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**State of Vermont**  
**Office of the Secretary of State**  
**Office of Professional Regulation**  
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**Sarah Copeland Hanzas, Secretary of State**  
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**Jennifer B. Colin, Director**

**January 16, 2026**

**To: Hon. Matthew Birong, Chair**  
**House Committee on Government Operations and Military Affairs**

**From: S. Lauren Hibbert, Deputy Secretary of State**  
**Jennifer B. Colin, Director, Office of Professional Regulation**

**Re: H.588, An act relating to professions and occupations regulated by the**  
**Office of Professional Regulation**

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Thank you for the opportunity to testify on H.588, this year's OPR Bill.

### **Overview**

As you know, the Office of Professional Regulation (OPR) is a public protection agency that regulates 53 diverse and wide-ranging professions and occupations. Over 80,000 individuals and businesses have credentials issued by OPR, including accountants, mental health practitioners, engineers, midwives, notaries public, physical therapists, veterinarians, osteopathic physicians, radiologic technologists, nurses, and many others. OPR's employees work each day to issue credentials to qualified professionals so they may enter the Vermont workforce. We also enforce professional conduct and practice standards through our complaint and disciplinary processes. OPR works with professional boards and advisors to ensure competent practice and safety for patients, clients, and customers.

We recently shared with you OPR's legislative priorities for this year. Our focus centers on:

- creating new professional pathways;
- removing unnecessary regulatory barriers; and
- strengthening public protection.

### **Title 3 – General Provisions**

Sec. 1. 3 V.S.A. § 123, Duties of Office. This provision sets forth the duties of OPR and is amended in the following subparts:

(a)(3) Include “rescinding” a credential.

OPR administratively rescinds credentials when payment for the credential does not clear due to insufficient funds of the applicant, when a credential is erroneously issued due to an administrative error, or when a qualification is removed. In such instances, the agency administratively rescinds the credential, notifies the licensee of the action and the reason for the action, and provides the licensee the opportunity to seek review of the rescission. This measure strengthens public protection by allowing the agency to rescind a credential that the practitioner is not qualified to have.

(a)(14) Include establishing a voluntary alternative to discipline program for all professions through administrative rules.

OPR currently has an alternative to discipline program in one profession, nursing. We want to make this process available in all professions because it strengthens public protection by encouraging practitioners to be accountable for meeting practice standards and maintaining their safety in practice. The program has two paths:

- For professionals who have engaged in deficient practice in a minor way, with approval from the Office, they can voluntarily remediate the issue through measures such as additional training or coursework. Once successfully remediated, the complaint filed against the practitioner is closed. Practice remediation is not typically allowed for licensees who have had multiple complaints; and,
- For professionals who have substance or alcohol issues who have not had a complaint filed against them, with approval from the Office, they can contact OPR and voluntarily submit to monitoring for an agreed-upon period of time. This program requires the practitioner to seek an evaluation, agree to a treatment plan, engage in treatment and random drug/alcohol testing by an approved entity, and agree to monitoring by OPR. If the individual fails to comply with the program contract, they are terminated from the program and may be referred for disciplinary action.

Sec. 2. 3 V.S.A. § 128, Disciplinary Action to Be Reported to the Office. This statute establishes the mandatory requirements for health care facilities in Vermont to report to OPR any disciplinary action taken by the facility to limit or condition a licensee’s privilege to practice in the facility, including suspension or expulsion.

(a)(3) The circumstances requiring reporting will be more easily understood with a minor amendment changing two negatives to a positive:

*“This section shall ~~not~~ apply to cases of resignation, separation from service, or changes in privileges that are ~~unrelated~~-related to:....”*

Sec. 3. 3 V.S.A. § 129a, Unprofessional Conduct. This statute identifies conduct that is unprofessional for all OPR-regulated professions.

(a)(1) The amendment adds “attempted” fraudulent or deceptive procurement or use of a license to the statute. This change strengthens public protection, in particular, against applicants who have tried to obtain a license through fraud or deceit.

