2)(B) All therapeutic or induced abortions, as legally authorized to be
15	performed, of any length gestation or weight shall be reported.
16	(3)(2) Spontaneous abortions and ectopic pregnancies of less than 20
17	weeks gestation are not required to be reported.
18	(b) The physician who treats a woman as a result of a miscarriage or
19	abortion shall report the fetal death if it is not known to be previously reported
20	under subsection (a) of this section. If there is evidence of violence or othe
21	unusual or suspicious circumstances, the medical examiner shall be

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1	immediately notified, and he or she the medical examiner shall complete at
2	least the medical items on the report. If a funeral director is to be involved,
3	the physician may delegate to the funeral director the responsibility for
4	completing items other than those of a medical nature. Similarly, the
5	physician may belegate the responsibility for completion of nonmedical items
6	to appropriate personnel having access to records containing the information.
7	(c) If a fetal death occurs on a moving conveyance, the place of occurrence
8	shall be given as the town or city where removal from the vehicle took place.
9	(d) Fetal death reports made pursuant to subsection (a) of this section are
10	for statistical purposes only and are not public records. They shall be kept
11	confidential and shall be destroyed after five years.
12	Sec. 3. 26 V.S.A. § 1354 is amended to read:
13	§ 1354. UNPROFESSIONAL CONDUCT
14	(a) <u>Prohibited conduct.</u> The Board shall find that any one of the following,
15	or any combination of the following, whether the conduct at issue was
16	committed within or outside the State, constitutes unprofessional conduct:
17	* * *
18	(2) all advertising of <u>health care services or a</u> medical business that is
19	intended or has a tendency to <u>confuse, mislead, or</u> deceive the public of
20	impose upon credulous or ignorant persons and so be harmful or injurious t
21	public morals or safety,

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1	
2	$(21)(\underline{A})$ permitting one's name or license to be used by a person, group,
3	or corportion when not actually in charge of or responsible for the treatment
4	given or other health care services provided;
5	(B) failing to provide active oversight over treatment or other health
6	care services that are provided using or relying upon the licensee's name or
7	license;
8	(C) failing to actively conitor the education, training, and experience of
9	individuals providing treatment coother health care services that are provided
10	using or relying upon the licensee's nome or license; or
11	(D) failing to review and approve a formation about treatment or health
12	care services that are provided using or relying upon the licensee's name or
13	license prior to communication of the information o users or potential users of
14	the treatment or services;
15	* * *
16	(29) delegation of professional responsibilities, including delivery of
17	any health care services, to a person whom the licensed profession, knows, or
18	has reason to know, is not qualified by training, experience, education,
19	licensing credentials to perform them;
20	

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1	$(22)(\Lambda)$ providing prosoribing disponsing or furnishing modical
2	services or prescription medication or prescription-only devices to a person in
3	response to any communication transmitted or received by computer or other
4	electronic means, when the licensee fails to take the following actions to
5	establish and manytain a proper physician-patient relationship:
6	(i) a reasonable effort to verify that the person requesting
7	medication is in fact the patient, and is in fact who the person claims to be;
8	(ii) establishment of documented diagnosis through the use of
9	accepted medical practices; and
10	(iii) maintenance of a current medical record;
11	(B) for the purposes of this subdivision (33), an electronic, <del>on-line</del>
12	online, or telephonic evaluation by questionnaire is inadequate for the initial
13	evaluation of the patient, except as otherwise provided in subdivision (C)(iv)
14	of this subdivision (33);
15	(C) the following would not be in violation of this subdivision (33) if
16	transmitted or received by computer or other electronic means:
17	(i) initial admission orders for newly hospitalized patients,
18	(ii) prescribing for a patient of another physician for whom the
19	presenter has taken the can,

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1	(iii) prescribing for a patient examined by a licensed advanced
2	practice registered nurse, physician assistant, or other advanced practitioner
3	authorized by law and supported by the physician;
4	(v) in furtherance of 18 V.S.A. chapter 223, prescribing
5	medication for an individual to terminate the individual's pregnancy based on
6	an adaptive question mire that allows the licensee to obtain additional medical
7	history and ask follow-up questions as needed;
8	(v) continuing medication on a short-term basis for a new patient,
9	prior to the patient's first appointment; or
10	(v)(vi) emergency situations where life or health of the patient is
11	in imminent danger;
12	* * *
13	(b) Failure to practice competently. The Board may also find that failure to
14	practice competently by reason of any cause on a single occasion or on
15	multiple occasions constitutes unprofessional conduct. Failure to practice
16	competently includes, as determined by the Board:
17	(1) performance of unsafe or unacceptable patient care; or
18	(2) failure to conform to the essential standards of acceptable and
19	prevailing practice.

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1	(a) <u>Burden of proof</u> . The burden of proof in a dissiplinary action shall be
2	on the State to show by a preponderance of the evidence that the person has
3	engaged in unprofessional conduct.
4	(d) (1) Health care providers. Notwithstanding any other law to the
5	contrary, no hearth care provider who is certified, registered, or licensed in
6	Vermont shall be subject to professional disciplinary action by the Board, nor
7	shall the Board take adverse action on an application for certification,
8	registration, or licensure of aqualified health care provider, based solely on:
9	(A)(1) the health care provider providing or assisting in the provision of
10	legally protected health care activity; or
11	$(\mathbf{B})(2)$ a criminal, civil, or disciplinary action in another state against the
12	health care provider that is based solely on the provider providing or assisting
13	in the provision of legally protected health care activity.
14	(2)(e) Definitions. As used in this subsection section:
15	(A)(1) "Health care provider" means a person who provides
16	professional health care services to an individual during that individual's
17	medical care, treatment, or confinement.
18	(B)(2) "Health care services" means services for the diagnosis,
19	prevention, treatment, cure, or relief of a physical or mental health condition.
20	metuding counseling, procedures, products, devices, and medications.

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1	(C)(2) "I agally protected health care estivity" has the same meaning as
2	in IV.S.A. § 150.
3	Sec. 4. 36 V.S.A. § 1582 is amended to read:
4	§ 1582. RECULATORY AUTHORITY; UNPROFESSIONAL CONDUCT
5	(a) The Board may deny an application for licensure, renewal, or
6	reinstatement; revoke or suspend any license to practice issued by it; or
7	discipline or in other ways condition the practice of an applicant or licensee
8	upon due notice and opportunity for hearing if the person engages in the
9	following conduct or the conduct set forth in 3 V.S.A. § 129a:
10	***
11	(3) engaging in conduct of a character likely to <u>confuse, mislead,</u>
12	deceive, defraud, or harm the public;
13	* * *
14	(9)(A) permitting one's name or license to be used by a person, group,
15	or corporation when not actually in charge of or responsible for the treatment
16	given or other health care services provided;
17	(B) failing to provide active oversight over treatment or other health
18	care services that are provided using or relying upon the licensee's name or
19	neense,

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1	(C) failing to actively monitor the advection, training, and experience of
2	individuals providing treatment or other health care services that are provided
3	using or relying upon the licensee's name or license; or
4	(D) miling to review and approve information about treatment or health
5	care services that are provided using or relying upon the licensee's name or
6	license prior to communication of the information to users or potential users of
7	the treatment or service.
8	* * *
9	(c) As used in this section, health services" means services for the
10	diagnosis, prevention, treatment, cure, or relief of a physical or mental health
11	condition, including counseling, procedures, products, devices, and
12	medications.
13	* * *
14	Sec. 5. 26 V.S.A. § 1615 is amended to read:
15	§ 1615. ADVANCED PRACTICE REGISTERED NURSES;
16	REGULATORY AUTHORITY; UNPROFESSIONAL CONDUCT
17	(a) In addition to the provisions of 3 V.S.A. § 129a and section 1582 of this
18	chapter, the Board may deny an application for licensure, renewal, r
19	reinstatement or may revoke, suspend, or otherwise discipline an advanced
20	practice registered nurse upon due notice and opportunity for hearing if the
21	person engages in the following conduct.

