

# Journal of the Senate

WEDNESDAY, APRIL 8, 2026

Pursuant to the Senate Rules, in the absence of the President, the Senate was called to order by the President *pro tempore*.

## Devotional Exercises

A moment of silence was observed in lieu of devotions.

## Message from the House No. 43

A message was received from the House of Representatives by Ms. Courtney Reckord, its Second Assistant Clerk, as follows:

Mr. President:

I am directed to inform the Senate that:

The Governor has informed the House that on April 6, 2026, he approved and signed a bill originating in the House of the following title:

**H. 50.** An act relating to identifying underutilized State buildings and land.

## Committee Relieved of Further Consideration; Bill Committed

**H. 949.**

On motion of Senator Bongartz, the Committee on Education was relieved of further consideration of House bill entitled:

An act relating to homestead property tax yields, the nonhomestead property tax rate, and technical changes to education finance,  
and the bill was committed to the Committee on Finance.

## Proposal of Amendment; Third Reading Ordered

**H. 237.**

Senator Gulick, for the Committee on Health and Welfare, to which was referred House bill entitled:

An act relating to prescribing by doctoral-level psychologists.

Reported recommending 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:

Sec. 1. 26 V.S.A. § 3001 is amended to read:

§ 3001. DEFINITIONS

As used in this chapter:

(1) “Practice of psychology” means rendering or offering to render to individuals, groups, or organizations, for a consideration, any service involving the application of principles, methods, and procedures of understanding, predicting, and influencing behavior that are primarily drawn from the science of psychology. The science of psychology includes assessment, diagnosis, prevention, and amelioration of adjustment problems and emotional and mental disorders of individuals and groups.

(2) “Psychologist” or “practicing psychologist” means a person who is licensed to practice psychology under this chapter.

(3) “Psychologist-doctorate” means a person who is so licensed under this chapter.

(4) “Psychologist-master” means a person who is so licensed under this chapter.

(5) “Board” means the Board of Psychological Examiners established under this chapter.

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(12) “Collaborating practitioner” means a physician licensed to practice medicine pursuant to chapter 23 or 33 of this title with a specialty in psychiatry.

(13) “Drug” has the same meaning as in section 2022 of this title.

(14) “DSM” means the Diagnostic and Statistical Manual of Mental Disorders current at the time of practice.

(15) “Prescribing psychologist” means a licensed, doctoral-level psychologist who has undergone specialized training, has passed an examination as determined by rule, and has received a current prescribing specialty under section 3019 of this title that has not been revoked or suspended by the Board.

(16) “Prescription drug” has the same meaning as in section 2022 of this title.

(17) “Prescriptive authority” means the authority to prescribe or discontinue prescription drugs solely for the purpose of diagnosing, treating, or managing a condition recognized in the DSM. Prescriptive authority excludes the authority to:

(A) dispense, administer, or distribute prescription drugs; and

(B) prescribe or discontinue prescription drugs for patients who are less than 18 years of age, over 80 years of age, or pregnant.

Sec. 2. 26 V.S.A. § 3009a is amended to read:

§ 3009a. POWERS AND DUTIES OF BOARD

(a) The Board shall adopt rules necessary to perform its duties under this chapter, including rules that:

(1) specify educational and other prerequisites for obtaining licensure;

~~(2) explain complaint and appeal procedures to licensees, applicants, and the public;~~

~~(3) explain continuing education requirements; and~~

(3) regulate prescribing psychologist licensees pursuant to section 3019 of this title, including:

(A) the settings of clinical rotations;

(B) the minimum requirements for the curriculum of a postdoctoral psychopharmacology program; and

(C) prescriptive authority, including the designation of conditions and drugs excluded from that authority, as well as requirements for the prescribing of particular drugs; and

~~(4) explain how the Board shall investigate suspected unprofessional conduct~~ regulate collaborative practice agreements pursuant to section 3019 of this title, including collaborating practitioner qualifications and annual competency evaluations.

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Sec. 3. 26 V.S.A. § 3019 is added to read:

§ 3019. PRESCRIBING BY DOCTORAL-LEVEL PSYCHOLOGISTS  
SPECIALTY

(a) Prescribing psychologist specialty. A psychologist-doctorate may apply to the Board for a prescribing psychologist specialty. The application shall be made in a manner approved by the Board and include the payment of any required fees.

(b) Specialty by examination. A psychologist-doctorate shall be eligible for the prescribing specialty if the psychologist-doctorate:

(1) holds a current license to practice psychology at the doctoral level in the State;

(2) has successfully completed a postdoctoral training program in psychopharmacology designated by the American Psychological Association or its successor;

(3) has completed clinical rotations over a total of not less than 14 months in not less than five practice settings, to include psychiatry, geriatrics, family or internal medicine, emergency medicine, and neurology;

(4) has completed a national certifying exam, as determined by rule; and

(5) meets all other requirements for obtaining a prescribing psychologist specialty, as determined by rule.

(c) Criteria for prescribing medication.

(1) A written collaborative agreement is required for all prescribing psychologists practicing under a prescribing psychologist specialty issued pursuant to this section.