(g) This revision allows the Director to adopt rules permitting licensees to enter a voluntary program as an alternative to the disciplinary process. Again, the two intended program participants are licensees who self-report substance use disorder and licensees with complaints regarding minor practice deficiencies.

Sec. 4. 3 V.S.A. § 129b, Board Member and Advisor Appointments.

(a) This revision requires board members and advisors to be of the age of majority. Board members and advisors are required to take an oath and sign a code of ethics. They act as jurors on disciplinary cases against professionals that include murder, physical and sexual abuse, substance use, drug diversion, abuse of minors, and other highly sensitive issues. Board members also engage in confidential deliberative sessions to determine outcomes of those cases. These are all duties that should be conducted by legal adults.

Sec. 5. 3 V.S.A. § 137, Uniform Process for Foreign Credential Verification. In 2019, the legislature authorized OPR to adopt rules for the verification of credentials issued outside of U.S. jurisdictions. At that time, OPR’s process for denying credentials that unqualified individuals applied for included a step called a “preliminary denial,” which was authorized in 3 V.S.A. § 129(e). In 2023, the General Assembly revised the qualifications denial process in § 129(e) to eliminate the “preliminary denial” step. However, that change was not carried through to this reference in §137.

(d) This amendment does not change the foreign credentialing process in any way. It simply reflects the change in process for license denials by eliminating reference to “preliminary.”

## Title 26: Professions and Occupations

Chapter 12: Dentists, Dental Therapists, Dental Hygienists, and Dental Assistants  
Sec. 6. 26 V.S.A. § 603, Limited Academic Dental License. This revision creates a new professional pathway for dentists. The new credential offers dental faculty a limited scope license to practice dentistry at a teaching facility. We are asking for a slight revision of the proposed language.

- (a)(1) The teaching facility must be accredited by the American Dental Association to grant doctoral degrees in dental medicine or dental surgery.
- (2) The practice of dentistry must be under the supervision of a dentist who is fully licensed in good standing. We also are requesting to add “in Vermont” to (2):

*“(2) under the general supervision of a dentist who is fully licensed in good standing **in Vermont.**”*

- (b) The qualifications for the license include:
  - (1) being appointed as a full-time dental instructor of an accredited dental program;
  - (2) hold a dental degree sufficient for licensure by examination as set forth in the dental statutes; and
  - (3) complete required courses in emergency office procedure or CPR.
- (c) A limited academic dental licensee is not eligible to get specialties for sedation or general anesthesia
- (d) A licensee is required to notify OPR if they are terminated from their position of full-time instructor within 48 hours because full-time instructor status is a qualification of the credential.
- (e) To renew, a licensee must:
  - (1) complete renewal requirements in statute, including renew every two years, meet active practice requirements, complete 30 or more continuing approved education hours; and
  - (2) continue as a full-time instructor of an accredited program

Sec. 7. 26 V.S.A. § 662, Fees.

- (a)(2) There is no initial or renewal fee for this new limited academic dental license.

Sec. 8. 26 V.S.A. Chapter 105, Massage Therapists, Bodyworkers, and Touch Professionals. From the last legislative session, the General Assembly gave OPR the task of working with stakeholders regarding a credential for the regulation of massage establishments. The stakeholders included the Vermont Chapter of the American Association of Massage Therapists, the Vermont Network against Domestic and Sexual Violence, the Department of State's Attorneys and Sheriffs, and others. At the conclusion of this work, the Office recommends registration as the appropriate credential for massage establishments.

§ 5401(A)(2) Defines an "Establishment" as any location where the practice of massage or bodywork is regularly engaged.

(B) Strikes the redundant definition of "place of business" since an "establishment" is broadly defined.

§ 5403 Includes in the Unauthorized Practice language an individual who owns or operates an unregistered establishment.

§ 5404(c) Exempts from registration locations that are not establishments as defined in § 5401 and is a location the massage therapist and the client agree in advance is acceptable.

§ 5404(d) Exempts from establishment registration a location where the practice of massage is provided by a solo practitioner or an individual who is exempt from registering.

§ 5411 Duties of the Director

(b)(3)-(4) Revisions include changing gendered pronouns to neutral terms.