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1	* * *
2	(6) Providing Except as otherwise provided in subsection (b) of this
3	section, providing, prescribing, dispensing, or furnishing medical services or
4	prescription predication or prescription-only devices to a person in response to
5	any communication transmitted or received by computer or other electronic
6	means when the licencee fails to take the following actions to establish and
7	maintain a proper provide-patient relationship:
8	(A) a reasonable effort to verify that the person requesting
9	medication is in fact the patient and is in fact who the person claims to be;
10	(B) establishment of documented diagnosis through the use of
11	accepted medical practices; and
12	(C) maintenance of a current medical record.
13	* * *
14	(13)(A) Permitting one's name or license to be used by a person, group,
15	or corporation when not actually in charge of or responsible for the treatment
16	given or other health care services provided;
17	(B) failing to provide active oversight over treatment or othe health
18	care services that are provided using or relying upon the APRN's name or
19	ncense,

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1	(C) failing to actively monitor the education, training, and experience
2	of adividuals providing treatment or other health care services that are
3	provided using or relying upon the APRN's name or license; or
4	(D) failing to review and approve information about treatment or
5	health care services that are provided using or relying upon the APRN's name
6	or license prior to communication of the information to users or potential users
7	of the treatment or services.
8	(b)(1) For the purposes of subdivision (a)(6) of this section, an electronic,
9	online, or telephonic evaluation by questionnaire is inadequate for the initial
10	evaluation of the patient, except as therwise provided in subdivision (2)(D) of
11	this subsection.
12	(2) The following would not be in valuation of subdivision $(a)(6)$ of this
13	section:
14	(A) initial admission orders for newly hospitalized patients;
15	(B) prescribing for a patient of another provider for whom the
16	prescriber has taken call;
17	(C) prescribing for a patient examined by a licensed APRN,
18	physician assistant, or other practitioner authorized by law and supported by
19	the APRN;
20	(D) in furtherance of 18 V.S.A. chapter 223, prescribing medication
21	for an individual to terminate the individual's pregnancy based on an adaptive

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1	questionnaire that allows the licenses to obtain additional medical history and
2	ask follow-up questions as needed;
3	(E) continuing medication on a short-term basis for a new patient
4	prior to the patient's first appointment; or
5	(E)(F) emergency situations where the life or health of the patient is
6	in imminent danger
7	(c) As used in this section, "health services" means services for the
8	diagnosis, prevention, treatment, cure, or relief of a physical or mental health
9	condition, including counseling, procedures, products, devices, and
10	medications.
11	Sec. 6. 26 V.S.A. § 1736 is amended to read:
12	§ 1736. UNPROFESSIONAL CONDUCT
13	(a) The following conduct and the conduct described in section 1354 of
14	this title by a licensed physician assistant shall constitute unprofessional
15	conduct; when that conduct is by an applicant or person who later becomes an
16	applicant, it may constitute grounds for denial of licensure:
17	* * *
18	(2) occupational advertising or advertising about health care vervices
19	that is intended or has a tendency to <u>confuse, mislead, or</u> deceive the public;
20	(3) exercising undue influence on or taking improper advantage of a
21	person using the individual's services, or promoting the sale of professional

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1	goods or correlates in a manner that applaits a parson for the financial gain of
2	the practitioner or of a third party;
3	(4) failing to comply with provisions of federal or state statutes or rules
4	governing the profession;
5	(5) conviction of a crime related to the profession; and
6	(6) conduct that evidences unfitness to practice in the profession.
7	* * *
8	(d) As used in this section, "health services" means services for the
9	diagnosis, prevention, treatment, cure, or relief of a physical or mental health
10	condition, including counseling, procedures, products, devices, and
11	medications.
12	Sec. 7. 26 V.S.A. § 1842 is amended to read:
13	§ 1842. UNPROFESSIONAL CONDUCT
14	(a) A person licensed as an osteopathic physician under this chapter shall
15	not engage in unprofessional conduct. If such conduct is committed by an
16	applicant, it shall be grounds for denial of a license.
17	(b) Unprofessional conduct means the following conduct and conduct set
18	forth in 3 V.S.A. § 129a:
19	

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1	(0) Delegating professional responsibilities including the delivery of
2	heath care services, to a person who whom the licensee knows or has reason
3	to know is not qualified by training, experience, or licensure to perform them.
4	* * *
5	(14)(A) hermitting one's name or license to be used by a person, group,
6	or corporation when not actually in charge of or responsible for the treatment
7	or other health care services provided;
8	(B) failing to provide active oversight over treatment or other health
9	care services that are provided using or relying upon the licensee's name or
10	license;
11	(C) failing to actively monitol the education, training, and experience
12	of individuals providing treatment or other realth care services that are
13	provided using or relying upon the licensee's name or license; or
14	(D) failing to review and approve information about treatment or
15	health care services that are provided using or relying upon the licensee's
16	name or license prior to communication of the information o users or potential
17	users of the treatment or services.
18	(c) As used in this section, "health services" means services for the
19	diagnosis, prevention, treatment, cure, or relief of a physical or mental realth
20	condition, including counseling, procedures, products, devices, and
21	medications.

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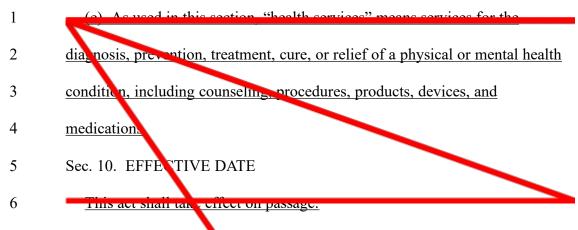
1	Sec. 8. 26 WS A & 2024 is added to read:
2	§ 2024. CONFIDENTIALITY OF PRESCRIBER INFORMATION ON
3	MEDICATIONS FOR LEGALLY PROTECTED HEALTH CARE
4	ACTIVITY
5	(a) As used in this section, "gender-affirming health care services" and
6	"reproductive health care services" have the same meanings as in 1 V.S.A.
7	<u>§ 150.</u>
8	(b) Upon the request of a prescribing practitioner and to the extent not
9	expressly prohibited under federal aw, a pharmacist shall not list the
10	practitioner's name on a fulfilled prescription for medication for gender-
11	affirming health care services or reproductive health care services but shall
12	instead list the name of the facility at which the practitioner is employed or is a
13	contract employee.
14	(c) Nothing in this chapter or the rules governing the pharmacy profession
15	shall be construed to require a pharmacist to list the prescribing practitioner's
16	name on a fulfilled prescription for medication for gender-affirming health
17	care services or reproductive health care services.
18	Sec. 9. 26 V.S.A. § 4132 is amended to read:
19	9 4132. UNINOTESSIONAL CONDUCT

