

Final Proposed Filing - Coversheet

Instructions:

In accordance with Title 3 Chapter 25 of the Vermont Statutes Annotated and the "Rule on Rulemaking" adopted by the Office of the Secretary of State, this filing will be considered complete upon filing and acceptance of these forms with the Office of the Secretary of State, and the Legislative Committee on Administrative Rules.

All forms shall be submitted at the Office of the Secretary of State, no later than 3:30 pm on the last scheduled day of the work week.

The data provided in text areas of these forms will be used to generate a notice of rulemaking in the portal of "Proposed Rule Postings" online, and the newspapers of record if the rule is marked for publication. Publication of notices will be charged back to the promulgating agency.

**PLEASE REMOVE ANY COVERSHEET OR FORM NOT
REQUIRED WITH THE CURRENT FILING BEFORE DELIVERY!**

Certification Statement: As the adopting Authority of this rule (see 3 V.S.A. § 801 (b) (11) for a definition), I approve the contents of this filing entitled:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

/s/ Kristin L. McClure _____, on 10/16/25
(signature) (date)

Printed Name and Title:

Kristin McClure
Deputy Secretary
Agency of Human Services

RECEIVED BY: _____

- ☐ Coversheet
- ☐ Adopting Page
- ☐ Economic Impact Analysis
- ☐ Environmental Impact Analysis
- ☐ Strategy for Maximizing Public Input
- ☐ Scientific Information Statement (if applicable)
- ☐ Incorporated by Reference Statement (if applicable)
- ☐ Clean text of the rule (Amended text without annotation)
- ☐ Annotated text (Clearly marking changes from previous rule)
- ☐ ICAR Minutes
- ☐ Copy of Comments
- ☐ Responsiveness Summary

1. TITLE OF RULE FILING:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

2. PROPOSED NUMBER ASSIGNED BY THE SECRETARY OF STATE

25P032

3. ADOPTING AGENCY:

Agency of Human Services - Vermont Department of Health

4. PRIMARY CONTACT PERSON:

(A PERSON WHO IS ABLE TO ANSWER QUESTIONS ABOUT THE CONTENT OF THE RULE).

Name: Jessica Schifano, Policy Director

Agency: Agency of Human Services - Vermont Department
of Health

Mailing Address: 280 State Drive, Building C, Waterbury,
VT 05671

Telephone: 802-798-6756 Fax:

E-Mail: jessica.schifano@vermont.gov

Web URL *(WHERE THE RULE WILL BE POSTED)*:

[http://www.healthvermont.gov/about-us/laws-
regulations/public-comment](http://www.healthvermont.gov/about-us/laws-regulations/public-comment)

5. SECONDARY CONTACT PERSON:

*(A SPECIFIC PERSON FROM WHOM COPIES OF FILINGS MAY BE REQUESTED OR WHO MAY
ANSWER QUESTIONS ABOUT FORMS SUBMITTED FOR FILING IF DIFFERENT FROM THE
PRIMARY CONTACT PERSON).*

Name: Natalie Weill, Policy Advisor

Agency: Agency of Human Services - Department of Health

Mailing Address: 280 State Drive, Building C, Waterbury,
VT 05671

Telephone: Fax:

E-Mail: natalie.weill@vermont.gov

6. RECORDS EXEMPTION INCLUDED WITHIN RULE:

*(DOES THE RULE CONTAIN ANY PROVISION DESIGNATING INFORMATION AS CONFIDENTIAL;
LIMITING ITS PUBLIC RELEASE; OR OTHERWISE, EXEMPTING IT FROM INSPECTION AND
COPYING?)* No

IF YES, CITE THE STATUTORY AUTHORITY FOR THE EXEMPTION:

PLEASE SUMMARIZE THE REASON FOR THE EXEMPTION:

7. LEGAL AUTHORITY / ENABLING LEGISLATION:

(THE SPECIFIC STATUTORY OR LEGAL CITATION FROM SESSION LAW INDICATING WHO THE ADOPTING ENTITY IS AND THUS WHO THE SIGNATORY SHOULD BE. THIS SHOULD BE A SPECIFIC CITATION NOT A CHAPTER CITATION).

Act 137 (2024) Sec. 8 requires the Department of Health to adopt rules for the purpose of implementing and administering the Act.

3 V.S.A. § 801(b)(11)

EXPLANATION OF HOW THE RULE IS WITHIN THE AUTHORITY OF THE AGENCY:

18 V.S.A. §7261(e) states, "The Department of Health shall adopt rules pursuant to 3 V.S.A. chapter 25 to carry out the purposes of this section."

3 V.S.A. §801(b)(11) states "Adopting authority" means, for agencies that are attached to the Agencies of Administration, of Commerce and Community Development, of Natural Resources, of Human Services, and of Transportation, or any of their components, the secretaries of those agencies; for agencies attached to other departments or any of their components, the commissioners of those departments.

8.

9. THE FILING HAS NOT CHANGED SINCE THE FILING OF THE PROPOSED RULE.

10. THE AGENCY HAS NOT INCLUDED WITH THIS FILING A LETTER EXPLAINING IN DETAIL WHAT CHANGES WERE MADE, CITING CHAPTER AND SECTION WHERE APPLICABLE.

11. SUBSTANTIAL ARGUMENTS AND CONSIDERATIONS WERE RAISED FOR OR AGAINST THE ORIGINAL PROPOSAL.

12. THE AGENCY HAS INCLUDED COPIES OF ALL WRITTEN SUBMISSIONS AND SYNOPSES OF ORAL COMMENTS RECEIVED.

13. THE AGENCY HAS INCLUDED A LETTER EXPLAINING IN DETAIL THE REASONS FOR THE AGENCY'S DECISION TO REJECT OR ADOPT THEM.

14. CONCISE SUMMARY (150 WORDS OR LESS):

This rule sets forth the standards that apply to the licensing of psychiatric residential treatment facilities for youth (PRTF) in Vermont.

This rulemaking establishes the process by which a psychiatric residential treatment facility for youth can apply for a license in Vermont. This rulemaking also establishes the minimum requirements a PRTF must meet in order to be eligible for licensure.

15. EXPLANATION OF WHY THE RULE IS NECESSARY:

This rulemaking is necessary for compliance with 18 V.S.A. §7261(e) that requires the Department of Health (Department) "to adopt rules pursuant to 3 V.S.A. chapter 25 to carry out the purposes of this section."

16. EXPLANATION OF HOW THE RULE IS NOT ARBITRARY:

The establishment of this rule is not arbitrary because the rule is tailored to comply with the specific requirements of 18 V.S.A. §7261(e) that requires the Department to adopt rules to establish the process by which a psychiatric residential treatment facility for youth can apply for a license in Vermont.

17. LIST OF PEOPLE, ENTERPRISES AND GOVERNMENT ENTITIES AFFECTED BY THIS RULE:

Entities Establishing, Maintaining, or Operating PRTFs, the Vermont Department of Health, and the Department of Disabilities, Aging, and Independent Living (DAIL).

18. BRIEF SUMMARY OF ECONOMIC IMPACT (150 WORDS OR LESS):

This rulemaking establishes a licensing and regulatory program for PRTF within the Department of Health, as required by statute (18 V.S.A. § 7261). There are only minimal economic impacts anticipated for the Agency of Human Services and for the Entities Establishing, Maintaining, or Operating PRTFs from this Rule.

19. A HEARING WAS HELD.

20. HEARING INFORMATION

(THE FIRST HEARING SHALL BE NO SOONER THAN 30 DAYS FOLLOWING THE POSTING OF NOTICES ONLINE).

IF THIS FORM IS INSUFFICIENT TO LIST THE INFORMATION FOR EACH HEARING, PLEASE ATTACH A SEPARATE SHEET TO COMPLETE THE HEARING INFORMATION.

Date: 8/29/2025
Time: 11:00 AM
Street Address: 280 State Drive, Room A213
Waterbury, VT
Zip Code: 05671-8300
URL for Virtual: https://teams.microsoft.com/l/meetup-join/19%3ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVhMTJkMWNh%40thread.v2/0?context=%7b%22Tid%22%3a%220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%22e6440c4f-7582-4db1-800b-a2038a1e1e68%22%7d

Date:
Time: AM
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Date:
Time: AM
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Zip Code:
URL for Virtual:

21. DEADLINE FOR COMMENT (NO EARLIER THAN 7 DAYS FOLLOWING LAST HEARING):

9/5/2025

KEYWORDS (PLEASE PROVIDE AT LEAST 3 KEYWORDS OR PHRASES TO AID IN THE SEARCHABILITY OF THE RULE NOTICE ONLINE).

Psychiatric Residential Treatment Facility for Youth

Pyschiatric
Youth
Mental Health
Licensing
Residential

280 State Drive – Center Building
Waterbury, VT 05671-1000



OFFICE OF THE SECRETARY
TEL: (802) 241-0440
FAX: (802) 241-0450

JENNEY SAMUELSON
SECRETARY

KRISTIN MCCLURE
DEPUTY SECRETARY

STATE OF VERMONT
AGENCY OF HUMAN SERVICES

MEMORANDUM

TO: Sarah Copeland Hanzas, Secretary of State

FROM: Jenney Samuelson, Secretary, Agency of Human Services 

DATE: November 21, 2024

SUBJECT: Signatory Authority for Purposes of Authorizing Administrative Rules

I hereby designate Kristin McClure, Deputy Secretary, Agency of Human Services as signatory to fulfill the duties of the Secretary of the Agency of Human Services as the adopting authority for administrative rules as required by Vermont's Administrative Procedures Act, 3. V.S.A § 801 et seq.

