

# Senate Calendar

TUESDAY, FEBRUARY 17, 2026

SENATE CONVENES AT: 9:30 A.M.

## TABLE OF CONTENTS

Page No.

### ACTION CALENDAR

#### UNFINISHED BUSINESS OF FEBRUARY 13, 2026

##### Second Reading

##### Favorable

S. 218 An act relating to reducing chloride contamination of State waters	
Natural Resources and Energy Report - Sen. Watson .....	109
Finance Report - Sen. Hardy .....	109
Appropriations Report - Sen. Watson .....	109

##### NEW BUSINESS

##### Third Reading

H. 790 An act relating to fiscal year 2026 budget adjustments.....	109
--	-----

### NOTICE CALENDAR

##### Second Reading

##### Favorable with Proposal of Amendment

H. 545 An act relating to issuing immunization recommendations	
Health and Welfare Report - Sen. Lyons .....	109

##### Report of Committee of Conference

S. 23 An act relating to the use of synthetic media in elections	
Committee of Conference Report .....	123



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**ORDERS OF THE DAY**

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**ACTION CALENDAR**

**UNFINISHED BUSINESS OF FRIDAY, FEBRUARY 13, 2026**

**Second Reading**

**Favorable**

**S. 218.**

An act relating to reducing chloride contamination of State waters.

**Reported favorably by Senator Watson for the Committee on Natural Resources and Energy.**

(Committee vote: 4-1-0)

**Reported favorably by Senator Hardy for the Committee on Finance.**

(Committee vote: 7-0-0)

**Reported favorably by Senator Watson for the Committee on Appropriations.**

(Committee vote: 6-0-1)

**NEW BUSINESS**

**Third Reading**

**H. 790.**

An act relating to fiscal year 2026 budget adjustments.

**NOTICE CALENDAR**

**Second Reading**

**Favorable with Proposal of Amendment**

**H. 545.**

An act relating to issuing immunization recommendations.

**Reported favorably with recommendation of proposal of amendment by Senator Lyons for the Committee on Health and Welfare.**

The Committee recommends that the Senate propose to the House to amend the bill by striking out all after the enacting clause and inserting in lieu thereof the following:

\* \* \* Effective on Passage until July 1, 2031: Commissioner of Health's  
Immunization Recommendations \* \* \*

Sec. 1. 18 V.S.A. § 1130 is amended to read:

§ 1130. IMMUNIZATION FUNDING

(a) As used in this section:

\* \* \*

(4) “Immunizations Recommended immunization” means vaccines a vaccine or other immunizing agent that provides protection against a particular disease or pathogen and the application of the vaccines immunization as recommended by the practice guidelines for children and adults established by the Advisory Committee on Immunization Practices (ACIP) to the Centers for Disease Control and Prevention (CDC) Commissioner pursuant to section 1130a of this title.

\* \* \*

(b)(1) The Department of ~~Health~~ shall administer an immunization program with the goals of ensuring universal access to vaccines recommended immunizations ~~for all Vermonters~~ at no charge to the individual and reducing the cost at which the State may purchase vaccines recommended immunizations. The Department shall purchase, provide for the distribution of, and monitor the use of vaccines recommended immunizations as provided for in this subsection and subsection (c) of this section. The cost of the vaccines recommended immunizations and an administrative surcharge shall be reimbursed by health insurers as provided for in subsections (e) and (f) of this section.

(2) The Department shall solicit, facilitate, and supervise the participation of health care professionals, health care facilities, and health insurers in the immunization program in order to accomplish the State's goal of universal access to recommended immunizations at the lowest practicable cost to individuals, insurers, and State health care programs.

(3) The Department shall gather and analyze data regarding the immunization program for the purpose of ensuring its quality and maximizing protection of Vermonters against diseases preventable by ~~vaccination~~ immunization.

(c) The Department shall determine which recommended immunizations shall be purchased under the program. The immunization program shall purchase vaccines recommended immunizations consistent with the goals of the program from the federal Centers for Disease Control and Prevention or

another vendor at the lowest available cost. ~~The Department shall determine annually which vaccines for adults shall be purchased under the program.~~

(d) The immunization program shall provide for distribution of the vaccines recommended immunizations to health care professionals and health care facilities for administration to patients.

(e) Health insurers shall remit to the Department the cost of vaccines recommended immunizations, as established by the Commissioner of Health based on the recommendation of the Immunization Funding Advisory Committee established in subsection (g) of this section.

(f) The Department shall charge each health insurer a surcharge for the costs and administration of the immunization program. The surcharge shall be deposited into an existing special fund and used solely for the purpose of administering the program.