(b)(5) Authorizes OPR to adopt rules limiting the applicability of the chapter as to establishments operated within private homes.

§ 5423 Establishments

(a) Requires an establishment to register and to ensure lawful operation. If it does not register, operating the establishment constitutes unauthorized practice, which may be prosecuted in various ways set forth in 3 V.S.A. § 127.

(b) Allows OPR to prosecute an establishment for unprofessional conduct or unauthorized practice.

(c) Allows OPR to include in an application:

- (1) the management and ownership of the business;
- (2) the name, location, and any licensing history of past or present establishments under the same management or ownership;
- (3) the physical location and ownership of the premises;
- (4) proof of business registration with the Business Services Division of the Secretary of State's Office; and
- (5) other information required by rule.

(d) Authorizes OPR to deny a registration application for an establishment located where unprofessional conduct has previously occurred, even if under different ownership or management. A denial shall follow the same procedure as a denial for unprofessional conduct.

We request a change in this subsection to correct the statutory reference. The procedures for denial are set forth in 3 V.S.A. § 129:

*"A denial on the basis shall follow the same procedures as a denial for unprofessional conduct under 3 V.S.A. § ~~128~~ 129."*

(e) Authorizes OPR to inspect an establishment, including prior to registration.

#### § 5426 Display of Registration

Revisions require an establishment to conspicuously display the registrations of the establishment and the massage therapists, bodyworkers, or touch professionals practicing in the establishment.

#### §5427 Unprofessional Conduct

In addition to OPR's unprofessional conduct statute in Title 3 that applies to all professions, this section contains profession-specific definitions of unprofessional conduct, including:

- (2) engaging in sexual conduct as defined in criminal statutes while at an establishment or while purportedly engaging in the practice of massage or bodywork;
- (3) meeting a client at an establishment for the purpose of sexual conduct; and
- (7) engaging in the practice of massage or bodywork at an unregistered establishment.

#### Sec. 9. 13 V.S.A. §2638, Immunity from Liability.

This statute provides immunity from criminal prosecution for specified crimes to individuals who are victims of human trafficking or involved in prostitution and are reporting a crime or witnesses to a crime.

(11) Added to include immunity from prosecution for unauthorized practice of massage or bodywork.

#### Sec. 10. 26 V.S.A. chapter 85, Midwives.

The amendment to the Midwives statute accomplishes two things:

(1) Eliminates the Midwife Advisory Committee from § 4185, which was originally intended to report to OPR and the Commissioner of Health on matters relating to midwifery and recommended changes to the rules. This advisory committee has been challenging for staff, and it has been years since we were able to maintain the committee with two physicians. Also, the committee is fairly duplicative of the advisors we already have appointed for this profession.

(2) Allows OPR to revise by rule the individual practice data requirements for renewal. Currently, extensive individual practice data on each home birth must be submitted to OPR each year in the renewal process. The change in § 4187(d) provides that OPR *may* require submission of individual practice data and includes examples of what may be required. It also allows OPR to designate another recipient of the practice data, which would potentially be the Vermont Department of Health.

This amendment does not change any reporting requirements midwives currently have to report births to VDH, nor does it change the peer review process required when an adverse outcome or transfer to a hospital occurs in a midwife-attended birth.

Sec. 11. 26 V.S.A. § 2023, Clinical Pharmacy; Prescribing.

Under current Vermont law, pharmacists can prescribe, and pharmacists and pharmacy technicians can administer, only vaccines that are recommended by the CDC's Advisory Council on Immunization Practices (ACIP). 26 V.S.A. §§ 2023(b)(2)(A)(vii); 2042a(c); 2042a(d). If ACIP says a vaccine should be based on "shared decision making" between a patient and their doctor, then it is not ACIP-recommended.

When pharmacy immunization protocols were established, ACIP was the consistent, nationally recognized authority providing evidence-based vaccine recommendations. However, that is no longer true. Earlier this year, ACIP stopped recommending any vaccines for COVID to anyone under age 65, including pregnant persons, or measles-mumps-rubella-varicella (MMRV) for anyone. This had an immediate impact on Vermont. For COVID, OPR and VDH were able to mitigate this impact by updating the standing COVID vaccine protocol to remove all ACIP references. We do not have that solution for other vaccines, generally, because the underlying statute is tied to ACIP.