CC: KristinMcClure@vermont.gov

Adopting Page

Instructions:

This form must accompany each filing made during the rulemaking process:

Note: To satisfy the requirement for an annotated text, an agency must submit the entire rule in annotated form with proposed and final proposed filings. Filing an annotated paragraph or page of a larger rule is not sufficient. Annotation must clearly show the changes to the rule.

When possible, the agency shall file the annotated text, using the appropriate page or pages from the Code of Vermont Rules as a basis for the annotated version. New rules need not be accompanied by an annotated text.

1. TITLE OF RULE FILING:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

2. ADOPTING AGENCY:

Agency of Human Services - Vermont Department of Health

3. TYPE OF FILING (*PLEASE CHOOSE THE TYPE OF FILING FROM THE DROPDOWN MENU
BASED ON THE DEFINITIONS PROVIDED BELOW*):

- **AMENDMENT** - Any change to an already existing rule, even if it is a complete rewrite of the rule, it is considered an amendment if the rule is replaced with other text.
- **NEW RULE** - A rule that did not previously exist even under a different name.
- **REPEAL** - The removal of a rule in its entirety, without replacing it with other text.

This filing is **A NEW RULE** .

4. LAST ADOPTED (*PLEASE PROVIDE THE SOS LOG#, TITLE AND EFFECTIVE DATE OF
THE LAST ADOPTION FOR THE EXISTING RULE*):

This is a new rule.

Economic Impact Analysis

Instructions:

In completing the economic impact analysis, an agency analyzes and evaluates the anticipated costs and benefits to be expected from adoption of the rule; estimates the costs and benefits for each category of people enterprises and government entities affected by the rule; compares alternatives to adopting the rule; and explains their analysis concluding that rulemaking is the most appropriate method of achieving the regulatory purpose. If no impacts are anticipated, please specify “No impact anticipated” in the field.

Rules affecting or regulating schools or school districts must include cost implications to local school districts and taxpayers in the impact statement, a clear statement of associated costs, and consideration of alternatives to the rule to reduce or ameliorate costs to local school districts while still achieving the objectives of the rule (see 3 V.S.A. § 832b for details).

Rules affecting small businesses (excluding impacts incidental to the purchase and payment of goods and services by the State or an agency thereof), must include ways that a business can reduce the cost or burden of compliance or an explanation of why the agency determines that such evaluation isn’t appropriate, and an evaluation of creative, innovative or flexible methods of compliance that would not significantly impair the effectiveness of the rule or increase the risk to the health, safety, or welfare of the public or those affected by the rule.

1. TITLE OF RULE FILING:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

2. ADOPTING AGENCY:

Agency of Human Services - Vermont Department of Health

3. CATEGORY OF AFFECTED PARTIES:

LIST CATEGORIES OF PEOPLE, ENTERPRISES, AND GOVERNMENTAL ENTITIES POTENTIALLY AFFECTED BY THE ADOPTION OF THIS RULE AND THE ESTIMATED COSTS AND BENEFITS ANTICIPATED:

DAIL: There is a small anticipated cost to DAIL from this rulemaking. This rulemaking requires DAIL to inspect PRTFs for compliance with Centers for Medicare and Medicaid Services (CMS) regulations and verify ongoing compliance with relevant rules. DAIL will also be required to receive and respond to complaints and

initiate investigations and corrective actions. While the requirements associated with a PRTF are new, these responsibilities, generally, are ones familiar to DAIL, as they complete similar responsibilities for other health care facility licensing programs (i.e., Hospitals, Ambulatory Surgical Centers) currently established in the Department of Health and have the existing staff and infrastructure to carry out these responsibilities.

Vermont Department of Health: There is a small anticipated cost to VDH from this rulemaking since it requires the Department to implement the licensing scheme for PRTFs.

Entities Establishing, Maintaining, or Operating PRTFs: There is a small anticipated cost to the Entities Establishing, Maintaining, or Operating PRTFs, to meet the following requirements of the Rule: 1) completing the application and renewal process; 2) maintaining compliance with relevant regulations; 3) establishing a complaint process; 4) preparing documents that verify compliance with CMS Conditions of Participation for psychiatric residential treatment facilities for youth (CoPs); 5) completing the post-discharge follow-up of residents; 6) creating an emergency preparedness plan; and 7) reporting of required data. However, these are all minimum requirements that are necessary to obtain a license from the Department of Health, as established by statute (18 V.S.A. § 7261).

4. IMPACT ON SCHOOLS:

INDICATE ANY IMPACT THAT THE RULE WILL HAVE ON PUBLIC EDUCATION, PUBLIC SCHOOLS, LOCAL SCHOOL DISTRICTS AND/OR TAXPAYERS CLEARLY STATING ANY ASSOCIATED COSTS:

There is no anticipated direct impact to schools.

5. ALTERNATIVES: *CONSIDERATION OF ALTERNATIVES TO THE RULE TO REDUCE OR AMELIORATE COSTS TO LOCAL SCHOOL DISTRICTS WHILE STILL ACHIEVING THE OBJECTIVE OF THE RULE.*

Because there is no anticipated direct impact to schools, alternatives to this rule have not been considered.

6. IMPACT ON SMALL BUSINESSES:

INDICATE ANY IMPACT THAT THE RULE WILL HAVE ON SMALL BUSINESSES (EXCLUDING IMPACTS INCIDENTAL TO THE PURCHASE AND PAYMENT OF GOODS AND SERVICES BY THE STATE OR AN AGENCY THEREOF):

There is no anticipated impact to small businesses.

7. SMALL BUSINESS COMPLIANCE: *EXPLAIN WAYS A BUSINESS CAN REDUCE THE COST/BURDEN OF COMPLIANCE OR AN EXPLANATION OF WHY THE AGENCY DETERMINES THAT SUCH EVALUATION ISN'T APPROPRIATE.*

Because there is no anticipated impact to small businesses, no evaluation is necessary.

8. COMPARISON:

COMPARE THE IMPACT OF THE RULE WITH THE ECONOMIC IMPACT OF OTHER ALTERNATIVES TO THE RULE, INCLUDING NO RULE ON THE SUBJECT OR A RULE HAVING SEPARATE REQUIREMENTS FOR SMALL BUSINESS:

There are no alternatives to this rule, this rulemaking is necessary for compliance with 18 V.S.A. §7261(e) that requires the Department "to adopt rules pursuant to 3 V.S.A. chapter 25 to carry out the purposes of this section."

9. SUFFICIENCY: *DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*

The Department has provided the relevant information above based on the assessment of the potential impacts.

Environmental Impact Analysis

Instructions:

In completing the environmental impact analysis, an agency analyzes and evaluates the anticipated environmental impacts (positive or negative) to be expected from adoption of the rule; compares alternatives to adopting the rule; explains the sufficiency of the environmental impact analysis. If no impacts are anticipated, please specify “No impact anticipated” in the field.

Examples of Environmental Impacts include but are not limited to:

- Impacts on the emission of greenhouse gases
- Impacts on the discharge of pollutants to water
- Impacts on the arability of land
- Impacts on the climate
- Impacts on the flow of water
- Impacts on recreation
- Or other environmental impacts

1. TITLE OF RULE FILING:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

2. ADOPTING AGENCY:

Agency of Human Services - Vermont Department of Health

3. GREENHOUSE GAS: *EXPLAIN HOW THE RULE IMPACTS THE EMISSION OF GREENHOUSE GASES (E.G. TRANSPORTATION OF PEOPLE OR GOODS; BUILDING INFRASTRUCTURE; LAND USE AND DEVELOPMENT, WASTE GENERATION, ETC.):*
No anticipated impact.

4. WATER: *EXPLAIN HOW THE RULE IMPACTS WATER (E.G. DISCHARGE / ELIMINATION OF POLLUTION INTO VERMONT WATERS, THE FLOW OF WATER IN THE STATE, WATER QUALITY ETC.):*
No anticipated impact.

5. LAND: *EXPLAIN HOW THE RULE IMPACTS LAND (E.G. IMPACTS ON FORESTRY, AGRICULTURE ETC.):*
No anticipated impact.

6. **RECREATION:** *EXPLAIN HOW THE RULE IMPACTS RECREATION IN THE STATE:*
No anticipated impact.
7. **CLIMATE:** *EXPLAIN HOW THE RULE IMPACTS THE CLIMATE IN THE STATE:*
No anticipated impact.
8. **OTHER:** *EXPLAIN HOW THE RULE IMPACT OTHER ASPECTS OF VERMONT'S ENVIRONMENT:*
No anticipated impact.
9. **SUFFICIENCY:** *DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*
The estimate is based on information available to the Department.

Public Input Maximization Plan

Instructions:

Agencies are encouraged to hold hearings as part of their strategy to maximize the involvement of the public in the development of rules. Please complete the form below by describing the agency's strategy for maximizing public input (what it did do, or will do to maximize the involvement of the public).

This form must accompany each filing made during the rulemaking process:

1. TITLE OF RULE FILING:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

2. ADOPTING AGENCY:

Agency of Human Services - Vermont Department of Health

3. PLEASE DESCRIBE THE AGENCY'S STRATEGY TO MAXIMIZE PUBLIC INVOLVEMENT IN THE DEVELOPMENT OF THE PROPOSED RULE, LISTING THE STEPS THAT HAVE BEEN OR WILL BE TAKEN TO COMPLY WITH THAT STRATEGY:

Targeted outreach will continue to the parties listed below. Additionally, a public hearing will be held.

The rule will be posted on the Department of Health website:

http://healthvermont.gov/admin/public_comment.aspx.