(g)(1) The Immunization Funding Advisory Committee is established to provide the Commissioner of Health with an annual per-member per-month cost for vaccines recommended immunizations for the pediatric population, an annual per-member per-month cost for vaccines recommended immunizations for the adult population, and a recommendation for the amount of the yearly vaccine immunization assessment. The Committee shall comprise the following nine members:

(A) the Executive Officer of the Board of Pharmacy or designee;

(B) the Executive Director of the Green Mountain Care Board or designee;

(C) a representative, appointed by the Director of the Vermont Blueprint for Health, ~~nominated by the Director of the Blueprint and appointed by the Commissioner of Health~~;

(D) three representatives of health insurers, one ~~from each of each~~ appointed by the State's largest three private health insurers, as determined by the number of covered lives, ~~appointed by the Commissioner of Health~~;

(E) a representative, appointed by the Vermont chapter of the American Academy of Pediatrics, ~~Vermont chapter, appointed by the Commissioner of Health~~;

(F) a representative, appointed by the Vermont chapter of the American Academy of Family Medicine, ~~Vermont chapter, appointed by the Commissioner of Health~~; and

(G) a representative of employers that self-insure for health coverage, appointed by the Commissioner of Health.

(2) The Committee shall select a chair from among its members at the first meeting of each calendar year. The Committee shall receive administrative and technical support from the Department of Health.

(3) ~~By~~ On or before January 1 of each year, the Committee shall provide to the Commissioner the annual fiscal assessment and the per-member per-month cost for pediatric ~~vaccines~~ recommended immunizations based on the total number of pediatric covered lives reported by health insurers and the per-member per-month cost for adult ~~vaccines~~ recommended immunizations based on the total number of adult covered lives reported by health insurers.

(h) If ~~federal~~ purchase requirements do not further the goal of ensuring universal access to ~~vaccines~~ recommended immunizations for all, the Commissioner may, following consultation with the Immunization Funding Advisory Committee, discontinue the program with six months' advance notice to all health care professionals and to all health insurers with Vermont covered lives.

(i) The Department may adopt rules under 3 V.S.A. chapter 25 to implement this section.

Sec. 2. 18 V.S.A. § 1130a is added to read:

§ 1130a. RECOMMENDED IMMUNIZATIONS

(a) The Commissioner shall periodically issue recommendations regarding:

(1) which immunizations children and adults are recommended to receive;

(2) the age at which each immunization is recommended to be given;

(3) the number of immunization doses that are recommended to be administered;

(4) the recommended amount of time between doses of an immunization; and

(5) any other recommendations regarding immunizations necessary to promote the maintenance of public health and disease prevention in the State.

(b) Prior to issuing recommendations under subsection (a) of this section, the Commissioner shall:

(1) consult with the Vermont Immunization Advisory Council, established under section 1131 of this title; and

(2) consider recommendations for immunizations issued by the Centers for Disease Control and Prevention's Advisory Committee on Immunization

Practices (ACIP), the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP), the American College of Obstetricians and Gynecologists (ACOG), the American College of Physicians (ACP), and any other organizations the Commissioner may deem necessary.

(c) A health care professional who prescribes, dispenses, or administers an immunization in accordance with the recommendations issued pursuant to subsection (a) of this section shall be immune from civil and administrative liability for immunization-caused adverse events, unless the health care professional's actions regarding prescribing, dispensing, or administering an immunization constituted gross negligence, recklessness, or intentional misconduct.

(d) The Commissioner may issue a standing order authorizing health care professionals, including pharmacists, to prescribe, dispense, or administer recommended immunizations, or any combination thereof, to the extent that prescribing, dispensing, or administering recommended immunizations is within the scope of the health care professional's practice.

(e)(1) The Department shall prominently display information pertaining to recommended immunizations and other relevant information on its website, including how to access recommended immunizations.

(2) Any documents produced by the Department about the recommended immunizations shall include a disclosure if the recommended immunizations differ from the recommendations of the Vermont Immunization Advisory Council.

(f) As used in this section, "health care professional" and "recommended immunization" have the same meanings as in section 1130 of this title.

Sec. 3. 18 V.S.A. § 1131 is amended to read:

§ 1131. VERMONT IMMUNIZATION ADVISORY COUNCIL

(a) Creation. There is created the Vermont Immunization Advisory Council for the purpose of providing education policy, medical, and epidemiological expertise and advice to the Department with regard to the safety of immunizations and immunization schedules.

