TO THE	HOUSE	OF REP	RESENTA	ATIVES:

- The Committee on Health Care to which was referred Senate Bill No. 28
  entitled "An act relating to access to certain legally protected health care
  services" respectfully reports that it has considered the same and recommends
- 5 that the House propose to the Senate that the bill be amended by striking out all
- 6 after the enacting clause and inserting in lieu thereof the following:
- 7 Sec. 1. 1 V.S.A. § 317(c) is amended to read:
- 8 (c) The following public records are exempt from public inspection and copying:

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11 (44) Records held by the Office of Professional Regulation, Board of 12 Medical Practice, or another public agency that issues one or more licenses, 13 certificates, or registrations to engage in a State-regulated profession or 14 occupation if the records contain the telephone number, email address, 15 physical address, or mailing address, or a combination of these, of an 16 individual who has applied for or has been granted a license, certificate, or 17 registration to practice a profession or occupation in this State, except that the 18 public agency shall disclose any address that the individual has designated as a 19 public address in the record.

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

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2	§ 129a. UNPROFESSIONAL CONDUCT
3	(a) In addition to any other provision of law, the following conduct by a
4	licensee constitutes unprofessional conduct. When that conduct is by an
5	applicant or person who later becomes an applicant, it may constitute grounds
6	for denial of a license or other disciplinary action. Any one of the following
7	items or any combination of items, whether the conduct at issue was
8	committed within or outside the State, shall constitute unprofessional conduct:
9	(1) Fraudulent or deceptive procurement or use of a license.
10	(2) Advertising, including advertising about health care services, that is

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intended or has a tendency to deceive or mislead.

(6) Delegating professional responsibilities, including the delivery of 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, 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.

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1	(21) Permitting one's name or license to be used by a person, group, or
2	corporation when not actually in charge of or responsible for, or actively
3	overseeing the professional services provided.
4	* * *
5	(f)(1) Health care providers. Notwithstanding subsection (e) of this section
6	or any other law to the contrary, no health care provider who is certified,
7	registered, or licensed in Vermont shall be subject to professional disciplinary
8	action by a board or the Director, nor shall a board or the Director take adverse
9	action on an application for certification, registration, or licensure of a
10	qualified health care provider, based solely on:
11	* * *
12	(2) Definitions. As used in this subsection:
13	* * *
14	(B) "Health care services" means services for the diagnosis,
15	prevention, treatment, cure, or relief of a physical or mental health condition,
16	including counseling, procedures, products, devices, and medications.
17	* * *
18	Sec. 3. 9 V.S.A. chapter 63, subchapter 11 is amended to read:
19	Subchapter 11. Pregnancy Services Centers Health Care Services
20	§ 2491. FINDINGS; LEGISLATIVE INTENT
21	(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 limited services 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 time-

sensitive 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

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1	Assembly respects the constitutionally protected right of each individual to
2	personal reproductive autonomy, which includes the right to receive clear,
3	honest, and nonmisleading information about the individual's options and to
4	make informed, voluntary choices after considering all relevant information.
5	(2) The General Assembly respects the right of limited services
6	pregnancy centers to counsel individuals against abortion, and nothing in this
7	subchapter should be construed to regulate, limit, or curtail such advocacy.
8	§ 2492. DEFINITIONS DEFINITION
9	As used in this subchapter:
0	(1) "Abortion" means any medical treatment intended to induce the
.1	termination of, or to terminate, a clinically diagnosable pregnancy except for
2	the purpose of producing a live birth.
.3	(2) "Client" means an individual who is inquiring about or seeking
4	services at a pregnancy services center.
.5	(3) "Emergency contraception" means any drug approved by the U.S.
6	Food and Drug Administration as a contraceptive method for use after sexual
7	intercourse, whether provided over the counter or by prescription.
.8	(4) "Health information" means any oral or written information in any
9	form or medium that relates to health insurance or the past, present, or future
20	physical or mental health or condition of a client.

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1	(5) "Limited-services pregnancy center" means a pregnancy services
2	center that does not directly provide, or provide referrals to clients for,
3	abortions or emergency contraception.
4	(6) "Pregnancy services center" means a facility, including a mobile
5	facility, where the primary purpose is to provide services to individuals who
6	are or may be pregnant and that either offers obstetric ultrasounds, obstetric
7	sonograms, or prenatal care to pregnant individuals or has the appearance of a
8	medical facility. A pregnancy services center has the appearance of a medical
9	facility if two or more of the following factors are present:
10	(A) The center offers pregnancy testing or pregnancy diagnosis, or
11	<del>both.</del>
12	(B) The center has staff or volunteers who wear medical attire or
13	uniforms.
14	(C) The center contains one or more examination tables.
15	(D) The center contains a private or semiprivate room or area
16	containing medical supplies or medical instruments.
17	(E) The center has staff or volunteers who collect health information
18	from clients.
19	(F) The center is located on the same premises as a State licensed
20	medical facility or provider or shares facility space with a State-licensed
21	medical provider.