4. BEYOND GENERAL ADVERTISEMENTS, PLEASE LIST THE PEOPLE AND ORGANIZATIONS THAT HAVE BEEN OR WILL BE INVOLVED IN THE DEVELOPMENT OF THE PROPOSED RULE:

The following have been consulted and included in development discussions:

The State Interagency Team created by Act 264 (1988)

The Local Interagency Teams created by Act 264 (1988)

The Act 264 Advisory Board created by Act 264 (1988)

Parents of youth who may seek services at a Vermont PRTF

Public Input

Vermont Family Network

Vermont Federation of Families

Vermont Care Partners

Incorporation by Reference

THIS FORM IS ONLY REQUIRED WHEN INCORPORATING MATERIALS BY REFERENCE. PLEASE REMOVE PRIOR TO DELIVERY IF IT DOES NOT APPLY TO THIS RULE FILING:

Instructions:

In completing the incorporation by reference statement, an agency describes any materials that are incorporated into the rule by reference and how to obtain copies.

This form is only required when a rule incorporates materials by referencing another source without reproducing the text within the rule itself (e.g., federal or national standards, or regulations).

Incorporated materials will be maintained and available for inspection by the Agency.

1. TITLE OF RULE FILING:

**Psychiatric Residential Treatment Facility for Youth
Licensing Rule**

2. ADOPTING AGENCY:

Agency of Human Services - Vermont Department of Health

3. DESCRIPTION (*DESCRIBE THE MATERIALS INCORPORATED BY REFERENCE*):

Sec. 3.3 refers to 42 C.F.R. § 441.150-441.184 (Subpart D) and 42 C.F.R. § 483.350-483.376 (Subpart G) of the Code of Federal Regulations;

Sec. 3.15 refers to 42 C.F.R. § 441.152;

Sec. 5.1.1.2 refers to section 1135 of the Social Security Act during an emergency as defined in 42 U.S.C. § 1320b-5;

Sec. 5.7.1 refers to 42 C.F.R. § 441.184 and the associated guidelines;

Sec. 5.7.2 refers to 42 C.F.R. § 441.184(e);

Sec. 5.8.1 refers to 42 C.F.R. § 483.374;

Sec. 5.8.2 refers to 42 C.F.R. § 483.374(b) and (c);
Sec. 7.0 refers to the Regulation Establishing
Standards for Emergency Involuntary Procedures of the
Vermont Department of Mental Health ("Department of
Mental Health Rule")

4. FORMAL CITATION OF MATERIALS INCORPORATED BY REFERENCE:

42 CFR Part 441 Subpart D; 42 CFR Part 483 Subpart G;
42 CFR 441.152; 42 U.S. Code § 1320b-5; 42 CFR 441.184;
42 CFR 441.184(e); 42 CFR 483.374; 42 CFR 483.374(b)
and (c); and Regulation Establishing Standards for
Emergency Involuntary Procedures of the Vermont
Department of Mental Health ("Department of Mental
Health Rule").

5. OBTAINING COPIES: *(EXPLAIN WHERE THE PUBLIC MAY OBTAIN THE MATERIAL(S) IN WRITTEN OR ELECTRONIC FORM, AND AT WHAT COST):*

These references are all publicly available for free on
publicly accessible government websites. For a printed
copy, please contact Sarah Gregorek at 802-863-7280.

6. MODIFICATIONS *(PLEASE EXPLAIN ANY MODIFICATION TO THE INCORPORATED MATERIALS E.G., WHETHER ONLY PART OF THE MATERIAL IS ADOPTED AND IF SO, WHICH PART(S) ARE MODIFIED):*

There are adaptations to the Regulation Establishing
Standards for Emergency Involuntary Procedures of the
Vermont Department of Mental Health Rule applying to
the PRTF rule. The modifications are noted in Sec. 7.0.

Additionally, certain parts of the CFR are not used.
These include: 42 C.F.R. § 441.151(a)(3)(i) and (ii)
("...or, if the individual was receiving the services
immediately before he or she reached age 21, before the
earlier of the following- (i) The date the individual
no longer requires the services; or (ii) The date the
individual reaches 22...") shall not be included in the
meaning of "CMS Conditions of Participation for
psychiatric residential treatment facilities" or "CoPs"
as used in these Rules.

Interagency Committee on Administrative Rules (ICAR) Minutes

Date/Time: July 14, 2025, 2:00 PM

Location: Virtually via Microsoft Teams

Members Present: Chair Nick Kramer, Diane Sherman, Jared Adler, Jennifer Mojo, John Kessler, Natalie Weill, and Nicole Dubuque

Members Absent: Michael Obuchowski

Minutes By: Chrissy Gilhuly

- ▶ 2:00 p.m. meeting called to order.
- ▶ Review and approval of minutes from the June 9, 2025 [meeting](#).
- ▶ No additions/deletions to agenda. Agenda approved as drafted.
- ▶ Note an emergency rule titled Manufactured Food Emergency Rule by the Agency of Human Services - Vermont Department of Health was supported by ICAR Chair Kramer on July 3, 2025. Act 42 (2025) Sec. 6 requires the Department of Health to adopt an emergency rule for the purpose of implementing and administering the Act prior to regular rulemaking.
- ▶ No public comments made.
- ▶ Presentation of Proposed Rules with recommended changes on pages to follow.
 - 1) Psychiatric Residential Treatment Facility for Youth Licensing Rule, Agency of Human Services, Vermont Department of Health
 - 2) Manufactured Food Rule, Agency of Human Services, Vermont Department of Health
- ▶ Next scheduled meeting is August 11, 2025 at 2:00 p.m.
- ▶ 2:40 p.m. meeting adjourned.

To receive this information in an alternative format or for other accessibility requests, please contact:

Agency of Administration
ADM.Secretary@vermont.gov, 802-828-3322

Vermont Agency of Administration

Proposed Rule: Psychiatric Residential Treatment Facility for Youth Licensing Rule, Agency of Human Services, Vermont Department of Health

Presented By: Natalie Weill and Jessica Schifano

Motion made to accept the rule by John Kessler, seconded by Nicole Dubuque, and passed unanimously except for Natalie Weill, who abstained, with the following recommendations:

- 1) Proposed Filing – Coversheet:
 - a. #8: Include additional information regarding the conditions and requirements.
- 2) Adopting Page:
 - a. #4: Change to more clarifying language, recommend spelling out N/A to 'not applicable as it is a new rule.'
- 3) Economic Impact Analysis:
 - a. #3: Spell out the acronym 'CMS' the first time used and include in parentheses.
 - b. #3: Confirm correct statutory reference throughout filing (it appears the charge to adopt the rule is 18 V.S.A. § 7261 (e)).
- 4) Incorporation by Reference:
 - a. #5: Include additional information on how to receive a hard copy.
- 5) The Proposed Rule:
 - a. Cross referencing sections can be ambiguous; suggest using lower case or language specifying the 'rule' for distinction.
 - b. (Additional note not mentioned during the meeting: #5.1.1: Add a space between Rule and 3.3.)

Public Comment Response Summary

The Department of Health (Department) held a hybrid (with in-person and virtual participation options) public hearing on 8/29/25, at the Agency of Human Service State Office Complex, in Waterbury, Vermont and on Microsoft Teams, for the proposed Psychiatric Residential Treatment Facility for Youth Licensing (PRTF) Rule and accepted written comments through 9/5/2025. The following is a summary of comments received from the public and the Department's response to each comment. Comments of a similar or consistent nature have been consolidated and responded to accordingly.

- 1. Comment:** An individual asked for the total number of licenses available for PRTFs in Vermont. The individual also recommended that there be a limit of total licenses available and for the PRTF Licensing Rule to "lessen the amount of these types of facilities that are often centers of abuse and neglect and really horrid things that happen to children that are housed in these types of settings." Moreover, the individual referenced that the National Disability Rights Network calls for "these types of centers to be brought to zero."

Response: While the Department does not have the legal authority to limit total licenses and cannot make revisions to the requirements in the Rule as suggested by the commenter, the Agency of Human Services remains committed to the community-based care model. Entities seeking a license are subject to an application process that includes inspections and oversight from the Vermont Department of Disabilities Aging and Independent Living, Division of Licensing and Protection (DLP), the Department of Health, and the Office of Professional Regulation. Further, applicants for a license and licensees must be in compliance with Centers for Medicare & Medicaid Services (CMS) obligations. Age requirements are established for the youth residents at a PRTF. Pursuant to Section 3.15 of the Rule, only 12–21-year-olds may be residents at the facility to maintain a focus on age-appropriate services and to help maintain the safety of all residents. Instances of abuse or neglect must be reported to DLP pursuant to their requirements. In addition, critical incident reports pursuant to 18 V.S.A. § 7257(a) must be reported to the Department of Mental Health and the Department.

- 2. Comment:** An individual asked about the defined term "Resident Complaint" in Section 3.11, questioning "what" and "who" determines that the issue has been resolved. Moreover, the individual asked if the resident's input is considered in the determination of whether the issue has been resolved. Furthermore, the individual commented that "it is problematic to only have that be a staff choice without the youth that is being held in this facility also agreeing to a resolve of a complaint that occurs within this type of setting."