(b) Membership. The Council shall be composed of the following members:

(1) ~~a representative~~ the executive officer of the Vermont Board of Medical Practice, ~~appointed by the Governor or designee;~~

(2) ~~the Secretaries~~ Secretary of Human Services ~~and of or designee;~~

- (3) the Secretary of Education or their designees designee;
- (3)(4) a representative of public schools, appointed by the Governor;
- (4)(5) the State epidemiologist Epidemiologist or designee;
- (6) the Department of Health's Immunization Program Manager or designee;
- (7) a practicing pediatrician, appointed by the Governor;
- (8) two individuals who are professors, researchers, or physicians, or any combination of these individuals, with expertise in infectious disease and human immunizations, appointed by the Governor;
- (9) a family or internal medicine physician, appointed by the Governor;
- (5)(10) a representative of both public and independent schools, appointed by the Governor; and practicing advanced practice registered nurse licensed pursuant to 26 V.S.A. chapter 28, appointed by the Governor;
- (11) a practicing pharmacist licensed pursuant 26 V.S.A. chapter 36, appointed by the Governor; and
- (6)(12) any other persons deemed necessary by the Commissioner.

(c) Powers and duties Duties.

(1) The Council shall:

(1)(A) review and make recommendations regarding the State's immunization schedule for attendance in schools and child care facilities; and

(2)(B) provide any other advice and expertise requested by the Commissioner, including advice regarding recommended immunizations as defined in section 1130 of this title.

(2) The Secretary of Education or designee and representative of public schools shall not vote on advice regarding recommended immunizations as defined in section 1130 of this title.

(d) Assistance. The Council shall have the administrative, and technical, and legal assistance of the Department.

(e) Meetings.

(1) The Council shall convene at the call of the Commissioner, but ~~no~~ not less than once each year.

(2) The Council shall select a chair from among its members at the first meeting who shall not be the Commissioner.



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

\* \* \* Effective on Passage until July 1, 2031: Insurance Coverage for  
Commissioner of Health's Recommended Immunizations \* \* \*

Sec. 4. 8 V.S.A. § 4042 is amended to read:

§ 4042. GROUP INSURANCE POLICIES; REQUIRED POLICY  
PROVISIONS

\* \* \*

(b) Protections for covered individuals.

\* \* \*

(4) No cost sharing for preventive services.

(A) A group insurance policy shall not impose any co-payment,  
coinsurance, or deductible requirements for:

\* \* \*

(ii) recommended immunizations for routine use in children,  
adolescents, and adults that have in effect a recommendation from the  
Advisory Committee on Immunization Practices of the Centers for Disease  
Control and Prevention with respect to the individual involved as defined in  
18 V.S.A. § 1130;

\* \* \*

Sec. 5. 33 V.S.A. § 1811 is amended to read:

§ 1811. HEALTH BENEFIT PLANS FOR INDIVIDUALS AND SMALL  
EMPLOYERS

\* \* \*

(d)(1) Guaranteed issue.

\* \* \*

(5)(A) No cost sharing for preventive services. A health benefit plan  
shall not impose any co-payment, coinsurance, or deductible requirements for:

\* \* \*

(ii) recommended immunizations for routine use in children,  
adolescents, and adults that have in effect a recommendation from the  
Advisory Committee on Immunization Practices of the Centers for Disease  
Control and Prevention with respect to the individual involved as defined in 18  
V.S.A. § 1130;

\* \* \*

\* \* \* Effective on Passage until July 1, 2031: Pharmacist and Pharmacy Technician Authority under the Commissioner of Health's Immunization Recommendations \* \* \*

Sec. 6. 26 V.S.A. § 2023 is amended to read:

§ 2023. CLINICAL PHARMACY; PRESCRIBING

\* \* \*

(b) A pharmacist may prescribe in the following contexts:

\* \* \*

(2) State protocol.

(A) A pharmacist may prescribe, order, or administer in a manner consistent with valid State protocols that are approved by the Commissioner of Health after consultation with the Director of Professional Regulation and the Board and the ability for public comment:

- (i) opioid antagonists;
- (ii) epinephrine auto-injectors;
- (iii) tobacco cessation products;
- (iv) tuberculin purified protein derivative products;
- (v) self-administered hormonal contraceptives, including subcutaneous depot medroxyprogesterone acetate;
- (vi) dietary fluoride supplements;
- (vii) recommended immunizations as defined in 18 V.S.A. § 1130 for patients 18 years of age or older, ~~vaccinations recommended by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) and administered consistently with the ACIP-approved immunization schedules, as may be amended from time to time;~~
- (viii) for patients five years of age or older, influenza ~~vaccine~~ immunization, COVID-19 ~~vaccine~~ immunization, and subsequent formulations or combination products thereof consistent with the recommendations established in accordance with 18 V.S.A. § 1130a;