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- 1 (7) "Premises" means land and improvements or appurtenances or any 2 part thereof "health care services" means services for the diagnosis, 3 prevention, treatment, cure, or relief of a physical, dental, behavioral, or mental 4 health condition or substance use disorder, including counseling, procedures, 5 products, devices, and medications. 6 § 2493. UNFAIR AND DECEPTIVE ACT 7 (a) It is an unfair and deceptive act and practice in commerce and a 8 violation of section 2453 of this title for any limited services pregnancy center 9 person to disseminate or cause to be disseminated to the public any advertising 10 about the health care services or proposed services performed at that center in 11 this State that is untrue or clearly designed to mislead the public about the 12 nature of the services provided. Advertising includes representations made 13 directly to consumers; marketing practices; communication in any print 14 medium, such as newspapers, magazines, mailers, or handouts; and any 15 broadcast medium, such as television or radio, telephone marketing, or 16 advertising over the Internet internet such as through websites and, web ads 17 advertisements, and social media. For purposes of this chapter, advertising or 18 the provision of services by a limited services pregnancy center about health 19 care services 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 limited-
services 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
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. As used in chapter 107 of this part only,
the term also includes a naturopathic physician.

\* \* \*

1	Sec. 5. 18 V.S.A. § 5200 is amended to read:
2	§ 5200. DEFINITIONS
3	As used in this chapter:
4	* * *
5	(4) "Licensed health care professional" means a physician, a physician
6	assistant, a naturopathic physician, or an advanced practice registered nurse.
7	(5) "Natural organic reduction" has the same meaning as in section 5302
8	of this title.
9	Sec. 6. 18 V.S.A. § 5222 is amended to read:
10	§ 5222. REPORTS
11	(a)(1) The following fetal deaths shall be reported by the hospital,
12	physician licensed health care professional, or funeral director directly to the
13	Commissioner within seven days after delivery on forms prescribed by the
14	Department:
15	(1)(A) All fetal deaths of 20 or more weeks of gestation or, if gestational
16	age is unknown, of 400 or more grams, 15 or more ounces, fetal weight shall
17	be reported.
18	(2)(B) All therapeutic or induced abortions, as legally authorized to be
19	performed, of any length gestation or weight shall be reported.
20	(3)(2) Spontaneous abortions and ectopic pregnancies of less than 20
21	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 may delegate the responsibility for completion of nonmedical 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 Reports made pursuant to this section are for statistical purposes only and are not public records. They shall be kept confidential; shall not be disclosed or discoverable in any civil, criminal, administrative, or other proceeding; and shall be destroyed after five two years.

1	Sec. 7. 26 V.S.A. § 1354 is amended to read:
2	§ 1354. UNPROFESSIONAL CONDUCT
3	(a) <u>Prohibited conduct.</u> The Board shall find that any one of the following,
4	or any combination of the following, whether the conduct at issue was
5	committed within or outside the State, constitutes unprofessional conduct:
6	* * *
7	(2) all advertising of about health care services or a medical business
8	that is intended or has a tendency to <u>mislead or</u> deceive the public or impose
9	upon credulous or ignorant persons and so be harmful or injurious to public
10	morals or safety;
11	* * *
12	(21) permitting one's name or license to be used by a person, group, or
13	corporation when not actually in charge of, or responsible for, or actively
14	overseeing the treatment given or other health care services provided;
15	* * *
16	(29) delegation of professional responsibilities, including delivery of
17	any health care services, to a person whom the licensed professional knows, or
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18	has reason to know, is not qualified by training, experience, education, or
18	has reason to know, is not qualified by training, experience, education, or licensing credentials to perform them;

1	(33)(A) providing, prescribing, dispensing, or furnishing medical
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 maintain 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, on line
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	prescriber has taken the call;