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1	(a) The following conduct and conduct set for thin $2 \text{ VS} \Lambda = \S 1200$ by a
2	per on licensed as a naturopathic physician under this chapter or an applicant
3	for lice sure constitutes unprofessional conduct:
4	* * *
5	(12) Delegating professional responsibilities, including the delivery of
6	health care services to a person whom the licensee knows or has reason to
7	know is not qualified by training, experience, or licensure to perform them.
8	(13)(A) Permitting one's name or license to be used by a person, group,
9	or corporation when not actually in charge of or responsible for the treatment
10	or other health care services provided;
11	(B) failing to provide active oversight over treatment or other health
12	care services that are provided using or relying upon the licensee's name or
13	license;
14	(C) failing to actively monitor the education, training, and experience
15	of individuals providing treatment or other health care services that are
16	provided using or relying upon the licensee's name or licence; or
17	(D) failing to review and approve information about treatment or
18	health care services that are provided using or relying upon the lice see's
19	name or license prior to communication of the information to users or potential
20	users of the treatment or services.
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Sec. 1. 1 V.S.A. § 317(a) is amended to read:

(c) The following public records are exempt from public inspection and copying:

(44) Records held by the Office of Professional Regulation, Board of Medical Practice, or another public agency that issues one or more licenses, certificates, or registrations to engage in a State-regulated profession or occupation if the records contain the telephone number, email address, physical address, or mailing address, or a combination of these, of an individual who has applied for or has been granted a license, certificate, or registration to practice a profession or occupation in this State, except that the public agency shall disclose any address that the individual has designated as a public address in the record.

Sec. 2. 3 V.S.A. § 129a is amended to read:

§ 129a. UNPROFESSIONAL CONDUCT

(a) In addition to any other provision of law, the following conduct by a licensee constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of a license or other disciplinary action. Any one of the following items or any combination of items, whether the conduct at issue was committed within or outside the State, shall constitute unprofessional conduct:

(1) Fraudulent or deceptive procurement or use of a license.

(2) Advertising, including advertising about health care services, that is intended or has a tendency to deceive <u>or mislead</u>.

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(6) Delegating professional responsibilities, <u>including the delivery of</u> <u>health care services</u>, to a person whom the licensed professional knows, or has reason to know, is not qualified by <u>any combination of</u> training, experience, education, or licensing credentials to perform them, or knowingly providing professional supervision or serving as a preceptor to a person who has not been licensed or registered as required by the laws of that person's profession.

(21) Permitting one's name or license to be used by a person, group, or corporation when not actually in charge of  $\frac{\partial r}{\partial r}$  responsible for, or actively overseeing the projessional services provided.

(f)(1) Health care providers. Notwithstanding subsection (e) of this section or any other law to the contrary, no health care provider who is certified, registered, or licensed in Vermont shall be subject to professional disciplinary action by a board or the Director, nor shall a board or the Director take adverse action on an application for certification, registration, or licensure of a qualified health care provider, based solely on:

(2) Definitions. As used in this subsection:

(B) "Health care services" means services for the diagnosis, prevention, treatment, cure, or relief of a physical or mental health condition, including <u>counseling</u>, procedures, products, devices, and medications.

Sec. 3. 9 V.S.A. chapter 63, subchapter 11 is amendea to read:

Subchapter 11. Pregnancy Services Centers <u>Health Care Services</u>

§ 2491. FINDINGS; LEGISLATIVE INTENT

(a) Findings. The General Assembly finds that:

(1) Centers that seek to counsel clients against abortion, often referred to as crisis pregnancy centers or limited-services pregnancy centers, have become common across the country, including in Vermont. Accurate information about the services that a limited-services pregnancy center performs, in addition to forthright acknowledgement of its limitations, is essential to enable individuals in this State to make informed decisions about their care. This includes individuals being informed of whether they are they need to seek medical care elsewhere in order to continue or terminate a pregnancy.

(2) Although some limited-services pregnancy centers openly acknowledge in their advertising, on their websites, and at their facilities that they neither provide abortions nor refer clients to other providers of abortion services, others provide confusing and misleading information to pregnant individuals contemplating abortion by leading those individuals to believe that their facilities offer abortion services and unbiased counseling. Some limitedservices pregnancy centers have promoted patently false or biased medical claims about abortion, pregnancy, contraception, and reproductive health care providers.

(3) False and muleading advertising by centers that do not offer or refer clients for abortion is of special concern to the State because of the timesensitive and constitutionally protected nature of the decision to continue or terminate a pregnancy. When a pregnant individual is misled into believing that a center offers services that it does not in fact offer or receives false or misleading information regarding health care options, the individual loses time crucial to the decision whether to terminate a pregnancy and may lose the option to choose a particular method or to terminate a pregnancy at all.

(4) Telling the truth is how trained health care providers demonstrate respect for patients, foster trust, promote self-determination, and cultivate an environment where best practices in shared decision-making can flourish. Without veracity in information and communication, it is difficult for individuals to make informed, voluntary choices that are essential to one's sense of personal agency and autonomy.

(5)(2) Advertising strategies and educational information about health care options that lack transparency, use misleading or ambiguous terminology, misrepresent or obfuscate services provided, or provide factually inaccurate information are a form of manipulation that disrespects individuals, undermines trust, broadens health disparity, and can result in patient harm.

#### (b) Intent.

(1) It is the intent of the General Assembly to ensure that the public is provided with accurate, factual information about the types of health care services that are available to pregnant individuals in this State. The General Assembly respects the constitutionally protected right of each individual to personal reproductive autonomy, which includes the right to receive clear, honest, and nonmisleading information about the individual's options and to make informed voluntary choices after considering all relevant information prognancy centers to counsel individuals against abortion, and nothing in this subchapter should be construed to regulate, limit, or curtail such advocacy.

#### § 2492. DEFINITIONS DEFINITION

As used in this subchapter:,

(1) 'Abortion'' means any medical treatment intended to induce the termination of, or to terminate, a clinically diagnosable pregnancy except for the purpose of producing a live birth.

(2) "Client means an individual who is inquiring about or seeking services at a pregnancy services center.

(3) "Emergency contraception" means any drug approved by the U.S. Food and Drug Administration as a contraceptive method for use after sexual intercourse, whether provided over the counter or by prescription.

(4) "Health information i means any oral or written information in any form or medium that relates to health insurance or the past, present, or future physical or mental health or condition of a client.

(5) "Limited-services pregnancy center" means a pregnancy services center that does not directly provide, or provide referrals to clients for, abortions or emergency contraception.

(6) "Pregnancy services center" means a facility, including a mobile facility, where the primary purpose is to provide services to individuals who are or may be pregnant and that either offers obstetric ultrasounds, obstetric sonograms, or prenatal care to pregnant individual, or has the appearance of a medical facility. A pregnancy services center has the appearance of a medical facility if two or more of the following factors are present:

(A) The center offers pregnancy testing or pregnancy diagnosis, or both.

(B) The center has staff or volunteers who wear medical attire or uniforms.

(C) The center contains one or more examination tables.

*(D)* The center contains a private or semiprivate room or area containing medical supplies or medical instruments.

(E) The center has staff or volunteers who collect health information

*midical facility or provider or shares facility space with a State-licensed medical provider.* 

(7) "Premises" means land and improvements or appurtenances or any part thereof "health care services" means services for the diagnosis, prevention treatment, cure, or relief of a physical, dental, behavioral, or mental health condition or substance use disorder, including counseling, procedures, products, devices, and medications.

#### § 2493. UNFAIN AND DECEPTIVE ACT

(a) It is an unfair and deceptive act and practice in commerce and a violation of section 2153 of this title for any limited-services pregnancy center <u>person</u> to disseminate or cause to be disseminated to the public any advertising about the <u>health care</u> services or proposed services performed at that center in <u>this State</u> that is untrue on clearly designed to mislead the public about the nature of <u>the</u> services provaled. Advertising includes representations made directly to consumers; marketing practices; communication in any print medium, such as newspapers, magazines, mailers, or handouts; and any broadcast medium, such as television or radio, telephone marketing, or advertising over the Internet internet such as through websites and, web ads advertisements, and social media. For purposes of this chapter, advertising or the provision of services by a limited-services pregnancy center <u>about health care services</u> is an act in commerce.