\* \* \*

Sec. 7. 26 V.S.A. § 2042a is amended to read:

§ 2042a. PHARMACY TECHNICIANS; QUALIFICATIONS FOR REGISTRATION

\* \* \*

(c) Pharmacy technicians shall only administer immunizations:

(1) when a licensed pharmacist who is trained to immunize is present and able to assist with the immunization, as needed;

(2) pursuant to:

(A) a valid prescription by a practitioner;

(B) a standing order made by the Commissioner of Health; or

(C) a protocol approved by the Commissioner of Health under subdivision 2023(b)(2)(A) of this title; and

(3) to patients;

(A) 18 years of age or older, as established in subdivision 2023(b)(2)(A)(vii) and the resulting State protocol; and

~~(2)(B) to patients five years of age or older, seeking an influenza vaccine immunization, COVID-19 vaccine immunization, and subsequent formulations or combination products thereof, in accordance with subdivision 2023(b)(2)(A)(viii) and the resulting State protocol;~~

~~(3) pursuant to the schedules and recommendations of the Advisory Committee on Immunization Practices' recommendations for the administration of immunizations, as those recommendations may be updated from time to time; and~~

~~(4) when a licensed pharmacist who is trained to immunize is present and able to assist with the immunization, as needed.~~

(d) Pharmacy technicians shall administer only those immunizations that:

~~(1) are recommended by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP); and~~

~~(2) licensed pharmacists are permitted to administer under the State clinical pharmacy protocol, as established in subdivision 2023(b)(2) of this title.~~

(e) Pharmacy technicians performing COVID-19 tests shall do so only:

(1) when a licensed pharmacist who is trained to perform COVID-19 tests is present and able to assist with the test, as needed;

(2) in accordance with a State protocol adopted under subdivision 2023(b)(2)(A)(x) of this title; and

(3) in accordance with rules adopted by the Board.

~~(f)~~(e) The Board may adopt rules regarding the administration of immunizations and the performance of COVID-19 tests by pharmacy technicians.

\* \* \* Effective on July 1, 2031: Restoring Certain Immunization  
Recommendation Processes \* \* \*

Sec. 8. 18 V.S.A. § 1130 is amended to read:

§ 1130. IMMUNIZATION FUNDING

(a) As used in this section:

\* \* \*

(4) “~~Recommended immunization~~ Immunization” means a vaccine or other immunizing agent that provides protection against a particular disease or pathogen and the application of the immunizations as recommended by the practice guidelines for children and adults established by the ~~Commissioner pursuant to section 1130a of this title~~ Advisory Committee on Immunization Practices (ACIP) to the Centers for Disease Control and Prevention (CDC).

\* \* \*

(b)(1) The Department of Health shall administer an immunization program with the goals of ensuring universal access to ~~recommended~~ immunizations at no charge to the individual and reducing the cost at which the State may purchase ~~recommended~~ immunizations. The Department shall purchase, provide for the distribution of, and monitor the use of ~~recommended~~ immunizations as provided for in this subsection and subsection (c) of this section. The cost of the ~~recommended~~ immunizations and an administrative surcharge shall be reimbursed by health insurers as provided for in subsections (e) and (f) of this section.

(2) The Department shall solicit, facilitate, and supervise the participation of health care professionals, health care facilities, and health insurers in the immunization program in order to accomplish the State’s goal of universal access to ~~recommended~~ immunizations at the lowest practicable cost to individuals, insurers, and State health care programs.

(3) The Department shall gather and analyze data regarding the immunization program for the purpose of ensuring its quality and maximizing protection of Vermonters against diseases preventable by immunization.

(c) ~~The Department shall determine which recommended immunizations shall be purchased under the program.~~ The immunization program shall purchase ~~recommended~~ immunizations ~~consistent with the goals of the program~~ from the federal Centers for Disease Control and Prevention ~~or~~

~~another vendor~~ at the lowest available cost. The Department shall determine annually which immunizations for adults shall be purchased under the program.

(d) The immunization program shall provide for distribution of the ~~recommended~~ immunizations to health care professionals and health care facilities for administration to patients.

(e) Health insurers shall remit to the Department the cost of ~~recommended~~ immunizations, as established by the Commissioner based on the recommendation of the Immunization Funding Advisory Committee established in subsection (g) of this section.

(f) The Department shall charge each health insurer a surcharge for the costs and administration of the immunization program. The surcharge shall be deposited into an existing special fund and used solely for the purpose of administering the program.