Response: According to the CMS State Operations Manual, a complaint is considered resolved when the resident is satisfied with the actions taken on their behalf. The Rule requires complaints that are filed with the PRTF to be subject to the facility's internal procedures, which must comply with CMS obligations and are reviewed by the DLP to ensure compliance. The State Operations Manual requires that a PRTF have an established process for prompt resolutions of resident complaints. If the resident is dissatisfied with the facility's processes or outcomes, they may seek further recourse by filing their complaint directly with the Department or with a professional board (e.g., the Board of Medical Practice). Complaints do not need to be filed internally with the PRTF before a complaint can be filed directly with the Department or with a professional board. Pursuant to Section 6.2.2, a PRTF is required to provide notice that a complainant may directly contact the Department, the Board of Medical Practice, or the licensing authorities for other health

care professions. The notice must contain the addresses and phone numbers for the Board of Medical Practice and the Office of Professional Regulation. If a complaint is filed directly with the Department or a professional board, the process within the Department proceeds through an established appeals process. Furthermore, annually, a PRTF must submit to the Department an aggregated summary of all internal complaints filed internally with the PRTF by residents or their representatives. Given these requirements in the Rule, the Department has determined that the Rule does not need to be revised in response to the commenter's suggestion.

3. **Comment:** An individual asked about Section 6.1.1 questioning if the plain language and easily readable print copy of the facility's complaint policy and a copy of the complaint form is required to be "available to all residents at all times." The individual also recommended that in addition to the plain language and easily readable print copy of the facility's complaint policy and a copy of the complaint form, residents should also be given frequent (for example, "quarterly") verbal explanations of these documents and processes. The individual expressed concern if residents are only receiving this information upon entry into the PRTF when "it can be an incredibly traumatic, life-changing, difficult-to-navigate time."

The individual also recommended that in addition to the availability of the facility's complaint policy and a copy of the complaint form, there should also be a phone number to an "external advocacy agency, organization rights and protected advocacy." The individual recommended that there should be an external entity that responds to complaints and that complaints should not be handled internally only.

Response: Section 6.1.2 of the Rule requires that a PRTF have the complaint policy and complaint form posted conspicuously in areas visited frequently by residents and posted on the facility's website. Reflected in Section 6.0 of the Rule is the Department's decision to establish a minimum floor of the required components and processes for complaints and notice, allowing a PRTF the flexibility to incorporate and tailor further elements into their complaint process at their discretion. While the Rule does not explicitly require a facility to offer verbal reminders in addition to conspicuous posting, facilities are able to include verbal reminders of their complaint policies in their internal policies. Given these requirements in the Rule, the Department has determined that the Rule does not need to be revised in response to the commenter's suggestion.

Additionally, Section 6.2.4 of the Rule already requires that the PRTF provide notice to residents about Mental Health Patient Representatives and their contact information. Mental Health Patient Representatives are defined by 18 V.S.A. § 7253(1)(J) as "an independent, peer-run organization to staff the full-time equivalent of a representative of persons receiving services." Thus, the Department finds that Section 6.2.4 of the Rule does not need to be revised in response to the commenter's suggestion. Further, pursuant to Section 6.2.2, a PRTF is required to provide notice that a complainant may directly contact the Department, the Board of Medical Practice, or the licensing authorities for other health care professions. The notice must contain the addresses and phone numbers for the Board of Medical Practice and the Office of Professional Regulation. Complaints do not need to be filed internally before a complaint can be filed directly with the Department or with a professional board.

4. **Comment:** An individual asked about the defined term "Mental Health Patient Representative" in Section 3.10, questioning what the qualifications are to be considered a Mental Health Patient Representative. Additionally, the individual recommended that this position be externally sourced so that "there are external protections and advocacy agency supports...interacting with the folks within these facilities as an external connected point to these young people, not just staff of these facilities and agencies."

Response: The qualifications for a Mental Health Patient Representative are defined by 18 V.S.A. § 7253(1)(J), which states that they be "an independent, peer-run organization to staff the full-time equivalent

of a representative of persons receiving services.” Given this definition, the Department has determined that the Rule does not need to be revised in response to the commenter’s suggestion.

Psychiatric Residential Treatment Facility for Youth Licensing Rule

1.0 Authority

This Rule is adopted pursuant to 18 V.S.A. § 7261(e).

2.0 Purpose

This Rule sets forth the standards that apply to the licensing of psychiatric residential treatment facilities for youth (PRTF) in Vermont.

3.0 Definitions

- 3.1 “Accreditation” means the formal recognition by an approved accrediting body, such as the Joint Commission, that indicates conformity with the accrediting body’s required set of standards and criteria for a PRTF.
- 3.2 “CMS” means the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services.
- 3.3 “CMS Conditions of Participation for psychiatric residential treatment facilities for youth” or “CoPs” means 42 C.F.R. § 441.150-441.184 (Subpart D) and 42 C.F.R. § 483.350-483.376 (Subpart G) of the Code of Federal Regulations, as may be updated or amended, and related laws and regulations, interpretive guidelines, appendices, and requirements, except that 42 C.F.R. § 441.151(a)(3)(i) and (ii) (“...or, if the individual was receiving the services immediately before he or she reached age 21, before the earlier of the following— (i) The date the individual no longer requires the services; or (ii) The date the individual reaches 22...”)) shall not be included in the meaning of “CMS Conditions of Participation for psychiatric residential treatment facilities for youth” or “CoPs” as used in this Rule.
- 3.4 “Commissioner” means the Commissioner of the Vermont Department of Health.
- 3.5 “Deemed Status” means the status granted to a PRTF by a CMS-approved national accrediting body, such as the Joint Commission or other accrediting organization that has comparable standards and is recognized by the Commissioner of Mental Health, after it has surveyed the PRTF and determined it is in compliance with all CMS Conditions of Participation.
- 3.6 “Deficiency” means a policy, procedure, practice, or action by a PRTF that results in the facility not being in compliance with this Rule or with the CMS Conditions of Participation.
- 3.7 “Department” means the Vermont Department of Health.

- 3.8 “Psychiatric residential treatment facility for youth” or “PRTF” means a nonhospital, inpatient facility that holds accreditation to provide psychiatric services in a residential setting to youth, as defined herein, with complex mental health conditions under the direction of a physician.
- 3.9 “Joint Commission” means the independent not-for-profit organization that accredits and certifies that healthcare organizations meet certain quality and performance standards.
- 3.10 “Mental Health Patient Representative” or “Representative” means a person who advocates for and fosters communication with health care providers on behalf of patients pursuant to a contract with the Department of Mental Health, as called for by 18 V.S.A. § 7253(1)(J).
- 3.11 “Resident Complaint” means any expression of dissatisfaction with the care and treatment provided by a PRTF, from a resident or the resident’s Mental Health Patient Representative. In this Rule, the term includes a resident “grievance,” which in the CoPs and CMS State Operations Manual specifically refers to complaints presented to and resolved or attempted to be resolved within a facility’s internal system. It does not include matters that are resolved by staff present.
- 3.12 “Plan of Correction” means a written plan that a licensee is required to submit to address any identified Deficiency to bring a PRTF into compliance with this Rule.
- 3.13 “State Survey Agency” means the unit of Vermont state government designated by the Centers for Medicare and Medicaid Services to enforce the federal Conditions of Participation for hospitals and PRTFs in Vermont, which is the Vermont Department of Disabilities, Aging and Independent Living.
- 3.14 “Validation Survey” means a survey conducted by the State Survey Agency on behalf of CMS to ensure that a PRTF with Deemed Status is in compliance with the CMS conditions of participation.
- 3.15 “Youth” means a resident who is certified in writing to be in need of the services in the PRTF setting in accordance with 42 C.F.R. § 441.152;
- 3.15.1 who is at least 12-years-old and up to 18-years-old; and
- 3.15.2 who is at least 18-years-old and up to 21-years-old, if the resident
- 3.15.2.1 was receiving services in a PRTF at the time they reach age 18; and
- 3.15.2.2 continues to require the services provided at the PRTF.

4.0 Application for a Psychiatric Residential Treatment Facility for Youth License

- 4.1 No organization or individual may establish, conduct, or maintain operation of a PRTF in Vermont without being granted a license by the Vermont Department of Health.
- 4.2 Every Vermont PRTF license shall expire on December 31 of each year unless otherwise revoked.
- 4.3 An application for a PRTF license, or renewal of a license, shall be submitted in the form required by the Department and available on its webpage. Renewal applications shall be submitted on or before the date set by the Department.
- 4.4 Applications for an initial license and applications for license renewal shall contain all the information required by the Department. The required information shall include
 - 4.4.1 Identifying information and all facility locations.
 - 4.4.2 Administrative officers and contact information for the person completing the application.
 - 4.4.3 Type and form of organization, documentation of registered status as a nonprofit entity, and CMS designation.
 - 4.4.4 Certification and accreditation status.
 - 4.4.5 Numbers of beds.
 - 4.4.6 Verification of other statutory requirements.
 - 4.4.7 Information regarding the plan for handling of resident complaints and the staff member responsible for that program.
- 4.5 Applications for a PRTF license or renewal shall certify compliance with health, safety, and sanitary standards required by law.
- 4.6 Unless the Department specifies a different time or format for response, a PRTF that receives an inquiry from the Department regarding the licensing application shall furnish all information requested within ten (10) working days of receipt. Failure to meet submission deadlines may delay action on an application.

5.0 Requirements for Psychiatric Residential Treatment Facility for Youth Licensure in Vermont

5.1 Compliance with CMS Conditions of Participation

5.1.1 To be licensed and retain licensure in Vermont, each PRTF shall comply with all applicable CMS Conditions of Participation referenced in Section 3.3 of this Rule unless

5.1.1.1 Operating under a Plan of Correction as described in Section 8.4 of this Rule; or

5.1.1.2 Operating under a waiver granted under Section 1135 of the Social Security Act during an emergency as defined in 42 U.S.C. § 1320b-5.