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	(iv) 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 questionnaire developed by or in consultation with health care
7	professionals with clinically appropriate expertise that allows the licensee
8	to obtain additional medical history and ask follow-up questions as needed;
9	provided, however, that by using the adaptive questionnaire, the licensee shall
10	be deemed to have reviewed the questionnaire and to have determined that it
11	was able to provide the licensee with the information necessary to meet the
12	essential standards of acceptable and prevailing practice;
13	(v) continuing medication on a short-term basis for a new patient,
14	prior to the patient's first appointment; or
15	(v)(vi) emergency situations where life or health of the patient is
16	in imminent danger;
17	* * *
18	(b) Failure to practice competently. The Board may also find that failure to
19	practice competently by reason of any cause on a single occasion or on
20	multiple occasions constitutes unprofessional conduct. Failure to practice
21	competently includes, as determined by the Board:

1	(1) performance of unsafe or unacceptable patient care; or
2	(2) failure to conform to the essential standards of acceptable and
3	prevailing practice.
4	(c) <u>Burden of proof.</u> The burden of proof in a disciplinary action shall be
5	on the State to show by a preponderance of the evidence that the person has
6	engaged in unprofessional conduct.
7	(d)(1) Health care providers. Notwithstanding any other law to the
8	contrary, no health care provider who is certified, registered, or licensed in
9	Vermont shall be subject to professional disciplinary action by the Board, nor
10	shall the Board take adverse action on an application for certification,
11	registration, or licensure of a qualified health care provider, based solely on:
12	(A)(1) the health care provider providing or assisting in the provision of
13	legally protected health care activity; or
14	(B)(2) a criminal, civil, or disciplinary action in another state against the
15	health care provider that is based solely on the provider providing or assisting
16	in the provision of legally protected health care activity.
17	(2)(e) Definitions. As used in this subsection section:
18	(A)(1) "Health care provider" means a person who provides professional
19	health care services to an individual during that individual's medical care,
20	treatment, or confinement.

1	(B)(2) "Health care services" means services for the diagnosis,
2	prevention, treatment, cure, or relief of a physical or mental health condition,
3	including counseling, procedures, products, devices, and medications.
4	(C)(3) "Legally protected health care activity" has the same meaning as
5	in 1 V.S.A. § 150.
6	Sec. 8. 26 V.S.A. § 1615 is amended to read:
7	§ 1615. ADVANCED PRACTICE REGISTERED NURSES;
8	REGULATORY AUTHORITY; UNPROFESSIONAL CONDUCT
9	(a) In addition to the provisions of 3 V.S.A. § 129a and section 1582 of this
10	chapter, the Board may deny an application for licensure, renewal, or
11	reinstatement or may revoke, suspend, or otherwise discipline an advanced
12	practice registered nurse upon due notice and opportunity for hearing if the
13	person engages in the following conduct:
14	* * *
15	(6) Providing Except as otherwise provided in subsection (b) of this
16	section, providing, prescribing, dispensing, or furnishing medical services or
17	prescription medication or prescription-only devices to a person in response to
18	any communication transmitted or received by computer or other electronic
19	means when the licensee fails to take the following actions to establish and
20	maintain a proper provider-patient relationship:

1	(A) a reasonable effort to verify that the person requesting		
2	medication is in fact the patient and is in fact who the person claims to be;		
3	(B) establishment of documented diagnosis through the use of		
4	accepted medical practices; and		
5	(C) maintenance of a current medical record.		
6	* * *		
7	(b)(1) For the purposes of subdivision (a)(6) of this section, an electronic,		
8	online, or telephonic evaluation by questionnaire is inadequate for the initial		
9	evaluation of the patient, except as otherwise provided in subdivision (2)(D) of		
10	this subsection.		
11	(2) The following would not be in violation of subdivision (a)(6) of this		
12	section:		
13	(A) initial admission orders for newly hospitalized patients;		
14	(B) prescribing for a patient of another provider for whom the		
15	prescriber has taken call;		
16	(C) prescribing for a patient examined by a licensed APRN,		
17	physician assistant, or other practitioner authorized by law and supported by		
18	the APRN;		
19	(D) in furtherance of 18 V.S.A. chapter 223, prescribing medication		
20	for an individual to terminate the individual's pregnancy based on an adaptive		
21	questionnaire developed by or in consultation with health care		