(g)(1) The Immunization Funding Advisory Committee is established to provide the Commissioner with an annual per-member per-month cost for ~~recommended~~ immunizations for the pediatric population, an annual per-member per-month cost for ~~recommended~~ immunizations for the adult population, and a recommendation for the amount of the yearly immunization assessment. The Committee shall comprise the following nine members:

\* \* \*

(2) The Committee shall select a chair from among its members at the first meeting of each calendar year. The Committee shall receive administrative and technical support from the Department.

(3) On or before January 1 of each year, the Committee shall provide to the Commissioner the annual fiscal assessment and the per-member per-month cost for pediatric ~~recommended~~ immunizations based on the total number of pediatric covered lives reported by health insurers and the per-member per-month cost for adult ~~recommended~~ immunizations based on the total number of adult covered lives reported by health insurers.

(h) If federal purchase requirements do not further the goal of ensuring universal access to ~~recommended~~ immunizations for all, the Commissioner may, following consultation with the Immunization Funding Advisory Committee, discontinue the program with six months' advance notice to all health care professionals and to all health insurers with Vermont covered lives.

(i) The Department may adopt rules under 3 V.S.A. chapter 25 to implement this section.

Sec. 9. 18 V.S.A. § 1131 is amended to read:

§ 1131. VERMONT IMMUNIZATION ADVISORY COUNCIL

(a) Creation. There is created the Vermont Immunization Advisory Council for the purpose of providing education policy, medical, and epidemiological expertise and advice to the Department with regard to the safety of immunizations and immunization schedules.

\* \* \*

(c) Duties.

~~(1)~~ The Council shall:

~~(A)(1)~~ review and make recommendations regarding the State's immunization schedule for attendance in schools and child care facilities; and

~~(B)(2)~~ provide any other advice and expertise requested by the Commissioner, ~~including advice regarding recommended immunizations as defined in section 1130 of this title.~~

~~(2) The Secretary of Education or designee and representative of public schools shall not vote on advice regarding recommended immunizations as defined in section 1130 of this title.~~

\* \* \*

(e) Meetings.

(1) The Council shall convene at the call of the Commissioner, but not less than once each year.

(2) The Council shall select a chair from among its members at the first meeting ~~who shall not be the Commissioner.~~

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

\* \* \* Effective on July 1, 2031: Restoring the Current Insurance Coverage for Immunizations in Effect Prior to Passage \* \* \*

Sec. 10. 8 V.S.A. § 4042 is amended to read:

§ 4042. GROUP INSURANCE POLICIES; REQUIRED POLICY PROVISIONS

\* \* \*

(b) Protections for covered individuals.

\* \* \*

(4) No cost sharing for preventive services.

(A) A group insurance policy shall not impose any co-payment, coinsurance, or deductible requirements for:

\* \* \*

(ii) recommended immunizations as defined in 18 V.S.A. § 1130 for routine use in children, adolescents, and adults that have in effect a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention with respect to the individual involved;

\* \* \*

Sec. 11. 33 V.S.A. § 1811 is amended to read:

§ 1811. HEALTH BENEFIT PLANS FOR INDIVIDUALS AND SMALL EMPLOYERS

\* \* \*

(d)(1) Guaranteed issue.

(A) A registered carrier shall guarantee acceptance of all individuals and their dependents for any health benefit plan offered by the carrier in the individual market, regardless of any outstanding premium amount a subscriber may owe to the carrier for coverage provided during the previous plan year.

\* \* \*

(5)(A) No cost sharing for preventive services. A health benefit plan shall not impose any co-payment, coinsurance, or deductible requirements for:

\* \* \*

(ii) recommended immunizations as defined in 18 V.S.A. § 1130 for routine use in children, adolescents, and adults that have in effect a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention with respect to the individual involved;

\* \* \*

\* \* \* Effective on July 1, 2031: Restoring Current Pharmacist and Pharmacy Technician Authority in Effect Prior to Passage \* \* \*

Sec. 12. 26 V.S.A. § 2023 is amended to read:

§ 2023. CLINICAL PHARMACY; PRESCRIBING

\* \* \*

(b) A pharmacist may prescribe in the following contexts:

\* \* \*

(2) State protocol.