(b) Health care providers certified, registered, or licensed under Title 26 of the Vermont Statutes Annotated who are employed by, contracted to provide services for or on behalf of, or volunteer to provide services at a limitedservices pregnancy center shall be responsible for conducting and providing health care services, information, and counseling at the center. The failure of a health care professional certified, registered, or licensed under Title 26 of the Vermont Statutes Annotated to conduct or to ensure that health care services, information, and counseling at the limited-services pregnancy services center are conducted in accordance with State law and professional standards of practice may constitute unprofessional conduct under 3 V.S.A. § 129a and 26 V.S.A. § 1354. [Repealed.]

(c) The Attorney General has the same authority to make rules, conduct civil investigations, and bring civil actions with respect to violations of subsection (a) of this section as provided under subchapter 1 of this chapter.

Sec. 4. 18 V.S.A. § 4999 is amended to read:

§ 4999. DEFINITIONS

(2) "Licensed health care professional," as used in 18 V.S.A. chapter 107; means a physician, a physician assistant, a naturopathic physician, or an advanced practice registered nurse. <u>As used in chapter 107 of this part only, the termalso includes a naturopathic physician.</u>

*Sec. 5. 18 V.S.A. § 5200 is amended to read: § 5200. DEFINITIONS* 

As used in this Chapter:

(4) <u>"Licensed health care professional" means a physician, a physician</u> assistant, a naturopathic physician, or an advanced practice registered nurse.

(5) "Natural organic reduction" has the same meaning as in section 5302 of this title.

Sec. 6. 18 V.S.A. § 5222 is amenaed to read:

§ 5222. REPORTS

(a)(1) The following fetal deaths shall be reported by the hospital, *physician* licensed health care professional, or funeral director directly to the Commissioner within seven days after delivery on forms prescribed by the Department:

(1)(A) All fetal deaths of 20 or more weeks of gestation or, if gestational age is unknown, of 400 or more grams, 15 or more ounces, fetal weight shall be reported.

(2)(B) All therapeutic or induced abortions, as legally authorized to be performed, of any length gestation or weight shall be reported.

(3)(2) Spontaneous abortions and ectopic pregnancies of less than 20 weeks gestation are not required to be reported.

(b) The physician licensed health care professional who treats a woman as a result of a miscarriage or abortion shall report the fetal death if it is not known to be previously reported under subsection (a) of this section. If there is evidence of violence or other unusual or suspicious circumstances, the medical examiner shall be immediately notified, and he or she the medical examiner shall complete at least the medical items on the report. If a funeral director is to be involved, the physician licensed health care professional may delegate to the funeral director the responsibility for completing items other than those of appropriate personnel having access to records containing the information.

(c) If a fetal death occurs on a moving conveyance, the place of occurrence shall be given as the town or city where removal from the vehicle took place.

(d) <u>Fetal death reports Reports made pursuant to this section</u> are for statistical purposes only and are not public records. They shall be <u>kept</u> confidential; shall not be disclosed or discoverable in any civil, criminal, administrative; or other proceeding; and shall be destroyed after five two years.

Sec. 7. 26 V.S.A. § 354 is amended to read:

#### § 1354. UNPROFESSIONAL CONDUCT

(a) <u>Prohibited conduct</u>. The Board shall find that any one of the following, or any combination of the following, whether the conduct at issue was committed within or outside the State, constitutes unprofessional conduct:

(2) all advertising of <u>about health care services or a</u> medical business that is intended or has a tendency to <u>mislead or</u> deceive the public or impose upon credulous or ignorant persons and so be harmful or injurious to public morals or safety;

(21) permitting one's name or license to be used by a person, group, or corporation when not actually in charge of,  $\psi$  responsible for, or actively overseeing the treatment given or other health care services provided;

(29) delegation of professional responsibilities, <u>including delivery of any</u> <u>health care services</u>, to a person whom the licensed professional knows, or has reason to know, is not qualified by <u>any combination of</u> maining, experience, education, or licensing credentials to perform them;

(33)(A) providing, prescribing, dispensing, or furnishing medical services or prescription medication or prescription-only devices to a person in response to any communication transmitted or received by computer or other electronic means, when the licensee fails to take the following actions to establish and maintain a proper physician-patient relationship:

(i) a reasonable effort to verify that the person requestion

(ii) establishment of accumented diagnosis intrough the use of accepted medical practices; and

(iii) maintenance of a current medical record;

(B) for the purposes of this subdivision (33), an electronic, on-line online, on telephonic evaluation by questionnaire is inadequate for the initial evaluation of the patient, except as otherwise provided in subdivision (C)(iv) of this subdivision (33);

(C) the following would not be in violation of this subdivision (33) if transmitted or received by computer or other electronic means:

(i) initial admission orders for newly hospitalized patients;

*(ii) prescribing for a patient of another physician for whom the prescriber has taken the call;* 

(iii) prescribing for a patient examined by a licensed advanced practice registered nurse, physician assistant, or other advanced practitioner authorized by law and supported by the physician;

*(iv) in furtherance of 18 V.S.A. chapter 223, prescribing medication for an individual to terminate the individual's pregnancy based on an adaptive questionnaire that allows the licensee to obtain additional medical history and ask follow-up questions as meded;* 

(v) continuing medication on a short-term basis for a new patient, prior to the patient's first appointment; or

(v)(vi) emergency situations where life or health of the patient is in imminent danger;

(b) <u>Failure to practice competently</u>. The Board may also find that failure to practice competently by reason of any cause on a single occasion or on multiple occasions constitutes unprofessional conduct. Failure to practice competently includes, as determined by the Board:

(1) performance of unsafe or unacceptable patient care;

(2) failure to conform to the essential standards of acceptable and prevailing practice.

(c) <u>Burden of proof.</u> The burden of proof in a disciplinary action shall be on the State to show by a preponderance of the evidence that the person has engaged in unprofessional conduct.

(d)<del>(1)</del> Health care providers. Notwithstanding any other law to h

sermont shall be subject to professional disciplinary action by the Board, nor shall the Board take adverse action on an application for certification, regutration, or licensure of a qualified health care provider, based solely on:

(1) the health care provider providing or assisting in the provision of legally protected health care activity; or

(B)(2), a criminal, civil, or disciplinary action in another state against the health cire provider that is based solely on the provider providing or assisting in the provision of legally protected health care activity.

(2)(e) Definitions. As used in this subsection section:

(A)(1) "Health care provider" means a person who provides professional health care services to an individual during that individual's medical care, treatment, or confinement.

(B)(2) "Health case services" means services for the diagnosis, prevention, treatment, cure, or relief of a physical or mental health condition, including <u>counseling</u>, procedures, products, devices, and medications.

(C)(3) "Legally protected health care activity" has the same meaning as in 1 V.S.A. § 150.