(2) The issuance of prescriptive authority by a collaborating practitioner to a prescribing psychologist shall only include prescription drugs for the treatment of mental health conditions that the collaborating practitioner generally provides to patients in the normal course of practice.

(3) The collaborating practitioner shall file the collaborative agreement with the Board and notice of any termination of the agreement.

(4) Issuance of prescribing authority for Schedule II–V controlled substances shall identify the specific controlled substance by brand name or generic name. Prescription or administration of a controlled substance by injection shall not be allowed.

(d) Specialty by endorsement. The Director of the Board may, upon payment of any required fee, grant a prescribing specialty without examination if:

(1) the applicant holds active psychologist prescribing authority in another U.S. or Canadian jurisdiction; and

(2) the requirements for psychologist prescribing authority in that jurisdiction are, in the judgment of the Director, substantially equivalent to the requirements of this section.

## Sec. 4. REPORT; PRESCRIBING PSYCHOLOGISTS

On or before November 15, 2032, the Office of Professional Regulation shall submit a written report to the House Committee on Health Care and to the Senate Committee on Health and Welfare regarding:

(1) the number of psychologists with a prescribing specialty pursuant to 26 V.S.A. § 3019;

(2) the status of available collaborative practitioners; and

(3) whether any updates to the qualifications of prescribing psychologists are necessary to expand access to care while also ensuring public protection.

## Sec. 5. EFFECTIVE DATES

(a) This section and Sec. 2 (power and duties of the Board) shall take effect on July 1, 2026.

(b) All remaining sections shall take effect on July 1, 2029.

And that the bill ought to pass in concurrence with such proposal of amendment.

Senator Brock, for the Committee on Finance, to which the bill was referred, reported recommending that the Senate propose to the House that the bill be amended as recommended by the Committee on Health and Welfare with the following amendment thereto:

In Sec. 1, 26 V.S.A. § 3001, in subdivision (17)(B), by striking out the following: “, over 80 years of age,”

And that the bill ought to pass in concurrence with such proposal of amendment.

Thereupon, Senator Brock moved to substitute a report for the report of the Committee on Finance, as follows:

Senator Brock, for the Committee on Finance, to which the bill was referred, reported recommending that the bill ought to pass when amended as recommended by the Committee on Health and Welfare.

Which was agreed to.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, the proposal of amendment of the Committee on Health and Welfare was agreed to, and third reading of the bill was ordered.

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**Third Reading Ordered****H. 733.**

Senator Mattos, for the Committee on Finance, to which was referred House bill entitled:

An act relating to designating a franchise relationship.

Reported that the bill ought to pass in concurrence.

Thereupon, the bill was read the second time by title only pursuant to Rule 43, and third reading of the bill was ordered.

**Bill Passed in Concurrence with Proposal of Amendment****H. 508.**

House bill of the following title was read the third time and passed in concurrence with proposal of amendment:

An act relating to approval of amendments to the charter of the City of Burlington.

**House Proposal of Amendment Concurred In****S. 210.**

House proposal of amendment to Senate bill entitled:

An act relating to access to autopsy reports.

Was taken up.

The House proposes to the Senate to amend the bill as follows:

In Sec. 1, 18 V.S.A. § 505, in subsection (b), by striking out subdivision (2) in its entirety and inserting in lieu thereof a new subdivision (2) to read as follows:

(2)(A) An individual who is not authorized to receive the autopsy report pursuant to subdivision (1) of this subsection (b) may petition the Probate Division of the Superior Court for a copy of the autopsy report. The petition shall contain an affidavit attesting to the petitioner's relationship to the decedent and the reason the petitioner is seeking the autopsy report. The petitioner shall notify the Office of the Chief Medical Examiner and the State's Attorney of the county in which the death occurred within five days after filing the petition. The Office and the State's Attorney shall have an opportunity to respond within 14 days after notice. If the Superior Court finds that the petitioner has demonstrated good cause for the petitioner to obtain the autopsy report, it shall order the Office of the Chief Medical Examiner to provide a

copy to the petitioner, in whole or in part, and may place restrictions on the petitioner's dissemination of the copy provided.

(B) In determining good cause under subdivision (A) of this subdivision (b)(2), the Superior Court shall consider:

(i) the relationship of the petitioner to the decedent and decedent's family;

(ii) whether the disclosure is necessary for the public evaluation of governmental performance;

(iii) the seriousness of intrusion into the decedent and decedent family's privacy;

(iv) whether the disclosure is by the least intrusive means available, including whether and to what degree redaction of some portions of the autopsy report is appropriate;

(v) the availability of similar information in other public records regardless of form; and

(vi) whether the disclosure interferes with an ongoing criminal investigation.

(C) Nothing in this subdivision (2) shall prohibit a petitioner from refileing a petition for a copy of an autopsy report upon a material change in information.

Thereupon, the question, Shall the Senate concur in the House proposal of amendment?, was decided in the affirmative.

### **Adjournment**

On motion of Senator Lyons, the Senate adjourned until one o'clock in the afternoon on Thursday, April 9, 2026.