1	professionals with clinically appropriate expertise that allows the licensee			
2	to obtain additional medical history and ask follow-up questions as needed:			
3	provided, however, that by using the adaptive questionnaire, the licensee shall			
4	be deemed to have reviewed the questionnaire and to have determined that it			
5	was able to provide the licensee with the information necessary to meet the			
6	essential standards of acceptable and prevailing practice;			
7	(E) continuing medication on a short-term basis for a new patient			
8	prior to the patient's first appointment; or			
9	(E)(F) emergency situations where the life or health of the patient is			
10	in imminent danger.			
11	* * *			
12	Sec. 9. 26 V.S.A. § 1736 is amended to read:			
13	§ 1736. UNPROFESSIONAL CONDUCT			
14	(a) The following conduct and the conduct described in section 1354 of this			
15	title by a licensed physician assistant shall constitute unprofessional conduct;			
16	when that conduct is by an applicant or person who later becomes an applicant			
17	it may constitute grounds for denial of licensure:			
18	* * *			
19	(2) occupational advertising or advertising about health care services			
20	that is intended or has a tendency to mislead or deceive the public;			

1	(3) exercising undue influence on or taking improper advantage of a		
2	person using the individual's services, or promoting the sale of professional		
3	goods or services in a manner that exploits a person for the financial gain of		
4	the practitioner or of a third party;		
5	(4) failing to comply with provisions of federal or state statutes or rules		
6	governing the profession;		
7	(5) conviction of a crime related to the profession; and		
8	(6) conduct that evidences unfitness to practice in the profession.		
9	* * *		
10	(d) As used in this section, "health care services" means services for the		
11	diagnosis, prevention, treatment, cure, or relief of a physical or mental health		
12	condition, including counseling, procedures, products, devices, and		
13	medications.		
14	Sec. 10. 26 V.S.A. § 2024 is added to read:		
15	§ 2024. CONFIDENTIALITY OF PRESCRIBER AND PHARMACIST		
16	INFORMATION ON MEDICATIONS FOR LEGALLY		
17	PROTECTED HEALTH CARE ACTIVITY		
18	(a) As used in this section;		
19	(1) "Gender-affirming health care services" and "reproductive health		
20	care services" have the same meanings as in 1 V.S.A. § 150.		

1	(2) "Noncontrolled medication" means a medication that is not a
2	controlled substance as defined in 21 U.S.C. § 802.
3	(b)(1) Upon the request of a prescribing practitioner and to the extent not
4	expressly required under federal law, a pharmacist or other licensed member
5	of the pharmacy staff shall not list redact or otherwise remove the
6	practitioner's name on or initials from a fulfilled prescription for a
7	noncontrolled medication for gender-affirming health care services or
8	reproductive health care services, and from any accompanying printed
9	materials but shall instead list the name of the facility or other setting at which
10	the practitioner is practicing.
11	(2) A pharmacist may, or, upon the pharmacist's request, another
12	licensed member of the pharmacy staff shall, redact or otherwise remove
13	the pharmacist's name or initials from a fulfilled prescription for a
14	noncontrolled medication for gender-affirming health care services or
15	reproductive health care services, and from any accompanying printed
16	<mark>materials.</mark>
17	(3) If a prescribing practitioner dispenses medication directly to
18	patients for gender-affirming health care services or reproductive health
19	care services, or both, the practitioner may redact or otherwise remove
20	the practitioner's own name or initials from a fulfilled prescription for a
21	noncontrolled medication for gender-affirming health care services or

1	reproductive health care services, and from any accompanying printed		
2	materials.		
3	(c) Nothing in this chapter or the rules governing the pharmacy profession		
4	shall be construed to require a pharmacist or other licensed member of a		
5	pharmacy's staff to list the prescribing practitioner's or pharmacist's name		
6	or initials on a fulfilled prescription for noncontrolled medication for gender		
7	affirming health care services or reproductive health care services.		
8	(d) A pharmacist or other licensed member of a pharmacy's staff shall		
9	be immune from civil, administrative, and criminal liability for failing to		
10	redact or remove the name of a prescriber or pharmacist when requested		
11	to do so pursuant to subdivision (b)(1) or (2) of this section; provided,		
12	however, that this immunity shall not apply to gross negligence,		
13	recklessness, or intentional misconduct by a pharmacist or other licensed		
14	member of the pharmacy staff.		
15	Sec. 11. EFFECTIVE DATE <mark>S</mark>		
16	(a) Sec. 10 (26 V.S.A. § 2024; confidentiality of prescriber information on		
17	medications for legally protected health care activity) shall take effect on		
18	<del>January 1, 2026.</del>		
19	(b) This act The remaining sections shall take effect on passage.		
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21			

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3	(Committee vote:)	
4		
5		Representative

(Draft No. 2.2 – S.28)

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FOR THE COMMITTEE