Sec. 8. 26 V.S.A. § 1615 is amended to read:

§ 1615. ADVANCED PRACTICE REGISTERED NURSES; REGULATORY AUTHORITY; UNIROFESSIONAL CONDUCT

(a) In addition to the provisions of 3 V.S.A. § 129a and section 1582 of this chapter, the Board may deny an application for licensure, renewal, or reinstatement or may revoke, suspend, or otherwise discipline an advanced practice registered nurse upon due notice and opportunity for hearing if the person engages in the following conduct:

(6) Providing Except as otherwise provided in subsection (b) of this section, providing, prescribing, dispensing, or furnishing medical services or prescription medication or prescription-only devices to a person in response to any communication transmitted or received by computer or other electronic means when the licensee fails to take the following actions to establish and maintain a proper provider-patient relationship:

(A) a reasonable effort to verify that the person requesting medication is in fact the patient and is in fact who the person claims to be,

(B) establishment of documented diagnosis through the use

(b)(1) For the purposes of subdivision (a)(6) of this section, an electronic, online, we telephonic evaluation by questionnaire is inadequate for the initial evaluation of the patient, except as otherwise provided in subdivision (2)(D) of this subsection.

\* \* \*

(2) The following would not be in violation of subdivision (a)(6) of this section:

(A) initial admission orders for newly hospitalized patients;

(B) prescribing for a patient of another provider for whom the prescriber has taken call,

(C) prescribing for a patient examined by a licensed APRN, physician assistant, or other practitioner authorized by law and supported by the APRN;

(D) in furtherance of 18 V.S.A. chapter 223, prescribing medication for an individual to terminate the individual's pregnancy based on an adaptive questionnaire that allows the licensee in obtain additional medical history and ask follow-up questions as needed;

(E) continuing medication on a short-term basis for a new patient prior to the patient's first appointment; or

(E)(F) emergency situations where the life or health of the patient is in imminent danger.

Sec. 9. 26 V.S.A. § 1658 is amended to read:

§ 1658. UNPROFESSIONAL CONDUCT

(a) The following conduct and the conduct described in section 1354 of this title by a certified anesthesiologist assistant constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of certification:

(17) delegating professional responsibilities to a person whon the certified professional knows, or has reason to know, is not qualified by any combination of training, experience, education, or licensing credentials to

*Set 10. 26 V.S.A. § 1736 is amended to read:* 

§ 1736. UNPROFESSIONAL CONDUCT

(a) The following conduct and the conduct described in section 1354 of this title by a dicensed physician assistant shall constitute unprofessional conduct; when that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of licensure:

(2) occupational advertising <u>or advertising about health care services</u> that is intended or has a tendency to <u>mislead or</u> deceive the public;

(3) exercising undue influence on or taking improper advantage of a person using the individual's services, or promoting the sale of professional goods or services in a manuer that exploits a person for the financial gain of the practitioner or of a third party;

(4) failing to comply with provisions of federal or state statutes or rules governing the profession;

- (5) conviction of a crime related to the profession; and
- (6) conduct that evidences unfitness to practice in the profession.

(d) As used in this section, "health care services" means services for the diagnosis, prevention, treatment, cure, or relief of a physical or mental health condition, including counseling, procedures products, devices, and medications.

*Sec.* 11. 26 *V.S.A.* § 2024 *is added to read:* 

<u>§ 2024. CONFIDENTIALITY OF PRESCRIBER INFORMATION ON</u> <u>MEDICATIONS FOR LEGALLY PROTECTED NEALTH CARE</u> <u>ACTIVITY</u>

(a) As used in this section, "gender-affirming health care services" and "reproductive health care services" have the same meanings is in 1 V.S.A.  $\S 150$ .

(b) Upon the request of a prescribing practitioner and to the extent not expressly prohibited under federal law, a pharmacist shall not list the practitioner's name on a fulfilled prescription for medication for genderaffirming health care services or reproductive health care services but shall instead list the name of the facility at which the practitioner is employed or is BILL AS INTRODUCED AND PASSED BY SENATE AND HOUSE S.28 2025 Page 34 of 49

shall be construed to require a pharmacist to list the prescribing practitioner's name on a fulfilled prescription for medication for gender-affirming health care services or reproductive health care services.

Sec. 12. 26 V.S.A § 2858 is amended to read:

§ 2858. UNPROFESSIONAL CONDUCT

(a) The following conduct and the conduct described in section 1354 of this title by a certified radiologist assistant constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for lenial of certification:

\* \* \*

(17) delegating professional responsibilities to a person whom the certified professional knows or has reason to know is not qualified by <u>any</u> <u>combination of</u> training, experience, education, or licensing credentials to perform;

\* \* \*

Sec. 13. EFFECTIVE DATE

This act shall take effect on passage

Sec. 1. 1 V.S.A. § 150 is amended to read: § 150. LEGALLY PROTECTED HEALTH CARE ACTIVITY

\* \* \*

(b)(1) "Legally protected health care activity" means:

\* \* \*

(4) The protections applicable to persons who engage in "legally protected health care activity" shall also apply to a person who has previously undertaken one or more acts or omissions while in another U.S. jurisdiction to aid or encourage, or attempt to aid or encourage, any person in the exercise and enjoyment, or attempted exercise and enjoyment, of rights to reproductive health care services or gender-affirming health care services that would have been protected by this State if they had been undertaken in this State, provided that the acts or omissions were permissible under the laws of the jurisdiction in which the person was located at the time they were undertaken.

\* \* \*

Sec. 2.  $1 V.S.A. \leq 317(c)$  is amended to read:

(c) The following public records are exempt from public inspection and copying:

\* \* \*

(44) Records held by the Office of Professional Regulation, Board of Medical Practice, or another public agency that issues one or more licenses, certificates, or registrations to engage in a State-regulated profession or occupation if the records contain the telephone number, email address, physical address, or mailing address, or a combination of these, of an individual who has applied for or has been granted a license, certificate, or registration to practice a profession or occupation in this State, except that the public agency shall disclose any address that the individual has designated as a public address in the record.

Sec. 3. 3 V.S.A. § 129a is amended to read:

§ 129a. UNPROFESSIONAL CONDUCT

(a) In addition to any other provision of law, the following conduct by a licensee constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of a license or other disciplinary action. Any one of the following items or any combination of items, whether the conduct at issue was committed within or outside the State, shall constitute unprofessional conduct:

(1) Fraudulent or deceptive procurement or use of a license.

(2) Advertising, including advertising about health care services, that is intended or has a tendency to deceive <u>or mislead</u>.

(6) Delegating professional responsibilities, including the delivery of <u>health care services</u>, to a person whom the licensed professional knows, or has reason to know, is not qualified by training, experience, education, or licensing credentials to perform them, or knowingly providing professional supervision or serving as a preceptor to a person who has not been licensed or registered as required by the laws of that person's profession.

(21) Permitting one's name or license to be used by a person, group, or corporation when not actually in charge of  $\frac{\partial r}{\partial r}$  responsible for, or actively overseeing the professional services provided.

\* \* \*

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(f)(1) Health care providers. Notwithstanding subsection (e) of this section or any other law to the contrary, no health care provider who is certified, registered, or licensed in Vermont shall be subject to professional disciplinary action by a board or the Director, nor shall a board or the Director take adverse action on an application for certification, registration, or licensure of a qualified health care provider, based solely on:

\* \* \*

(2) Definitions. As used in this subsection:

\* \* \*

(B) "Health care services" means services for the diagnosis, prevention, treatment, cure, or relief of a physical or mental health condition, including <u>counseling</u>, procedures, products, devices, and medications.