(A) A pharmacist may prescribe, order, or administer in a manner consistent with valid State protocols that are approved by the Commissioner of Health after consultation with the Director of Professional Regulation and the Board and the ability for public comment:

- (i) opioid antagonists;
- (ii) epinephrine auto-injectors;
- (iii) tobacco cessation products;
- (iv) tuberculin purified protein derivative products;
- (v) self-administered hormonal contraceptives, including subcutaneous depot medroxyprogesterone acetate;
- (vi) dietary fluoride supplements;
- (vii) ~~recommended immunizations as defined in 18 V.S.A. § 1130~~ for patients 18 years of age or older, vaccinations recommended by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) and administered consistently with the ACIP-approved immunization schedules, as may be amended from time to time;
- (viii) for patients five years of age or older, influenza immunization vaccine, COVID-19 immunization vaccine, and subsequent formulations or combination products thereof consistent with the recommendations established in accordance with 18 V.S.A. § 1130a;

\* \* \*

Sec. 13. [Deleted.]

\* \* \* Effective on July 1, 2031: Repeal of Immunization Recommendations

\* \* \*

Sec. 14. REPEAL; IMMUNIZATION RECOMMENDATIONS

18 V.S.A. § 1130a (recommended immunizations) is repealed on July 1, 2031.

\* \* \* Effective Dates \* \* \*

Sec. 15. EFFECTIVE DATES

- (a) This section, Secs. 1–7, and Sec. 14 shall take effect on passage.
- (b) Secs. 8–13 shall take effect on July 1, 2031.



(Committee vote: 5-0-0)

(For House amendments, see House Journal of January 22, 2026, pages 2832-2846)

## **Report of Committee of Conference**

### **S. 23.**

An act relating to the use of synthetic media in elections.

To the Senate and House of Representatives:

The Committee of Conference to which were referred the disagreeing votes of the two Houses upon Senate Bill entitled:

**S.23** An act relating to the use of synthetic media in elections

Respectfully report that they have met and considered the same and recommends that the Senate recede from its proposal of amendment to the House proposal of amendment and that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 17 V.S.A. chapter 35, subchapter 4 is added to read:

#### Subchapter 4. Use of Synthetic Media in Elections

#### § 2031. DEFINITIONS

As used in this subchapter:

(1) “Deceptive and fraudulent synthetic media” means synthetic media that appears to a reasonable person to be a realistic representation of:

(A) a political candidate that injures the reputation of a political candidate; or

(B) an individual that attempts to unduly influence the outcome of an election, including a public question, by providing materially false information to voters.

(2) “Synthetic media” means an image, an audio recording, or a video recording of an individual’s appearance, speech, or conduct that has been created or intentionally manipulated with the use of digital technology, including artificial intelligence.

#### § 2032. DISCLOSURE OF DECEPTIVE AND FRAUDULENT SYNTHETIC MEDIA

(a) Disclosure. A person shall not, within 90 days before an election in Vermont, publish, communicate, or otherwise distribute synthetic media that the person knows is deceptive and fraudulent synthetic media unless the person

includes a disclosure in the synthetic media stating: “This media has been manipulated or generated by digital technology and depicts speech or conduct that did not occur.”

(1) For deceptive and fraudulent synthetic media consisting of images and video recordings, the text of the disclosure shall appear in a size that is easily readable by the average viewer and inclusive to the greatest extent possible of individuals with disabilities. For video recordings, the disclosure shall appear for the full duration of the video recording.

(2) For deceptive and fraudulent synthetic media consisting of audio recordings only, the disclosure shall be read in a clearly spoken manner and in a pitch and pace that can be easily heard by the average listener and inclusive to the greatest extent possible of individuals with disabilities, at the beginning of the audio recording, at the end of the audio recording, and, if the audio is greater than two minutes in length, interspersed within the audio recording at intervals of not greater than two minutes each.

(b) Exceptions. Subsection (a) of this section shall not apply to:

(1) a radio or television broadcasting station, including a cable or satellite television operator, programmer, or producer, or to a website, streaming platform, or mobile application, that:

(A) broadcasts deceptive and fraudulent synthetic media as part of a bona fide newscast, news interview, news documentary, commentary of general interest, or on-the-spot coverage of bona fide news events, provided the broadcast clearly acknowledges through content or a disclosure, in a manner that can be easily heard or read by the average listener or viewer, that there are questions about the authenticity of the deceptive and fraudulent synthetic media;

(B) is paid to broadcast deceptive and fraudulent synthetic media; or

(C) is required by federal law to broadcast advertisements from legally qualified candidates;

(2) a website or a regularly published newspaper, magazine, or other periodical of general circulation, including an internet or electronic publication, that routinely carries news and commentary of general interest, and that publishes deceptive and fraudulent synthetic media, if the publication clearly states that the deceptive and fraudulent synthetic media does not accurately represent the speech or conduct of the represented individual;

(3) a person that produces or distributes deceptive and fraudulent synthetic media constituting satire or parody;

(4) a provider of a telecommunications service or information service, as those terms are defined in the Communications Act of 1934, 47 U.S.C. § 153, for content provided by another person; or

(5) a provider of an interactive computer service, as defined in 47 U.S.C. § 230, for content provided by another person.