§ 2023(b)(2)(A) revisions to clinical pharmacy prescribing would solve this problem by removing references to ACIP from our pharmacy licensing statutes. Instead, pharmacists would be able to prescribe any vaccine to patients over 18 that are approved by the Commissioner of Health as part of State protocols, as well as the COVID/flu vaccine to patients over 5. This is essentially what they were doing before ACIP's recommendations changed, and it worked well. The new legislation allows the Commissioner to recommend immunizations based on those of both ACIP and other nationally recognized, non-ACIP health authorities.

You may be aware that H.545 is a bill that allows the Commissioner of the Vermont Department of Health to set state protocols for recommended by immunizations based not only on ACIP recommendations but also recommendations from other health authorities and the Vermont Advisory Council on Immunizations. This bill will be effective on passage and is anticipated to move quickly. They've amended the bill to include these revisions to the pharmacy statute that are in the OPR bill. Our preference is to keep this language in both bills until one of them is passed.

Sec. 12. 26 V.S.A. § 2042a, Pharmacy Technicians; Qualifications for Registration.

Along the same lines as the clinical pharmacy prescribing changes just referenced, the ability of pharmacy technicians to administer immunizations has been limited to ACIP-recommended vaccines. When ACIP recently changed its recommendations on the COVID vaccine, the authorization for pharmacy technicians to administer COVID vaccines disappeared immediately.

The revisions to § 2042(c)(3) eliminate the requirement that immunizations must be ACIP recommended for pharmacy technicians to administer them.

Sec. 13. 26 V.S.A. § 1211, Funeral Services.

After the addition of alkaline hydrolysis and natural organic reduction to funeral statutes, there was some confusion regarding whether those practices fell within the authority of a licensed funeral director, or whether they needed a disposition facility operator license as well.

§ 1211(a)(6)(G) specifically includes in the practice of funeral service disposing of dead human bodies by cremation, alkaline hydrolysis, or natural organic reduction.

We also are recommending slight changes in wording in other funeral statutes to be clearer.

Sec. 14. 26 V.S.A. Chapter 55, Psychologists.

Temporary Psychologist Licensure Rules. These new provisions regarding temporary rules were added to provide OPR with authority to consult with the Board of Psychological Examiners to allow for greater flexibility for master's and doctoral degree applicants to supplement post-graduate coursework in order to obtain a license from OPR.

OPR has received a petition for rulemaking under 3 V.S.A. § 806 to allow more opportunity for post-graduate supplementation of coursework for psychology Master's and Doctoral graduates. The current allowance restricts supplementation to 6 credit hours total, with no more than 3 credits allowed in any one required subject matter area. The Mental Health Professional Licensing Study [Report](#) completed by OPR last year identified that overly restrictive coursework supplementation rules create unnecessary barriers for individuals to pursue licensure in mental health professions and may disparately impact individuals from marginalized communities. The proposed language below would allow OPR to develop and implement policies permitting supplementation. This is intended as a stopgap measure until we can complete rulemaking in the profession.

OPR's preference for a proposed solution would allow OPR to develop policies in consultation with the Board, permitting supplementation of coursework for master's and doctoral degree license applicants. The current Section 14 language is not OPR's preferred solution and we would ask that section to be stricken as written.



OPR's preferred language would be added as a new (d) to § 3011a. Applications, as follows:

*(d) The Director of the Office of Professional Regulation may, notwithstanding any contrary Board rule, develop and implement policies permitting supplementation of a master's or doctoral degree under 26 V.S.A. § 3011a(a)(2). Such policies must be:*

- (1) developed in consultation with the Board and the Vermont Psychological Association;*
- (2) made available to the public;*
- (3) consistent with 26 V.S.A. ch. 57; and*
- (4) effective only until July 1, 2033, or until the Board next updates its administrative rules.*