5.1.2 To demonstrate compliance with CoPs, each Vermont PRTF facility shall make the premises and appropriate staff available for a comprehensive, on-site and unannounced survey by the State Survey Agency

5.1.2.1 Occurring on average once every five years or at a frequency determined by CMS;

5.1.2.2 Whenever CMS requires a Validation Survey for an accredited PRTF with Deemed Status; or

5.1.2.3 Whenever the Department or its designee determines that a survey is required as referenced in Section 5.2 of this Rule.

5.1.3 As part of the annual PRTF licensing process, both for initial licenses and at renewal, each PRTF shall provide to the Department any documents necessary to verify for the Department that the PRTF has met the requirements of the CoPs.

5.2 Demonstrating Compliance with CMS CoPs by Deemed Status

5.2.1 As long as CMS recognizes that a PRTF accredited by the Joint Commission and with Deemed Status meets the compliance requirements of the CoPs, each accredited PRTF with Deemed Status shall be considered by the State Survey Agency and the Department to have met the CoPs unless and until their accreditation is revoked or cancelled.

5.2.2 If a PRTF relies on an accrediting body other than the Joint Commission to determine that it has met the CoPs, the PRTF shall provide verification that CMS has approved the accrediting body to authorize Deemed Status.

5.2.3 A PRTF with Deemed Status shall make the institution available for a Validation Survey by the State Survey Agency when CMS requires a

Validation Survey.

- 5.3 A PRTF license is not transferable or assignable and shall be issued only for the premises and persons named in the application. A licensed PRTF contemplating a change of ownership, or the elimination or significant reduction of clinical services shall provide at least ninety (90) days advance notice to the Department.
- 5.4 The PRTF license shall be posted in a conspicuous place on the licensed premises.
- 5.5 A PRTF shall follow up with residents within 72 hours of discharge. This shall be done by the most effective means possible including via email, text, or phone. A PRTF shall continue to follow up with the resident until either contact is made, or at least 5 attempts every 24 hours for up to 72 hours have been made and documented.

5.6 **Health and Life Safety and Other Regulatory Requirements**

In addition to conforming to all CoPs, each Vermont PRTF seeking licensure shall comply with all applicable current state and municipal laws including, but not limited to, the Department of Public Safety Rules on Vermont Fire and Building Safety Codes and other Vermont laws related to food safety.

5.7 **Emergency Preparedness Planning**

- 5.7.1 Each Vermont PRTF shall have an Emergency Preparedness Plan as required by CMS regulations at 42 C.F.R. § 441.184 and the associated guidelines.
- 5.7.2 A PRTF that is affiliated with a Vermont-licensed hospital may satisfy the requirement for an Emergency Preparedness Plan as a participant in the hospital's Emergency Preparedness Plan if the requirements of 42 C.F.R. § 441.184(e) are met.
- 5.7.3 Each PRTF shall provide a copy of its Emergency Preparedness Plan to the Department for review if requested.

5.8 **Reporting of Events to the Department**

- 5.8.1 A PRTF shall provide the Department with a copy of any report that is required to be filed with the Vermont's State Medicaid Agency, the Department of Vermont Health Access, pursuant to 42 C.F.R. § 483.374.
- 5.8.2 Reports shall be submitted to the Department within the timelines specified in 42 C.F.R. § 483.374(b) and (c). A PRTF shall, upon a request by the

Department or the State Survey Agency, provide the Department or the State Survey Agency with copies of reports that were previously filed with the Department of Mental Health pursuant to Section 5.1 of the Regulation Establishing Standards for Emergency Involuntary Procedures of the Vermont Department of Mental Health

- 5.8.3 Within a week of receipt, the Vermont Department of Mental Health shall provide the Department with a redacted Critical Incident Report, filed pursuant to 18 V.S.A. § 7257(a), that resulted from an Emergency Involuntary Procedure. Additional information regarding the Critical Incident Report shall be provided to the Department upon request in accordance with Section 5.8.1 of this Rule.

6.0 Complaint Process

6.1 Notice to Residents

Each Vermont PRTF shall

- 6.1.1 Distribute to all residents, upon admission on an inpatient basis, a plain language and easily readable print copy of the facility's complaint policy and a copy of the complaint form. For residents who are under 18 years of age or subject to guardianship, the policy and form shall also be provided to the resident's parent or guardian.
- 6.1.2 Post conspicuously the facility's complaint policy in areas frequented by residents and resident representatives and on the facility's website.
- 6.1.3 Provide during each annual licensure application its current procedure for informing residents of the complaint policy.

6.2 Procedures for Responding to Resident Complaints

A PRTF's complaint policy shall include the following minimum elements:

- 6.2.1 A description of the procedure for filing and appealing a complaint to the PRTF, clearly labeled, "To file a complaint" or "What to do if you are not satisfied with our response to your complaint". Other descriptors such as "resident concerns" or "consumer feedback" may be used, but only in addition to "To file a complaint" or "What to do if you are not satisfied with our response to your complaint."
- 6.2.2 A notice that a complainant may directly contact the Department, the Board of Medical Practice, or the licensing authorities for other health care

professions as an alternative, or in addition, to the PRTF's complaint and appeal procedures. The notice shall include the address and phone numbers for the Board of Medical Practice and the Office of Professional Regulation.

6.2.3 A published time frame for processing and resolving complaints and appeals within the PRTF and notice that further appeals may be made to the Department.

6.2.4 A notice that the PRTF has designated a qualified person or persons to act in the role of Mental Health Patient Representative. The notice shall include the title, qualifications, and general duties of the Representative(s) and the phone and e-mail contact information for the current Representative(s);

6.2.5 A description of internal procedures for receiving, processing, and resolving complaints from or filed on behalf of residents. Such procedures must ensure that the PRTF complies with the Conditions of Participation requirements for grievances.

6.2.6 Each PRTF shall be prepared to demonstrate to the Department that the facility has an adequate system to create and maintain records of complaints presented by residents and their representatives.

6.3 **Reporting Complaint Data**

At least annually, on a schedule and in a format acceptable to the Commissioner, a PRTF shall submit to the Department a report summarizing, in aggregate, the types of complaints filed with the PRTF by residents or their representatives in the past year. The report shall contain

6.3.1 The number of inpatient days for the reporting period;

6.3.2 The total number of complaints received;

6.3.3 The total number of complaints in each of the categories the PRTF uses to track complaints; and

6.3.4 A brief narrative report describing examples of actions taken to resolve complaints in the past year.

7.0 **Emergency Involuntary Procedures**

7.1 In accordance with 18 V.S.A. § 7621(e), this Rule incorporates the Regulation Establishing Standards for Emergency Involuntary Procedures of the Vermont Department of Mental Health ("Department of Mental Health Rule"), as it exists at the time of the adoption of this Rule and as may be amended from time to time.

- 7.2 In applying the Department of Mental Health Rule to situations involving a PRTF, the following adaptations are necessary.
- 7.2.1 Throughout the Department of Mental Health Rule “hospital” shall be read as “psychiatric residential treatment facility for youth.”
- 7.2.2 Throughout the Department of Mental Health Rule “hospitalized individuals” shall be read as “individuals being treated in a psychiatric residential treatment facility for youth.”
- 7.2.3 Section 1.1(e) of the Department of Mental Health Rule shall be read as: “These rules apply to individuals being treated in a psychiatric residential treatment facility for youth.”
- 7.2.4 The statutory authority for adoption of the rule for psychiatric residential treatment facilities for youth is 18 V.S.A. § 7261(e).
- 7.2.5 At Section 2.2(h) of the Department of Mental Health Rule, “licensed under Chapters 23 or 33 of Title 26, Vermont Statutes Annotated” shall be inserted after “physician.” Section 2.2(j) of the Department of Mental Health Rule shall be read as: “Physician assistant means an individual licensed by the Board of Medical Practice as a physician assistant. A physician assistant may prescribe, dispense, and administer drugs and medical devices so long as the act is within their education, training, and experience and not prohibited by their practice agreement.”
- 7.2.6 At Section 4.1(a) of the Department of Mental Health Rule, the final clause shall be replaced by the following: “who practices pursuant to a practice agreement with a psychiatrist.”

8.0 Enforcement

- 8.1 The Commissioner may use any and all powers granted under Title 18 of the Vermont Statutes Annotated in the course of monitoring, investigating, or otherwise ensuring compliance with the requirements of this Rule.
- 8.2 Notwithstanding a CMS-approved national accrediting body’s determination that a PRTF has met CoPs through surveys or Deemed Status, the Department or its designee may inspect, independently review, or investigate a PRTF at any time, to determine whether a PRTF is in compliance with requirements for PRTF licensure under Vermont law.
- 8.3 If the Department determines that a PRTF is not in full compliance with any requirements of this Rule, it shall notify the PRTF of the Deficiency.

