

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Human Services to which was referred House Bill No.
3 218 entitled “An act relating to fiscal year 2026 appropriations from the Opioid
4 Abatement Special Fund” respectfully reports that it has considered the same
5 and recommends that the bill be amended by striking out all after the enacting
6 clause and inserting in lieu thereof the following:

7 Sec. 1. APPROPRIATIONS; OPIOID ABATEMENT SPECIAL FUND

8 (a) In fiscal year 2026, the following sums shall be appropriated from the
9 Opioid Abatement Special Fund established in 18 V.S.A. § 4774:

10 (1)(A) \$1,976,000.00 to the Department of Health to fund 26 outreach
11 or case management staff positions within the preferred provider network for
12 the provision of services that increase motivation of and engagement with
13 individuals with substance use disorder in settings such as police barracks,
14 shelters, social service organizations, and elsewhere in the community.

15 (B) It is the intent of the General Assembly that these positions shall
16 be funded annually by the Opioid Abatement Special Fund unless and until the
17 Special Fund does not have sufficient monies to fund this expenditure.

18 (2)(A) \$1,100,000.00 to the Department of Health for the purpose of
19 awarding grants to the City of Burlington for establishing an overdose
20 prevention center upon submission of a grant proposal that has been approved

1 by the Burlington City Council and meets the requirements of 18 V.S.A.
2 § 4256, including the guidelines developed by the Department of Health.

3 (B) It is the intent of the General Assembly to continue to appropriate
4 funds from the Opioid Abatement Special Fund through fiscal year 2028 for
5 the purpose of awarding grants to the City of Burlington for the operation of
6 the overdose prevention center, unless and until the Special Fund does not have
7 sufficient monies to fund this expenditure.

8 (3)(A) \$1,200,000.00 to the Department of Health for recovery
9 residences certified by the Vermont Alliance for Recovery Residences.

10 (B) It is the intent of the General Assembly that recovery residences
11 be funded annually at not less than fiscal year 2025 levels, unless and until the
12 Special Fund does not have sufficient monies to fund this expenditure.

13 (4)(A) \$1,050,000.00 to the Department of Health for syringe services.

14 (B) It is the intent of the General Assembly that syringe services be
15 funded annually at not less than fiscal year 2025 levels, unless and until the
16 Special Fund does not have sufficient monies to fund this expenditure.

17 (5) \$800,000.00 to the Department of Health for grants to providers for
18 ongoing support for contingency management.

19 (6) \$32,157.00 to the Department of Health for distribution to the
20 Brattleboro Fire Department to establish community training programs on the

1 administration of opioid antagonists, CPR, first aid, and Stop the Bleed
2 protocols.

3 (7) \$44,229.00 to the Department of Health for distribution to the
4 Champlain Housing Trust to continue a pilot program providing access to
5 wound care and preventative health care in three low-barrier shelters within
6 Chittenden County.

7 (8) \$800,000.00 to the Department for Children and Families' Office of
8 Economic Opportunity to support long-term programs at shelters for
9 individuals experiencing homelessness, including harm-reduction supports and
10 clinical nursing programs.

11 (9) \$309,000.00 to the Department of Health for HCRS' Project
12 Connectionworks to reduce opioid use disorder morbidity and mortality in
13 Windham County through prevention, treatment, and recovery services.

14 (10) \$35,000.00 to the Department of Corrections for distribution to
15 Pathways Vermont to implement a contingency management pilot program in
16 Chittenden County for individuals under the supervision of the Department of
17 Corrections.

18 (11) \$50,000.00 to the Judicial Branch to train Vermont's judges on
19 issues related to opioid use disorder and strategies for use in dockets statewide.

20 (12) \$76,000.00 to the Department of Health for distribution to
21 Vermonters for Criminal Justice Reform to fund an outreach worker position.

1 (13) \$200,000.00 to the Department of Health for distribution to Elevate
2 Youth Services to establish Healthy Youth Program counselors at the
3 Basement Teen Center at Kellogg-Hubbard Library in Washington County.

4 (14) \$100,000.00 to the Department of Health for distribution to Friends
5 for Change’s Youth Center for the purpose of delivering intervention strategies
6 and harm reduction supports to youth and young adults.

7 (15) \$170,000.00 to the Department of Health for distribution to
8 Spectrum Youth and Family Services for two new positions to expand opioid
9 use disorder screening, treatment, and case management services to youth in
10 Chittenden and Franklin Counties.

11 (16) \$80,000.00 to the Department of Health for distribution to Prevent
12 Child Abuse Vermont for the purpose of teaching parenting skills and
13 providing social and emotional parenting supports for individuals with opioid
14 use disorder.

15 (17) \$850,000.00 to the Department of Disabilities, Aging, and
16 Independent Living for distribution to HireAbility Vermont to provide
17 specialized employment services for individuals with opioid use disorder in
18 Burlington, Newport, Rutland, and Bennington.