#### § 2033. PENALTIES

(a) A person that knowingly and intentionally violates a provision of this subchapter shall be fined not more than \$1,000.00, unless:

(1) the person commits the violation with the intent to cause violence or bodily harm, in which case the fine shall be not more than \$5,000.00;

(2) the person commits the violation within five years after one or more prior violations under this section, in which case the fine shall be not more than \$10,000.00; or

(3) the person commits the violation with the intent to cause violence or bodily harm and the person commits the violation within five years after one or more prior violations under this section, in which case the fine shall be not more than \$15,000.00.

(b) A candidate whose appearance, speech, conduct, or environment is misrepresented through the use of deceptive and fraudulent synthetic media in violation of section 2032 of this title may seek injunctive or other equitable relief prohibiting the publication, communication, or other distribution of such deceptive and fraudulent synthetic media.

Sec. 2. 17 V.S.A. chapter 35, subchapter 5 is added to read:

#### Subchapter 5. Enforcement and Investigation

#### § 2041. ENFORCEMENT

In addition to the other remedies provided in this chapter, a State's Attorney or the Attorney General may institute any appropriate action, injunction, or other proceeding to prevent, restrain, correct, or abate any violation of this chapter.

#### § 2042. CIVIL INVESTIGATIONS

(a)(1) The Attorney General or a State's Attorney, whenever there is reason to believe any person to be or to have been in violation of this chapter, may examine or cause to be examined by any designated agent or representative any books, records, papers, memoranda, or physical objects of any nature bearing upon each alleged violation and may demand written responses under oath to questions bearing upon each alleged violation.

(2) The Attorney General or a State's Attorney may require the attendance of such person or of any other person having knowledge in the premises in the county where such person resides or has a place of business or in Washington County if such person is a nonresident or has no place of business within the State and may take testimony and require proof material for that person's information and may administer oaths or take acknowledgment in respect of any book, record, paper, or memorandum.

(3) The Attorney General or a State's Attorney shall serve notice of the time, place, and cause of such examination or attendance or notice of the cause of the demand for written responses personally or by certified mail upon such person at that person's principal place of business or, if such place is not known, to that person's known address. Such notice shall include a statement that a knowing and intentional violation of this chapter is subject to criminal prosecution.

(4) Any book, record, paper, memorandum, or other information produced by any person pursuant to this section shall not, unless otherwise ordered by a court of this State for good cause shown, be disclosed to any person other than the authorized agent or representative of the Attorney General or a State's Attorney or another law enforcement officer engaged in legitimate law enforcement activities unless with the consent of the person producing the same, except that any transcript of oral testimony, written responses, documents, or other information produced pursuant to this section may be used in the enforcement of this chapter, including in connection with any civil action brought under this subchapter or subsection (c) of this section.

(5) Nothing in this subsection is intended to prevent the Attorney General or a State's Attorney from disclosing the results of an investigation conducted under this section, including the grounds for the decision as to whether to bring an enforcement action alleging a violation of this chapter or of any rule made pursuant to this chapter.

(6) This subsection shall not be applicable to any criminal investigation or prosecution brought under the laws of this or any state.

(b)(1) A person upon whom a notice is served pursuant to the provisions of this section shall comply with its terms unless otherwise provided by the order of a court of this State.

(2) Any person that, with intent to avoid, evade, or prevent compliance, in whole or in part, with any civil investigation under this section, removes from any place; conceals, withholds, or destroys; or mutilates, alters, or by any other means falsifies any documentary material in the possession, custody, or

control of any person subject to such notice or mistakes or conceals any information shall be fined not more than \$5,000.00.

(c)(1) Whenever any person fails to comply with any notice served upon that person under this section or whenever satisfactory copying or reproduction of any such material cannot be done and the person refuses to surrender the material, the Attorney General or a State's Attorney may file, in the Superior Court in the county in which the person resides or of that person's principal place of business or in Washington County if the person is a nonresident or has no principal place of business in this State, and serve upon the person a petition for an order of the court for the enforcement of this section.

(2) Whenever any petition is filed under this section, the court shall have jurisdiction to hear and determine the matter so presented and to enter any order or orders as may be required to carry into effect the provisions of this section. Any disobedience of any order entered under this section by any court shall be punished as a contempt of the court.

(d) Any person aggrieved by a civil investigation conducted under this section may seek relief from Washington Superior Court or the Superior Court in the county in which the aggrieved person resides. Except for cases the court considers to be of greater importance, proceedings before Superior Court as authorized by this section shall take precedence on the docket over all other cases.

