



Date: April 16, 2025

To: Vermont House Judiciary Committee

From: Jessa Barnard, Executive Director, Vermont Medical Society, jbarnard@vtmd.org

RE: Support for S. 28 - An act relating to access to certain legally protected health care services

The Vermont Medical Society is Vermont's largest physician and physician assistant membership association, representing 3100 physicians and PAs across Vermont. We have strong policies in favor of supporting patient access to reproductive and gender affirming health care services and advocated in favor of Acts 14 and 15 of 2023, the "shield laws" protecting patients and providers from legal tactics we see in other states being used to harass those who seek or provide such services.

We thank the sponsors of S. 28 and other health care organizations who have worked on the bill and believe the bill fills important gaps we are now aware of from Acts 14 and 15. **We testify in strong support of all sections in the House Health Care Committee Report.** In detail:

Section 1 – Extending Reciprocal Protections

Section 1, added by the House Health Care Committee, would extend the protections that Vermont provides under our shield laws to individuals or providers who assisted in providing care legal in their state at the time they provided the care. This may allow providers to travel to Vermont more freely without fear of legal repercussions following them to Vermont.

Section 2 – Contact Information of Licensees

We regularly hear concerns from our members who provide legally protected health care services that they are concerned for their safety if their home address or phone number is available publicly. Currently, should this information be provided on a professional licensure application, OPR or the Board of Medical Practice must disclose this information pursuant to a public records act request. We strongly support only a public address being disclosed should licensure application data be requested.

Sections 3, 4, 10, 12 – Truthful Advertising & Appropriate Oversight

These sections expand Vermont's unprofessional conduct laws to prohibit misleading advertising and to require active oversight when delegating services for various health professions. Section 4 expands consumer protection laws to state that advertising for health care services – whether or not there is a charge for such services – cannot be untrue or clearly designed to mislead the public. We support these additions and worked with OPR and the Board of Medical Practice in the Senate to reach agreed-upon language in these sections.

Sections 5 & 6 – Protections Against Data Sharing

VMS supports Section 5 expanding the current limit on state entities expending resources to assist with interstate investigations into legally protected health care activities to also include a limit involving federal investigations. VMS also supports expanding the limits on provider data sharing in Section 6 to include a limit on releasing protected health information to a government entity if the information will be used to investigate or impose penalties on those providing or seeking legally protected health care activities. We worked closely with the Attorney General's

Office, Vermont Department of Health and other provider organizations on this language to ensure that exceptions allowed for necessary data sharing for health care operations.

Sections 7-9 – Confidentiality of Fetal Death Reporting

Sections 7-9 clarify that reports submitted by Vermont clinicians regarding fetal deaths are confidential and clarifies that physicians, PAs, NDs and APRNs can submit such reports. VMS supports these clarifications.

Sections 10 & 11 – Prescribing via Adaptive Questionnaire

VMS supports amending Vermont statute to allow establishing a clinician- patient relationship and prescribing via adaptive questionnaire for the provision of medication abortion services. Evidence supports the safety and efficacy of fully remote, asynchronous medication abortion care using a published protocol,¹ while current Board of Medical Practice for MDs and OPR statute for APRNs does not authorize this practice. It is important to note that statute holds a prescriber responsible for meeting the same standard of care when using telehealth as when providing in person care (18 V.S.A. § 9361(b)) and requires patient consent for telehealth services – this would be a service requested by a patient. VMS supports an addition added at the request of OPR that the questionnaire must be developed by or in consultation with health care providers with clinically appropriate expertise.

Section 13 – Request to Remove Contact Information from Prescriptions

VMS supports the option for prescribers to request that their name be redacted or removed from a prescription for medication for reproductive health services or gender affirming care. The need for this option arises from cases such as those recently brought against a New York physician, Margaret Carpenter, by both Texas and Louisiana after she prescribed abortion medication to patients located in those states. As prescribing medication for abortion and gender affirming care become more and more politicized and legally risky for both patients and prescribers, removing prescriber identifying information from pill bottles that may cross state lines is one additional step Vermont can take to protect access to these evidence-based medications. New York recently passed similar legislation.² VMS worked with OPR, the Vermont Pharmacy Association and others to make this section more operationally feasible for pharmacists by allowing redaction of the prescriber name rather than not printing the name initially. VMS also supports the request from the pharmacists to be immune for negligently failing to remove a name from the label.

Thank you for taking up this important bill and we look forward to working with your Committee to pass S. 28 as soon as possible.

¹ <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2783451>;
[https://www.contraceptionjournal.org/article/S0010-7824\(22\)00263-3/abstract](https://www.contraceptionjournal.org/article/S0010-7824(22)00263-3/abstract);
<https://www.sciencedirect.com/science/article/pii/S2667193X22000175>

² <https://www.governor.ny.gov/news/protecting-reproductive-freedom-governor-hochul-signs-legislation-expand-protections-health>