\* \* \*

Sec. 4. 9 V.S.A. chapter 63, subchapter 11 is amended to read:

Subchapter 11. Pregnancy Services Centers Health Care Services

§ 2491. FINDINGS; LEGISLATIVE INTENT

(a) Findings. The General Assembly finds that:

(1) Centers that seek to counsel clients against abortion, often referred to as crisis pregnancy centers or limited-services pregnancy centers, have become common across the country, including in Vermont. Accurate information about the services that a limited-services pregnancy center performs, in addition to forthright acknowledgement of its limitations, is essential to enable individuals in this State to make informed decisions about their care. This includes individuals being informed of whether they are receiving services from a licensed and qualified health care provider at a limited-services pregnancy center, as this allows individuals to determine if they need to seek medical care elsewhere in order to continue or terminate a pregnancy.

(2) Although some limited-services pregnancy centers openly acknowledge in their advertising, on their websites, and at their facilities that they neither provide abortions nor refer clients to other providers of abortion services, others provide confusing and misleading information to pregnant individuals contemplating abortion by leading those individuals to believe that their facilities offer abortion services and unbiased counseling. Some limitedservices pregnancy centers have promoted patently false or biased medical claims about abortion, pregnancy, contraception, and reproductive health care providers. (3) False and misleading advertising by centers that do not offer or refer clients for abortion is of special concern to the State because of the timesensitive and constitutionally protected nature of the decision to continue or terminate a pregnancy. When a pregnant individual is misled into believing that a center offers services that it does not in fact offer or receives false or misleading information regarding health care options, the individual loses time crucial to the decision whether to terminate a pregnancy and may lose the option to choose a particular method or to terminate a pregnancy at all.

(4) Telling the truth is how trained health care providers demonstrate respect for patients, foster trust, promote self-determination, and cultivate an environment where best practices in shared decision-making can flourish. Without veracity in information and communication, it is difficult for individuals to make informed, voluntary choices that are essential to one's sense of personal agency and autonomy.

(5)(2) Advertising strategies and educational information about health care options that lack transparency, use misleading or ambiguous terminology, misrepresent or obfuscate services provided, or provide factually inaccurate information are a form of manipulation that disrespects individuals, undermines trust, broadens health disparity, and can result in patient harm.

(b) Intent.

(1) It is the intent of the General Assembly to ensure that the public is provided with accurate, factual information about the types of health care services that are available to pregnant individuals in this State. The General Assembly respects the constitutionally protected right of each individual to personal reproductive autonomy, which includes the right to receive clear, honest, and nonmisleading information about the individual's options and to make informed, voluntary choices after considering all relevant information.

(2) The General Assembly respects the right of limited-services pregnancy centers to counsel individuals against abortion, and nothing in this subchapter should be construed to regulate, limit, or curtail such advocacy.

### § 2492. DEFINITIONS DEFINITION

As used in this subchapter:

(1) "Abortion" means any medical treatment intended to induce the termination of, or to terminate, a clinically diagnosable pregnancy except for the purpose of producing a live birth.

(2) "Client" means an individual who is inquiring about or seeking services at a pregnancy services center.

(3) "Emergency contraception" means any drug approved by the U.S. Food and Drug Administration as a contraceptive method for use after sexual intercourse, whether provided over the counter or by prescription.

(4) "Health information" means any oral or written information in any form or medium that relates to health insurance or the past, present, or future physical or mental health or condition of a client.

(5) "Limited-services pregnancy center" means a pregnancy services center that does not directly provide, or provide referrals to clients for, abortions or emergency contraception.

(6) "Pregnancy services center" means a facility, including a mobile facility, where the primary purpose is to provide services to individuals who are or may be pregnant and that either offers obstetric ultrasounds, obstetric sonograms, or prenatal care to pregnant individuals or has the appearance of a medical facility. A pregnancy services center has the appearance of a medical facility if two or more of the following factors are present:

(A) The center offers pregnancy testing or pregnancy diagnosis, or both.

(B) The center has staff or volunteers who wear medical attire or uniforms.

(C) The center contains one or more examination tables.

(D) The center contains a private or semiprivate room or area containing medical supplies or medical instruments.

*(E)* The center has staff or volunteers who collect health information from clients.

(F) The center is located on the same premises as a State-licensed medical facility or provider or shares facility space with a State-licensed medical provider.

(7) "Premises" means land and improvements or appurtenances or any part thereof "health care services" means all supplies, care, and services of a medical, dental, behavioral health, mental health, substance use disorder treatment, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medication.

§ 2493. UNFAIR AND DECEPTIVE ACT

(a) It is an unfair and deceptive act and practice in commerce and a violation of section 2453 of this title for any limited-services pregnancy center person to disseminate or cause to be disseminated to the public any advertising about the health care services or proposed services performed at that center in

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<u>this State</u> that is untrue or clearly designed to mislead the public about the nature of <u>the</u> services provided. Advertising includes representations made directly to consumers; marketing practices; communication in any print medium, such as newspapers, magazines, mailers, or handouts; and any broadcast medium, such as television or radio, telephone marketing, or advertising over the <u>Internet internet</u> such as through websites <del>and</del>, web <del>ads</del> <u>advertisements</u>, and <u>social media</u>. For purposes of this chapter, advertising <del>or</del> the provision of services by a limited-services pregnancy center <u>about health</u> <u>care services</u> is an act in commerce.

(b) Health care providers certified, registered, or licensed under Title 26 of the Vermont Statutes Annotated who are employed by, contracted to provide services for or on behalf of, or volunteer to provide services at a limitedservices pregnancy center shall be responsible for conducting and providing health care services, information, and counseling at the center. The failure of a health care professional certified, registered, or licensed under Title 26 of the Vermont Statutes Annotated to conduct or to ensure that health care services, information, and counseling at the limited-services pregnancy services center are conducted in accordance with State law and professional standards of practice may constitute unprofessional conduct under 3 V.S.A. § 129a and 26 V.S.A. § 1354. [Repealed.]

(c) The Attorney General has the same authority to make rules, conduct civil investigations, and bring civil actions with respect to violations of subsection (a) of this section as provided under subchapter 1 of this chapter.

Sec. 5. 12 V.S.A. § 7306 is amended to read:

#### § 7306. NONCOOPERATION

(a) No public agency or employee, appointee, officer or official, or any other person individual acting on behalf of a public agency may knowingly provide any information or expend or use time, money, facilities, property, equipment, personnel, or other resources in furtherance of any interstate or federal investigation or proceeding seeking to impose civil or criminal liability upon a person an individual or entity for:

(1) the provision, seeking or receipt of, or inquiring about legally protected health care activity that is legal in this State; or

(2) assisting any person individual or entity providing, seeking, receiving, or responding to an inquiry about legally protected health care activity that is legal in this State.

(b) This section shall not apply to:

(1) any investigation or proceeding where the conduct subject to potential liability under the investigation or proceeding would be subject to liability under the laws of this State if committed in this State;

(2) any action taken by the Judicial Branch in judicial proceedings order issued by a Vermont State court or a federal court; or

(3) a public agency or employee, appointee, officer or official, or any other individual acting on behalf of a public agency who, in the course of normal business, is responding to a warrant or extradition demand on the good faith belief that the warrant or demand is valid in this State.

Sec. 6. 18 V.S.A. § 1881 is amended to read:

§ 1881. DISCLOSURE OF PROTECTED HEALTH INFORMATION PROHIBITED

(a) As used in this section:

(1) "Business associate" has the same meaning as in 45 C.F.R. § 160.103.

(2) "Covered entity" has the same meaning as in 45 C.F.R. § 160.103.

(3) "Legally protected health care activity" has the same meaning as in 1 V.S.A. § 150.

(4) "Protected health information" has the same meaning as in 45 C.F.R. § 160.103.

(5) "Telehealth" has the same meaning as in 26 V.S.A. § 3052.