- 8.4 When notified of a Deficiency, a PRTF shall within 10 business days, or such shorter period as may be specified in the notice for good cause, develop and submit a Plan of Correction for addressing any identified Deficiency and for achieving compliance with this Rule.
- 8.5 Department Review and Response to Plan of Correction
- 8.5.1 The Department shall determine whether a Plan of Correction submitted pursuant to Section 7.4 of this Rule is sufficient to effectively address each identified Deficiency and bring the PRTF in compliance with the requirements of this Rule.
- 8.5.2 Within thirty (30) days after receipt of a Plan of Correction, the Department shall notify the PRTF related to each identified Deficiency that the Department:
- 8.5.2.1 Accepts the Plan of Correction; or
- 8.5.2.2 Requests a revision to the Plan of Correction specifying the reasons for the request.
- 8.5.3 A PRTF required to submit a revised Plan of Correction pursuant to Section 8.5.2.2 of this Rule shall develop and submit the revision within thirty (30) days during which time the Department shall make available a representative to review with the PRTF any proposed revisions.
- 8.6 If, after reviewing a revised Plan of Correction, the Department determines that a PRTF is not in full compliance with this Rule or cannot comply with this Rule or the PRTF's Plan of Correction, the Department may find that the PRTF is in violation or substantial violation of this Rule.
- 8.7 If the Department finds that a PRTF is in violation of this Rule it may, in accordance with Sections 8.9 and 9.0 of this Rule,
- 8.7.1 Modify a current license to make it subject to fulfillment of specified conditions, including requirements for the submission of written plans, progress reports and any other information required by the Department that demonstrates to the satisfaction of the Department and Commissioner that the PRTF is actively and effectively taking all necessary steps to comply with its license conditions;
- 8.7.2 Issue or renew a license subject to fulfillment of specified conditions, including requirements for the submission of written plans, progress reports and any other information required by the Department that demonstrates to the satisfaction of the Department and Commissioner

that the PRTF is actively and effectively taking all necessary steps to comply with its license conditions; or

8.7.3 Issue a temporary license to the PRTF for a total period not to exceed thirty-six consecutive months, specifying requirements for the submission of written plans, progress reports and any other information required by the Department that demonstrates to the satisfaction of the Department and Commissioner that the PRTF is actively and effectively taking all necessary steps to come into full compliance within the period of time permitted by the temporary license.

8.8 If the Department finds that a PRTF is in substantial violation of this Rule it may, in accordance with Sections 8.9 and 9.0 of this Rule,

8.8.1 Not issue or renew the PRTF's license;

8.8.2 Revoke the PRTF's license; and/or

8.8.3 Impose, or recommend that the Department impose, any other penalties permitted by law.

8.9 In the event that the Department intends to take any of the actions set forth in Sections 8.7 and 8.8 of this Rule, the following due process procedures consistent with 18 V.S.A. § 7261(f) and 3 V.S.A. Ch. 25 relating to contested cases, shall be followed:

8.9.1 Notice shall be served on the PRTF by registered mail or by personal service, setting forth detailed reasons for the proposed action, complying with 3 V.S.A. § 809(a), and fixing a date not less than sixty (60) days from the date of such mailing or service at which the PRTF shall be given opportunity for a hearing.

8.9.2 The PRTF may, within thirty (30) days after issuance of the decision of the Commissioner, appeal to the Vermont Superior Court in the county where the PRTF is located. The court may affirm, modify, or reverse the decision of the Commissioner and either the PRTF or the Department may appeal to the Vermont Supreme Court for such further review as is provided by law.

9.0 Informing Residents of Investigation Completion

Upon completion of an investigation and determination as to whether an action is to be pursued under Sections 8.7 or 8.8 of this Rule, the Department will provide the Complainant or his or her representative notice in writing. The notice shall state that the investigation is complete and whether a public proceeding regarding the license of the subject facility will result. Notice will be sent promptly and in no case more than 14 days after the determination is made and shall include the time and place of any public proceeding.

Psychiatric Residential Treatment Facility for Youth Licensing Rule

1.0 Authority

This Rule is adopted pursuant to 18 V.S.A. § 7261(e).

2.0 Purpose

This Rule sets forth the standards that apply to the licensing of psychiatric residential treatment facilities for youth (PRTF) in Vermont.

3.0 Definitions

- 3.1 “Accreditation” means the formal recognition by an approved accrediting body, such as the Joint Commission, that indicates conformity with the accrediting body’s required set of standards and criteria for a PRTF.
- 3.2 “CMS” means the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services.
- 3.3 “CMS Conditions of Participation for psychiatric residential treatment facilities for youth” or “CoPs” means 42 C.F.R. § 441.150-441.184 (Subpart D) and 42 C.F.R. § 483.350-483.376 (Subpart G) of the Code of Federal Regulations, as may be updated or amended, and related laws and regulations, interpretive guidelines, appendices, and requirements, except that 42 C.F.R. § 441.151(a)(3)(i) and (ii) (“...or, if the individual was receiving the services immediately before he or she reached age 21, before the earlier of the following— (i) The date the individual no longer requires the services; or (ii) The date the individual reaches 22...”)) shall not be included in the meaning of “CMS Conditions of Participation for psychiatric residential treatment facilities for youth” or “CoPs” as used in this Rule.
- 3.4 “Commissioner” means the Commissioner of the Vermont Department of Health.
- 3.5 “Deemed Status” means the status granted to a PRTF by a CMS-approved national accrediting body, such as the Joint Commission or other accrediting organization that has comparable standards and is recognized by the Commissioner of Mental Health, after it has surveyed the PRTF and determined it is in compliance with all CMS Conditions of Participation.
- 3.6 “Deficiency” means a policy, procedure, practice, or action by a PRTF that results in the facility not being in compliance with this Rule or with the CMS Conditions of Participation.
- 3.7 “Department” means the Vermont Department of Health.

- 3.8 “Psychiatric residential treatment facility for youth” or “PRTF” means a nonhospital, inpatient facility that holds accreditation to provide psychiatric services in a residential setting to youth, as defined herein, with complex mental health conditions under the direction of a physician.
- 3.9 “Joint Commission” means the independent not-for-profit organization that accredits and certifies that healthcare organizations meet certain quality and performance standards.
- 3.10 “Mental Health Patient Representative” or “Representative” means a person who advocates for and fosters communication with health care providers on behalf of patients pursuant to a contract with the Department of Mental Health, as called for by 18 V.S.A. § 7253(1)(J).
- 3.11 “Resident Complaint” means any expression of dissatisfaction with the care and treatment provided by a PRTF, from a resident or the resident’s Mental Health Patient Representative. In this Rule, the term includes a resident “grievance,” which in the CoPs and CMS State Operations Manual specifically refers to complaints presented to and resolved or attempted to be resolved within a facility’s internal system. It does not include matters that are resolved by staff present.
- 3.12 “Plan of Correction” means a written plan that a licensee is required to submit to address any identified Deficiency to bring a PRTF into compliance with this Rule.
- 3.13 “State Survey Agency” means the unit of Vermont state government designated by the Centers for Medicare and Medicaid Services to enforce the federal Conditions of Participation for hospitals and PRTFs in Vermont, which is the Vermont Department of Disabilities, Aging and Independent Living.
- 3.14 “Validation Survey” means a survey conducted by the State Survey Agency on behalf of CMS to ensure that a PRTF with Deemed Status is in compliance with the CMS conditions of participation.
- 3.15 “Youth” means a resident who is certified in writing to be in need of the services in the PRTF setting in accordance with 42 C.F.R. § 441.152;
- 3.15.1 who is at least 12-years-old and up to 18-years-old; and
- 3.15.2 who is at least 18-years-old and up to 21-years-old, if the resident
- 3.15.2.1 was receiving services in a PRTF at the time they reach age 18; and
- 3.15.2.2 continues to require the services provided at the PRTF.

4.0 Application for a Psychiatric Residential Treatment Facility for Youth License

- 4.1 No organization or individual may establish, conduct, or maintain operation of a PRTF in Vermont without being granted a license by the Vermont Department of Health.
- 4.2 Every Vermont PRTF license shall expire on December 31 of each year unless otherwise revoked.
- 4.3 An application for a PRTF license, or renewal of a license, shall be submitted in the form required by the Department and available on its webpage. Renewal applications shall be submitted on or before the date set by the Department.
- 4.4 Applications for an initial license and applications for license renewal shall contain all the information required by the Department. The required information shall include
 - 4.4.1 Identifying information and all facility locations.
 - 4.4.2 Administrative officers and contact information for the person completing the application.
 - 4.4.3 Type and form of organization, documentation of registered status as a nonprofit entity, and CMS designation.
 - 4.4.4 Certification and accreditation status.
 - 4.4.5 Numbers of beds.
 - 4.4.6 Verification of other statutory requirements.
 - 4.4.7 Information regarding the plan for handling of resident complaints and the staff member responsible for that program.
- 4.5 Applications for a PRTF license or renewal shall certify compliance with health, safety, and sanitary standards required by law.
- 4.6 Unless the Department specifies a different time or format for response, a PRTF that receives an inquiry from the Department regarding the licensing application shall furnish all information requested within ten (10) working days of receipt. Failure to meet submission deadlines may delay action on an application.

5.0 Requirements for Psychiatric Residential Treatment Facility for Youth Licensure in Vermont

5.1 Compliance with CMS Conditions of Participation

5.1.1 To be licensed and retain licensure in Vermont, each PRTF shall comply with all applicable CMS Conditions of Participation referenced in Section 3.3 of this Rule unless

5.1.1.1 Operating under a Plan of Correction as described in Section 8.4 of this Rule; or

5.1.1.2 Operating under a waiver granted under Section 1135 of the Social Security Act during an emergency as defined in 42 U.S.C. § 1320b-5.

5.1.2 To demonstrate compliance with CoPs, each Vermont PRTF facility shall make the premises and appropriate staff available for a comprehensive, on-site and unannounced survey by the State Survey Agency

5.1.2.1 Occurring on average once every five years or at a frequency determined by CMS;

5.1.2.2 Whenever CMS requires a Validation Survey for an accredited PRTF with Deemed Status; or

5.1.2.3 Whenever the Department or its designee determines that a survey is required as referenced in Section 5.2 of this Rule.

5.1.3 As part of the annual PRTF licensing process, both for initial licenses and at renewal, each PRTF shall provide to the Department any documents necessary to verify for the Department that the PRTF has met the requirements of the CoPs.