### Sec. 3. EFFECTIVE DATE

This act shall take effect on passage.

*SEN. BRIAN P. COLLAMORE  
SEN. TANYA C. VYHOVSKY  
SEN. JOHN S. MORLEY III*

*Committee on the part of the Senate*

*REP. MATTHEW J. BIRONG Jr.  
REP. LISA A. HANGO  
REP. CHEA WATERS EVANS*

*Committee on the part of the House*

## **PUBLIC HEARING**

### **Announcement: Joint Public Hearing on the Governor's Recommended FY 2027 Budget**

The Vermont House and Senate Committees on Appropriations will hold a **joint public hearing on Thursday, February 19, 2026, at 5:00 p.m.** in Room 11 of the State House. Interested parties may attend the hearing in person or virtually.

The Committees will take testimony on the Governor's recommended budget at the above date and time. **Anyone interested in testifying must sign up in advance of the hearing through the following online form not later than 10:00 a.m. on February 19, 2026, for the hearing.** Registration will be first-come, first-served and will be limited to 40 people. For those planning to testify, instructions on how to access and participate in the hearing will be sent once you have signed up for the hearing.

Online sign-up form: <https://legislature.vermont.gov/links/public-hearing-on-fy27-budget>

**For those not planning to testify, the hearing will be available to watch live on YouTube at the following link:**

<https://legislature.vermont.gov/committee/streaming/house-appropriations>

Written testimony is encouraged and can be submitted electronically through email at [testimony@vtleg.gov](mailto:testimony@vtleg.gov) or mailed to the House Committee on Appropriations, c/o Autumn Crabtree, 115 State Street, Montpelier, VT 05633. For more information about the format of the event, contact Autumn Crabtree at [Autumn.Crabtree@vtleg.gov](mailto:Autumn.Crabtree@vtleg.gov) or Elle Oille-Stanforth at [Elle.Oille-Stanforth@vtleg.gov](mailto:Elle.Oille-Stanforth@vtleg.gov)

## **NOTICE OF JOINT ASSEMBLY**

**Thursday, February 19, 2026 - 10:30 A.M. – House Chamber -** Election of an Adjutant and Inspector General, and of two (2) trustees for the Vermont State Colleges Corporation.

The following rules shall apply to the conduct of these elections:

First: All nominations for these offices will be presented in alphabetical order prior to voting.

Second: There will be only one nominating speech of not more than three (3) minutes and not more than two seconding speeches of not more than one (1) minute each for each nominee.

### **JFO NOTICE**

Grants and Positions that have been submitted to the Joint Fiscal Committee by the Administration, under 32 V.S.A. §5(b)(3):

**JFO #3271:** \$218,385.00 to the Vermont Center for Crime Victim Services from the U.S. Department of Justice. Funds will be used to consolidate data into one case management system.

*[Received January 27, 2026]*

**JFO #3272:** \$195,053,740.00 to the Vermont Agency of Human Services, Central Office from the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Participation in the Rural Health Transformation Plan (RHTP) will help to ensure long-term health care system sustainability in Vermont. This grant includes two (2) limited-service positions (LSP): one (1) Health Care Reform Integration Manager to the Office of Health Care Reform and one (1) Financial Manager II to the Agency of Human Services Central Office. Both limited positions are expected to last through 9/30/2031.

*[Received January 27, 2026]*

### **FOR INFORMATION ONLY**

#### **CROSSOVER DATES**

The Joint Rules Committee established the following crossover deadlines:

(1) All **Senate/House** bills must be reported out of the last committee of reference (including the Committees on Appropriations and Finance/Ways and Means, except as provided below in (2) and the exceptions listed below) on or before **Friday, March 13, 2026**, and filed with the Secretary/Clerk so they may be placed on the Calendar for Notice the next legislative day. - Committee bills must be voted out of Committee by **Friday, March 13, 2026**.

(2) All **Senate/House** bills referred pursuant to Senate Rule 31 or House Rule 35(a) to the Committees on Appropriations and Finance/Ways and Means must be reported out by the last of those committees on or before **Friday, March 20, 2026**, and filed with the Secretary/Clerk so they may be placed on the Calendar for Notice the next legislative day.

**Note:** The Senate will not act on bills that do not meet these crossover deadlines, without the consent of the Senate Rules Committee.

**Exceptions to the foregoing deadlines include the major money bills (the General Appropriations Bill (“The Big Bill”), the Transportation Capital Bill, the Capital Construction Bill, and the Fee/Revenue Bills).**