(b) A covered entity or business associate shall not disclose protected health information unless the disclosure is permitted under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

(c)(1) In Notwithstanding any provision of subsection (b) of this section to the contrary, in order to protect patients and providers who engage in legally protected health care activity and except as set forth in subdivision (2) of this subsection, a covered entity or business associate shall not disclose protected health information that is identifiable or susceptible to reidentification and is related to a legally protected health care activity:

(A) to any government entity other than the State of Vermont or its political subdivisions or instrumentalities if the covered entity or business associate has reason to believe that the information will be used:

*(i)* to conduct a criminal, civil, administrative, or professional disciplinary investigation into any individual for the mere act of seeking, obtaining, providing, or facilitating a legally protected health care activity;

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(ii) to impose criminal, civil, or administrative liability or professional disciplinary action on any individual for the mere act of seeking, obtaining, providing, or facilitating a legally protected health care activity; or

(*iii*) to identify any individual for any of the activities described in subdivision (i) or (ii) of this subdivision (A); or

<u>(B)</u> for use in a civil or criminal action; a proceeding preliminary to a civil or criminal action; or a probate, legislative, or administrative proceeding <u>unless</u>.

(2) Notwithstanding any provision of subdivision (1) of this subsection to the contrary, a covered entity or business associate may disclose protected health information that is identifiable or susceptible to reidentification and is related to a legally protected health care activity if the disclosure meets one or more of the following conditions:

(1)(A) The disclosure is authorized by the patient or the patient's conservator, guardian, or other authorized legal representative.

(2) The disclosure is specifically required by federal law, Vermont law, or rules adopted by the Vermont Supreme Court.

(3)(B) The disclosure is ordered by a court of competent jurisdiction pursuant to federal law, Vermont law, or rules adopted by the Vermont Supreme Court. An <u>A State court</u> order compelling disclosure under this subdivision (B) shall include the court's determination that <del>good cause exists</del> to require disclosure of the information related to the information will not be used to impose criminal, civil, or administrative liability or professional disciplinary action on any individual based solely on the fact that the person sought, obtained, provided, or facilitated a legally protected health care activity.

(4)(C) The disclosure is to be made to a <u>person</u> <u>business</u> <u>associate</u> designated by the covered entity or <u>the covered entity's</u> business associate and will be used solely in the defense of the covered entity or <u>the covered entity's</u> business associate against a claim that has been made, or there is a reasonable belief will be made, against the covered entity or <u>the covered entity's</u> business associate in a civil or criminal action; a proceeding preliminary to a civil or criminal action; or a probate, legislative, or administrative proceeding.

(5)(D) The disclosure is to Vermont's Board of Medical Practice or Office of Professional Regulation, as applicable, in connection with a bona fide investigation in Vermont of a licensed, certified, or registered health care provider or a bona fide investigation of whether an individual who is not licensed, certified, or registered to practice a health care profession in Vermont

engaged in unauthorized practice in this State, whether in person or through telehealth.

(6)(E) The disclosure is to the Vermont Department of Health or the Vermont Department of Disabilities, Aging, and Independent Living, or both, in connection with a bona fide investigation of a licensed health care facility in Vermont.

(F) Subject to the limitations set forth in 12 V.S.A. § 7306, the disclosure is required in the ordinary course of business of Vermont's Medicaid program.

(d) A covered entity or business associate shall not be subject to any civil, criminal, or administrative liability or professional disciplinary action for refusing to disclose protected health information that is identifiable or susceptible to reidentification and is related to a legally protected health care activity, in accordance with subsection (c) of this section.

Sec. 7. 18 V.S.A. § 4999 is amended to read:

§ 4999. DEFINITIONS

*As used in this part:* 

\* \* \*

(2) "Licensed health care professional," as used in 18 V.S.A. chapter 107, means a physician, a physician assistant, a naturopathic physician, or an advanced practice registered nurse. <u>As used in chapter 107 of this part only,</u> the term also includes a naturopathic physician.

\* \* \*

Sec. 8. 18 V.S.A. § 5200 is amended to read:

§ 5200. DEFINITIONS

*As used in this chapter:* 

\* \* \*

(4) <u>"Licensed health care professional" means a physician, a physician</u> assistant, a naturopathic physician, or an advanced practice registered nurse.

(5) "Natural organic reduction" has the same meaning as in section 5302 of this title.

Sec. 9. 18 V.S.A. § 5222 is amended to read:

§ 5222. REPORTS

(a)(1) The following fetal deaths shall be reported by the hospital, *physician* licensed health care professional, or funeral director directly to the Commissioner within seven days after delivery on forms prescribed by the Department:

(1)(A) All fetal deaths of 20 or more weeks of gestation or, if gestational age is unknown, of 400 or more grams, 15 or more ounces, fetal weight shall be reported.

(2)(B) All therapeutic or induced abortions, as legally authorized to be performed, of any length gestation or weight shall be reported.

(3)(2) Spontaneous abortions and ectopic pregnancies of less than 20 weeks gestation are not required to be reported.

(b) The physician licensed health care professional who treats a woman patient as a result of a miscarriage or abortion shall report the fetal death if it is not known to be previously reported under subsection (a) of this section. If there is evidence of violence or other unusual or suspicious circumstances, the medical examiner shall be immediately notified, and he or she the medical examiner shall complete at least the medical items on the report. If a funeral director is to be involved, the physician licensed health care professional may delegate to the funeral director the responsibility for completing items other than those of a medical nature. Similarly, the physician licensed health care professional items to appropriate personnel having access to records containing the information.

(c) If a fetal death occurs on a moving conveyance, the place of occurrence shall be given as the town or city where removal from the vehicle took place.

(d) Fetal death reports <u>Reports made pursuant to this section</u> are for statistical purposes only and are not public records. They shall be <u>kept</u> <u>confidential</u>; shall not be disclosed or discoverable in any civil, criminal, <u>administrative</u>, or other proceeding; and shall be destroyed after five two years.

Sec. 10. 26 V.S.A. § 1354 is amended to read:

§ 1354. UNPROFESSIONAL CONDUCT

(a) <u>Prohibited conduct.</u> The Board shall find that any one of the following, or any combination of the following, whether the conduct at issue was committed within or outside the State, constitutes unprofessional conduct:

\* \* \*

(2) all advertising of <u>about health care services or a</u> medical business that is intended or has a tendency to <u>mislead or</u> deceive the public or impose upon credulous or ignorant persons and so be harmful or injurious to public morals or safety;

\* \* \*

(21) permitting one's name or license to be used by a person, group, or corporation when not actually in charge of, or responsible for, or actively overseeing the treatment given or other health care services provided;

(29) delegation of professional responsibilities, including delivery of any health care services, to a person whom the licensed professional knows, or has reason to know, is not qualified by training, experience, education, or licensing credentials to perform them;

\* \* \*

(33)(A) providing, prescribing, dispensing, or furnishing medical services or prescription medication or prescription-only devices to a person in response to any communication transmitted or received by computer or other electronic means, when the licensee fails to take the following actions to establish and maintain a proper physician-patient relationship:

(*i*) a reasonable effort to verify that the person requesting medication is in fact the patient, and is in fact who the person claims to be;

*(ii) establishment of documented diagnosis through the use of accepted medical practices; and* 

(iii) maintenance of a current medical record;

(B) for the purposes of this subdivision (33), an electronic, on-line online, or telephonic evaluation by questionnaire is inadequate for the initial evaluation of the patient, except as otherwise provided in subdivision (C)(iv) of this subdivision (33);