5.2 Demonstrating Compliance with CMS CoPs by Deemed Status

5.2.1 As long as CMS recognizes that a PRTF accredited by the Joint Commission and with Deemed Status meets the compliance requirements of the CoPs, each accredited PRTF with Deemed Status shall be considered by the State Survey Agency and the Department to have met the CoPs unless and until their accreditation is revoked or cancelled.

5.2.2 If a PRTF relies on an accrediting body other than the Joint Commission to determine that it has met the CoPs, the PRTF shall provide verification that CMS has approved the accrediting body to authorize Deemed Status.

5.2.3 A PRTF with Deemed Status shall make the institution available for a Validation Survey by the State Survey Agency when CMS requires a

Validation Survey.

- 5.3 A PRTF license is not transferable or assignable and shall be issued only for the premises and persons named in the application. A licensed PRTF contemplating a change of ownership, or the elimination or significant reduction of clinical services shall provide at least ninety (90) days advance notice to the Department.
- 5.4 The PRTF license shall be posted in a conspicuous place on the licensed premises.
- 5.5 A PRTF shall follow up with residents within 72 hours of discharge. This shall be done by the most effective means possible including via email, text, or phone. A PRTF shall continue to follow up with the resident until either contact is made, or at least 5 attempts every 24 hours for up to 72 hours have been made and documented.

5.6 Health and Life Safety and Other Regulatory Requirements

In addition to conforming to all CoPs, each Vermont PRTF seeking licensure shall comply with all applicable current state and municipal laws including, but not limited to, the Department of Public Safety Rules on Vermont Fire and Building Safety Codes and other Vermont laws related to food safety.

5.7 Emergency Preparedness Planning

- 5.7.1 Each Vermont PRTF shall have an Emergency Preparedness Plan as required by CMS regulations at 42 C.F.R. § 441.184 and the associated guidelines.
- 5.7.2 A PRTF that is affiliated with a Vermont-licensed hospital may satisfy the requirement for an Emergency Preparedness Plan as a participant in the hospital's Emergency Preparedness Plan if the requirements of 42 C.F.R. § 441.184(e) are met.
- 5.7.3 Each PRTF shall provide a copy of its Emergency Preparedness Plan to the Department for review if requested.

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- 5.8.1 A PRTF shall provide the Department with a copy of any report that is required to be filed with the Vermont's State Medicaid Agency, the Department of Vermont Health Access, pursuant to 42 C.F.R. § 483.374.
- 5.8.2 Reports shall be submitted to the Department within the timelines specified in 42 C.F.R. § 483.374(b) and (c). ~~A PRTF shall, upon a request by the~~

Department or the State Survey Agency, provide the Department or the State Survey Agency with copies of reports that were previously filed with the Department of Mental Health pursuant to Section 5.1 of the Regulation Establishing Standards for Emergency Involuntary Procedures of the Vermont Department of Mental Health

- 5.8.3 Within a week of receipt, the Vermont Department of Mental Health shall provide the Department with a redacted Critical Incident Report, filed pursuant to 18 V.S.A. § 7257(a), that resulted from an Emergency Involuntary Procedure. Additional information regarding the Critical Incident Report shall be provided to the Department upon request in accordance with Section 5.8.1 of this Rule.

6.0 Complaint Process

6.1 Notice to Residents

Each Vermont PRTF shall

- 6.1.1 Distribute to all residents, upon admission on an inpatient basis, a plain language and easily readable print copy of the facility's complaint policy and a copy of the complaint form. For residents who are under 18 years of age or subject to guardianship, the policy and form shall also be provided to the resident's parent or guardian.
- 6.1.2 Post conspicuously the facility's complaint policy in areas frequented by residents and resident representatives and on the facility's website.
- 6.1.3 Provide during each annual licensure application its current procedure for informing residents of the complaint policy.

6.2 Procedures for Responding to Resident Complaints

A PRTF's complaint policy shall include the following minimum elements:

- 6.2.1 A description of the procedure for filing and appealing a complaint to the PRTF, clearly labeled, "To file a complaint" or "What to do if you are not satisfied with our response to your complaint". Other descriptors such as "resident concerns" or "consumer feedback" may be used, but only in addition to "To file a complaint" or "What to do if you are not satisfied with our response to your complaint."
- 6.2.2 A notice that a complainant may directly contact the Department, the Board of Medical Practice, or the licensing authorities for other health care

professions as an alternative, or in addition, to the PRTF's complaint and appeal procedures. The notice shall include the address and phone numbers for the Board of Medical Practice and the Office of Professional Regulation.

- 6.2.3 A published time frame for processing and resolving complaints and appeals within the PRTF and notice that further appeals may be made to the Department.
- 6.2.4 A notice that the PRTF has designated a qualified person or persons to act in the role of Mental Health Patient Representative. The notice shall include the title, qualifications, and general duties of the Representative(s) and the phone and e-mail contact information for the current Representative(s);
- 6.2.5 A description of internal procedures for receiving, processing, and resolving complaints from or filed on behalf of residents. Such procedures must ensure that the PRTF complies with the Conditions of Participation requirements for grievances.
- 6.2.6 Each PRTF shall be prepared to demonstrate to the Department that the facility has an adequate system to create and maintain records of complaints presented by residents and their representatives.

6.3 Reporting Complaint Data

At least annually, on a schedule and in a format acceptable to the Commissioner, a PRTF shall submit to the Department a report summarizing, in aggregate, the types of complaints filed with the PRTF by residents or their representatives in the past year. The report shall contain

- 6.3.1 The number of inpatient days for the reporting period;
- 6.3.2 The total number of complaints received;
- 6.3.3 The total number of complaints in each of the categories the PRTF uses to track complaints; and
- 6.3.4 A brief narrative report describing examples of actions taken to resolve complaints in the past year.

7.0 Emergency Involuntary Procedures

- 7.1 In accordance with 18 V.S.A. § 7621(e), this Rule incorporates the Regulation Establishing Standards for Emergency Involuntary Procedures of the Vermont Department of Mental Health ("Department of Mental Health Rule"), as it exists at the time of the adoption of this Rule and as may be amended from time to time.

- 7.2 In applying the Department of Mental Health Rule to situations involving a PRTF, the following adaptations are necessary.
- 7.2.1 Throughout the Department of Mental Health Rule “hospital” shall be read as “psychiatric residential treatment facility for youth.”
 - 7.2.2 Throughout the Department of Mental Health Rule “hospitalized individuals” shall be read as “individuals being treated in a psychiatric residential treatment facility for youth.”
 - 7.2.3 Section 1.1(e) of the Department of Mental Health Rule shall be read as: “These rules apply to individuals being treated in a psychiatric residential treatment facility for youth.”
 - 7.2.4 The statutory authority for adoption of the rule for psychiatric residential treatment facilities for youth is 18 V.S.A. § 7261(e).
 - 7.2.5 At Section 2.2(h) of the Department of Mental Health Rule, “licensed under Chapters 23 or 33 of Title 26, Vermont Statutes Annotated” shall be inserted after “physician.” Section 2.2(j) of the Department of Mental Health Rule shall be read as: “Physician assistant means an individual licensed by the Board of Medical Practice as a physician assistant. A physician assistant may prescribe, dispense, and administer drugs and medical devices so long as the act is within their education, training, and experience and not prohibited by their practice agreement.”
 - 7.2.6 At Section 4.1(a) of the Department of Mental Health Rule, the final clause shall be replaced by the following: “who practices pursuant to a practice agreement with a psychiatrist.”

8.0 Enforcement

- 8.1 The Commissioner may use any and all powers granted under Title 18 of the Vermont Statutes Annotated in the course of monitoring, investigating, or otherwise ensuring compliance with the requirements of this Rule.
- 8.2 Notwithstanding a CMS-approved national accrediting body’s determination that a PRTF has met CoPs through surveys or Deemed Status, the Department or its designee may inspect, independently review, or investigate a PRTF at any time, to determine whether a PRTF is in compliance with requirements for PRTF licensure under Vermont law.
- 8.3 If the Department determines that a PRTF is not in full compliance with any requirements of this Rule, it shall notify the PRTF of the Deficiency.

- 8.4 When notified of a Deficiency, a PRTF shall within 10 business days, or such shorter period as may be specified in the notice for good cause, develop and submit a Plan of Correction for addressing any identified Deficiency and for achieving compliance with this Rule.
- 8.5 Department Review and Response to Plan of Correction
- 8.5.1 The Department shall determine whether a Plan of Correction submitted pursuant to Section 7.4 of this Rule is sufficient to effectively address each identified Deficiency and bring the PRTF in compliance with the requirements of this Rule.
- 8.5.2 Within thirty (30) days after receipt of a Plan of Correction, the Department shall notify the PRTF related to each identified Deficiency that the Department:
- 8.5.2.1 Accepts the Plan of Correction; or
- 8.5.2.2 Requests a revision to the Plan of Correction specifying the reasons for the request.
- 8.5.3 A PRTF required to submit a revised Plan of Correction pursuant to Section 8.5.2.2 of this Rule shall develop and submit the revision within thirty (30) days during which time the Department shall make available a representative to review with the PRTF any proposed revisions.
- 8.6 If, after reviewing a revised Plan of Correction, the Department determines that a PRTF is not in full compliance with this Rule or cannot comply with this Rule or the PRTF's Plan of Correction, the Department may find that the PRTF is in violation or substantial violation of this Rule.
- 8.7 If the Department finds that a PRTF is in violation of this Rule it may, in accordance with Sections 8.9 and 9.0 of this Rule,
- 8.7.1 Modify a current license to make it subject to fulfillment of specified conditions, including requirements for the submission of written plans, progress reports and any other information required by the Department that demonstrates to the satisfaction of the Department and Commissioner that the PRTF is actively and effectively taking all necessary steps to comply with its license conditions;
- 8.7.2 Issue or renew a license subject to fulfillment of specified conditions, including requirements for the submission of written plans, progress reports and any other information required by the Department that demonstrates to the satisfaction of the Department and Commissioner

that the PRTF is actively and effectively taking all necessary steps to comply with its license conditions; or

8.7.3 Issue a temporary license to the PRTF for a total period not to exceed thirty-six consecutive months, specifying requirements for the submission of written plans, progress reports and any other information required by the Department that demonstrates to the satisfaction of the Department and Commissioner that the PRTF is actively and effectively taking all necessary steps to come into full compliance within the period of time permitted by the temporary license.