19 (18) \$550,000.00 to the Department of Health for distribution to
20 Northeast Kingdom Community Action to hire four peer support specialists to

1 assist individuals with opioid use disorder who are transitioning out of
2 homelessness into safe, permanent housing.

3 (19) \$150,000.00 to the Department of Health for distribution to
4 Connecticut Valley Addiction Services, Inc. to expand opioid use treatment in
5 rural Windsor County.

6 (20) \$300,000.00 to the Department of Health for distribution to
7 Vermonters for Criminal Justice Reform and the Johnson Health Center to
8 continue and improve the Managed Medical Response Partnership.

9 (21) \$30,000.00 to the Department of Health for distribution to
10 Treatment Associates of Washington County Mental Health to hire an
11 embedded recovery coach.

12 (22) \$20,824.00 to the Department of Health for distribution to
13 Umbrella to provide integrated services between domestic and sexual violence
14 providers and partners in recovery in northeastern Vermont.

15 (b) All grant agreements associated with funds appropriated pursuant to
16 this section shall require outcome and measurements data to be collected and
17 reported to the department issuing the grant.

18 Sec. 2. 18 V.S.A. chapter 93 is amended to read:

19 CHAPTER 93. OPIOID USE DISORDER

20 Subchapter 1. Treatment of Opioid Use Disorder

21 * * *

1 § 4754. LIMITATION ON PRIOR AUTHORIZATION REQUIREMENTS

2 (a) A health insurance plan shall not require prior authorization for
3 prescription drugs for a patient who is receiving ~~medication-assisted treatment~~
4 medication for opioid use disorder if the dosage prescribed is within the U.S.
5 Food and Drug Administration’s dosing recommendations.

6 (b) A health insurance plan shall not require prior authorization for all
7 counseling and behavioral therapies associated with ~~medication-assisted~~
8 ~~treatment~~ medication for opioid use disorder for a patient who is receiving
9 medication-assisted treatment.

10 Subchapter 2. Opioid Settlement

11 * * *

12 § 4772. OPIOID SETTLEMENT ADVISORY COMMITTEE

13 * * *

14 (b) Membership.

15 (1) The Advisory Committee shall be composed of the following
16 members and shall reflect the diversity of Vermont in terms of gender, race,
17 age, ethnicity, sexual orientation, gender identity, disability status, and
18 socioeconomic status and ensure inclusion of individuals with lived experience
19 of opioid use disorder and their family members whenever possible:

20 * * *

1 the General Assembly on prioritizing spending from the Opioid Abatement
2 Special Fund. The Advisory Committee shall consider:

3 (1) the impact of the opioid crisis on communities throughout Vermont,
4 including communities' abatement needs and proposals for abatement
5 strategies and responses;

6 (2) the perspectives of and proposals from opioid use disorder
7 prevention coalitions, recovery centers, and ~~medication-assisted treatment~~
8 medication for opioid use disorder providers; and

9 (3) the ongoing challenges of the opioid crisis on marginalized
10 populations, including individuals who have a lived experience of opioid use
11 disorder.

12 * * *

13 (f) Meetings.

14 (1) The Commissioner of Health shall call the first meeting of the
15 Advisory Committee to occur on or before June 30, 2022.

16 (2) Annually, the Advisory Committee shall elect a vice chair from
17 among its members.

18 (3) The Advisory Committee shall meet at least quarterly but not more
19 than 12 times per calendar year.

1 (C) providing ~~medication-assisted~~ education and awareness training
2 on medication for opioid use disorder to health care providers, emergency
3 medical technicians, law enforcement, and other first responders; and

4 * * *

5 (3) assisting pregnant and postpartum individuals, specifically:

6 (A) enhancing services for expanding screening, brief intervention,
7 and referral to treatment (SBIRT) services to non-Medicaid eligible or
8 uninsured pregnant individuals;

9 (B) expanding comprehensive evidence-based or evidence-informed
10 treatment and recovery services, including ~~medication-assisted treatment~~
11 medication for opioid use disorder, for individuals with co-occurring opioid
12 use disorder and other substance or mental health disorders for up to 12 months
13 postpartum; and

14 * * *

15 (5) expanding the availability of warm handoff programs and recovery
16 services, specifically:

17 (A) expanding services such as navigators and on-call teams to begin
18 ~~medication-assisted treatment~~ medication for opioid use disorder in hospital
19 emergency departments;

20 * * *

- 1 (6) treating incarcerated populations, specifically:
- 2 (A) providing evidence-based or evidence-informed treatment and
- 3 recovery support, including ~~medication-assisted treatment~~ medication for
- 4 opioid use disorder for individuals with opioid use disorder or co-occurring
- 5 substance use or mental health disorders while transitioning out of the criminal
- 6 justice system; and

7 * * *

8 Sec. 3. EFFECTIVE DATE

9 This act shall take effect on July 1, 2025.

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(Committee vote: _____)

Representative _____

FOR THE COMMITTEE