(C) the following would not be in violation of this subdivision (33) if transmitted or received by computer or other electronic means:

*(i) initial admission orders for newly hospitalized patients;* 

*(ii) prescribing for a patient of another physician for whom the prescriber has taken the call;* 

*(iii) prescribing for a patient examined by a licensed advanced practice registered nurse, physician assistant, or other advanced practitioner authorized by law and supported by the physician;* 

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*(iv) in furtherance of 18 V.S.A. chapter 223, prescribing medication for an individual to terminate the individual's pregnancy based on an adaptive questionnaire developed by or in consultation with health care providers with clinically appropriate expertise that allows the licensee to obtain additional medical history and ask follow-up questions as needed;* 

(v) continuing medication on a short-term basis for a new patient, prior to the patient's first appointment; or

(v)(vi) emergency situations where life or health of the patient is in imminent danger;

\* \* \*

(b) <u>Failure to practice competently.</u> The Board may also find that failure to practice competently by reason of any cause on a single occasion or on multiple occasions constitutes unprofessional conduct. Failure to practice competently includes, as determined by the Board:

(1) performance of unsafe or unacceptable patient care; or

(2) failure to conform to the essential standards of acceptable and prevailing practice.

(c) <u>Burden of proof.</u> The burden of proof in a disciplinary action shall be on the State to show by a preponderance of the evidence that the person has engaged in unprofessional conduct.

(d)(1) Health care providers. Notwithstanding any other law to the contrary, no health care provider who is certified, registered, or licensed in Vermont shall be subject to professional disciplinary action by the Board, nor shall the Board take adverse action on an application for certification, registration, or licensure of a qualified health care provider, based solely on:

(A)(1) the health care provider providing or assisting in the provision of legally protected health care activity; or

(B)(2) a criminal, civil, or disciplinary action in another state against the health care provider that is based solely on the provider providing or assisting in the provision of legally protected health care activity.

(2)(e) Definitions. As used in this subsection section:

(A)(1) "Health care provider" means a person who provides professional health care services to an individual during that individual's medical care, treatment, or confinement.

(B)(2) "Health care services" means services for the diagnosis, prevention, treatment, cure, or relief of a physical or mental health condition, including <u>counseling</u>, procedures, products, devices, and medications.

(C)(3) "Legally protected health care activity" has the same meaning as in 1 V.S.A. § 150.

Sec. 11. 26 V.S.A. § 1615 is amended to read:

§ 1615. ADVANCED PRACTICE REGISTERED NURSES; REGULATORY AUTHORITY; UNPROFESSIONAL CONDUCT

(a) In addition to the provisions of 3 V.S.A. § 129a and section 1582 of this chapter, the Board may deny an application for licensure, renewal, or reinstatement or may revoke, suspend, or otherwise discipline an advanced practice registered nurse upon due notice and opportunity for hearing if the person engages in the following conduct:

\* \* \*

(6) Providing Except as otherwise provided in subsection (b) of this section, providing, prescribing, dispensing, or furnishing medical services or prescription medication or prescription-only devices to a person in response to any communication transmitted or received by computer or other electronic means when the licensee fails to take the following actions to establish and maintain a proper provider-patient relationship:

(A) a reasonable effort to verify that the person requesting medication is in fact the patient and is in fact who the person claims to be;

(B) establishment of documented diagnosis through the use of accepted medical practices; and

(C) maintenance of a current medical record.

\* \* \*

(b)(1) For the purposes of subdivision (a)(6) of this section, an electronic, online, or telephonic evaluation by questionnaire is inadequate for the initial evaluation of the patient, except as otherwise provided in subdivision (2)(D) of this subsection.

(2) The following would not be in violation of subdivision (a)(6) of this section:

(A) initial admission orders for newly hospitalized patients;

(B) prescribing for a patient of another provider for whom the prescriber has taken call;

(C) prescribing for a patient examined by a licensed APRN, physician assistant, or other practitioner authorized by law and supported by the APRN;

(D) in furtherance of 18 V.S.A. chapter 223, prescribing medication for an individual to terminate the individual's pregnancy based on an adaptive questionnaire developed by or in consultation with health care providers with clinically appropriate expertise that allows the licensee to obtain additional medical history and ask follow-up questions as needed;

(E) continuing medication on a short-term basis for a new patient prior to the patient's first appointment; or

(E)(F) emergency situations where the life or health of the patient is in imminent danger.

\* \* \*

Sec. 12. 26 V.S.A. § 1736 is amended to read:

§ 1736. UNPROFESSIONAL CONDUCT

(a) The following conduct and the conduct described in section 1354 of this title by a licensed physician assistant shall constitute unprofessional conduct; when that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of licensure:

\* \* \*

(2) occupational advertising <u>or advertising about health care services</u> that is intended or has a tendency to <u>mislead or</u> deceive the public;

(3) exercising undue influence on or taking improper advantage of a person using the individual's services, or promoting the sale of professional goods or services in a manner that exploits a person for the financial gain of the practitioner or of a third party;

(4) failing to comply with provisions of federal or state statutes or rules governing the profession;

(5) conviction of a crime related to the profession; and

(6) conduct that evidences unfitness to practice in the profession.

\* \* \*

(d) As used in this section, "health care services" means services for the diagnosis, prevention, treatment, cure, or relief of a physical or mental health condition, including counseling, procedures, products, devices, and medications.

#### Sec. 13. 26 V.S.A. § 2024 is added to read:

### <u>§ 2024. CONFIDENTIALITY OF PRESCRIBER AND PHARMACIST</u> <u>INFORMATION ON MEDICATIONS FOR LEGALLY</u> <u>PROTECTED HEALTH CARE ACTIVITY</u>

(a) As used in this section:

(1) "Gender-affirming health care services" and "reproductive health care services" have the same meanings as in 1 V.S.A. § 150.

(2) "Noncontrolled medication" means a medication that is not a controlled substance as defined in 21 U.S.C. § 802.

(b)(1) Upon the request of a prescribing practitioner and to the extent not expressly required under federal law, a pharmacist or other licensed member of the pharmacy staff shall redact or otherwise remove the practitioner's name or initials from a fulfilled prescription for a noncontrolled medication for genderaffirming health care services or reproductive health care services, and from any accompanying printed materials.

(2) A pharmacist may, or, upon the pharmacist's request, another licensed member of the pharmacy staff shall, redact or otherwise remove the pharmacist's name or initials from a fulfilled prescription for a noncontrolled medication for gender-affirming health care services or reproductive health care services, and from any accompanying printed materials.

(3) If a prescribing practitioner dispenses medication directly to patients for gender-affirming health care services or reproductive health care services, or both, the practitioner may redact or otherwise remove the practitioner's own name or initials from a fulfilled prescription for a noncontrolled medication for gender-affirming health care services or reproductive health care services, and from any accompanying printed materials.

(c) Nothing in this chapter or the rules governing the pharmacy profession shall be construed to require a pharmacist or other licensed member of a pharmacy's staff to list the prescribing practitioner's or pharmacist's name or initials on a fulfilled prescription for noncontrolled medication for genderaffirming health care services or reproductive health care services.

(d) A pharmacist or other licensed member of a pharmacy's staff shall be immune from civil and administrative liability for failing to redact or remove the name of a prescriber or pharmacist when requested to do so pursuant to subdivision (b)(1) or (2) of this section; provided, however, that this immunity shall not apply to gross negligence, recklessness, or intentional misconduct by a pharmacist or other licensed member of the pharmacy staff.

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Sec. 14. EFFECTIVE DATE This act shall take effect on passage.