8.8 If the Department finds that a PRTF is in substantial violation of this Rule it may, in accordance with Sections 8.9 and 9.0 of this Rule,

8.8.1 Not issue or renew the PRTF's license;

8.8.2 Revoke the PRTF's license; and/or

8.8.3 Impose, or recommend that the Department impose, any other penalties permitted by law.

8.9 In the event that the Department intends to take any of the actions set forth in Sections 8.7 and 8.8 of this Rule, the following due process procedures consistent with 18 V.S.A. § 7261(f) and 3 V.S.A. Ch. 25 relating to contested cases, shall be followed:

8.9.1 Notice shall be served on the PRTF by registered mail or by personal service, setting forth detailed reasons for the proposed action, complying with 3 V.S.A. § 809(a), and fixing a date not less than sixty (60) days from the date of such mailing or service at which the PRTF shall be given opportunity for a hearing.

8.9.2 The PRTF may, within thirty (30) days after issuance of the decision of the Commissioner, appeal to the Vermont Superior Court in the county where the PRTF is located. The court may affirm, modify, or reverse the decision of the Commissioner and either the PRTF or the Department may appeal to the Vermont Supreme Court for such further review as is provided by law.

9.0 Informing Residents of Investigation Completion

Upon completion of an investigation and determination as to whether an action is to be pursued under Sections 8.7 or 8.8 of this Rule, the Department will provide the Complainant or his or her representative notice in writing. The notice shall state that the investigation is complete and whether a public proceeding regarding the license of the subject facility will result. Notice will be sent promptly and in no case more than 14 days after the determination is made and shall include the time and place of any public proceeding.

The Vermont Statutes Online

The Statutes below include the actions of the 2024 session of the General Assembly.

NOTE: The Vermont Statutes Online is an unofficial copy of the Vermont Statutes Annotated that is provided as a convenience.

Title 18 : Health

Chapter 174 : Mental Health System of Care

(Cite as: **18 V.S.A. § 7261**)

§ 7261. Psychiatric residential treatment facility for youth

(a) A person or governmental entity shall not establish, maintain, or operate a psychiatric residential treatment facility for youth without first obtaining a license from the Department of Health in accordance with this section.

(b) Upon receipt of the application for a license, the Department of Health shall issue a license if it determines that the applicant and the proposed psychiatric residential treatment facility for youth meet the following minimum standards:

(1) The applicant shall be a nonprofit entity that demonstrates the capacity to operate a psychiatric residential treatment facility for youth in accordance with rules adopted by the Department of Health and in a manner that ensures person-centered care and resident dignity.

(2) The applicant shall maintain certification from the Centers for Medicare and Medicaid Services under 42 C.F.R. §§ 441.151–182.

(3) The applicant shall maintain accreditation by the Joint Commission or other accrediting organization with comparable standards recognized by the Commissioner of Mental Health.

(4) The applicant shall fully comply with standards for health, safety, and sanitation as required by State law, including standards set forth by the State Fire Marshal and the Department of Health, and municipal ordinance.

(5) Residents admitted to a psychiatric residential treatment facility for youth shall be under the care of physician licensed pursuant to 26 V.S.A. chapter 23 or 33.

(6) The psychiatric residential treatment facility for youth, including the buildings and grounds, shall be subject to inspection by the Department of Disabilities, Aging, and Independent Living, its designees, and other authorized entities at all times.

(7) The applicant shall have a clear process for responding to resident complaints, including:

(A) the designation of patient representative pursuant to section 7253 of this title;

(B) a method by which each patient shall be made aware of the compliant procedure;

(C) an appeals mechanism within a psychiatric residential treatment facility for youth;

(D) a published time frame for processing and resolving complaints and appeals within a psychiatric residential treatment facility for youth; and

(E) periodic reporting to the Department of Health of the nature of complaints filed and action taken.

(c) A license is not transferable or assignable and shall be issued only for the premises named in the application.

(d) Once licensed, a psychiatric residential treatment facility for youth shall be among the placement options for individuals committed to the custody of the Commissioner under an order of nonhospitalization.

(e) The Department of Health shall adopt rules pursuant to 3 V.S.A. chapter 25 to carry out the purposes of this section. Rules pertaining to emergency involuntary procedures shall:

(1) be identical to those rules adopted by the Department of Mental Health governing the use of emergency involuntary procedures in psychiatric inpatient units;

(2) require that a certificate of need for all emergency involuntary procedures performed at the psychiatric residential treatment facility for youth be submitted to the Department and the Mental Health Care Ombudsman in the same manner and time frame as required for hospitals; and

(3) require that data regarding the use of emergency involuntary procedures be submitted in accordance with the requirements of the Department.

(f) The Department of Health, after notice and opportunity for a hearing to the applicant or licensee, is authorized to deny, suspend, or revoke a license in any case in which it finds that there has been a substantial failure to comply with the requirements established under this section. The notice shall be served by registered mail or by personal service setting forth the reasons for the proposed action and fixing a date not less than 60 days from the date of the mailing or service, at which the applicant or licensee shall be given an opportunity for a hearing. After the hearing, or upon default of the applicant or licensee, the Department of Health shall file its findings of fact and conclusions of law. A copy of the findings and decision shall be sent by registered mail

or served personally upon the applicant or licensee. The procedure governing hearings authorized by the section shall be in accordance with the usual and customary rules for hearing. (Added 2023, No. 137 (Adj. Sess.), § 8, eff. July 1, 2024.)

The Vermont Statutes Online

The Statutes below include the actions of the 2024 session of the General Assembly.

NOTE: The Vermont Statutes Online is an unofficial copy of the Vermont Statutes Annotated that is provided as a convenience.

Title 3 : Executive

Chapter 025 : Administrative Procedure

Subchapter 001 : GENERAL PROVISIONS

(Cite as: 3 V.S.A. § 801)

§ 801. Short title and definitions

(a) This chapter may be cited as the “Vermont Administrative Procedure Act.”

(b) As used in this chapter:

(1) “Agency” means a State board, commission, department, agency, or other entity or officer of State government, other than the Legislature, the courts, the Commander in Chief, and the Military Department, authorized by law to make rules or to determine contested cases.

(2) “Contested case” means a proceeding, including but not restricted to rate-making and licensing, in which the legal rights, duties, or privileges of a party are required by law to be determined by an agency after an opportunity for hearing.

(3) “License” includes the whole or part of any agency permit, certificate, approval, registration, charter, or similar form of permission required by law.

(4) “Licensing” includes the agency process respecting the grant, denial, renewal, revocation, suspension, annulment, withdrawal, or amendment of a license.

(5) “Party” means each person or agency named or admitted as a party, or properly seeking and entitled as of right to be admitted as a party.

(6) “Person” means any individual, partnership, corporation, association, governmental subdivision, or public or private organization of any character other than an agency.

(7) “Practice” means a substantive or procedural requirement of an agency, affecting one or more persons who are not employees of the agency, that is used by the agency in the discharge of its powers and duties. The term includes all such requirements, regardless of whether they are stated in writing.

(8) "Procedure" means a practice that has been adopted in writing, either at the election of the agency or as the result of a request under subsection 831(b) of this title. The term includes any practice of any agency that has been adopted in writing, whether or not labeled as a procedure, except for each of the following:

(A) a rule adopted under sections 836-844 of this title;

(B) a written document issued in a contested case that imposes substantive or procedural requirements on the parties to the case;

(C) a statement that concerns only:

(i) the internal management of an agency and does not affect private rights or procedures available to the public;

(ii) the internal management of facilities that are secured for the safety of the public and the individuals residing within them; or

(iii) guidance regarding the safety or security of the staff of an agency or its designated service providers or of individuals being provided services by the agency or such a provider;

(D) an intergovernmental or interagency memorandum, directive, or communication that does not affect private rights or procedures available to the public;

(E) an opinion of the Attorney General; or

(F) a statement that establishes criteria or guidelines to be used by the staff of an agency in performing audits, investigations, or inspections, in settling commercial disputes or negotiating commercial arrangements, or in the defense, prosecution, or settlement of cases, if disclosure of the criteria or guidelines would compromise an investigation or the health and safety of an employee or member of the public, enable law violators to avoid detection, facilitate disregard of requirements imposed by law, or give a clearly improper advantage to persons that are in an adverse position to the State.

(9) "Rule" means each agency statement of general applicability that implements, interprets, or prescribes law or policy and that has been adopted in the manner provided by sections 836-844 of this title.

(10) "Incorporation by reference" means the use of language in the text of a regulation that expressly refers to a document other than the regulation itself.

(11) "Adopting authority" means, for agencies that are attached to the Agencies of Administration, of Commerce and Community Development, of Natural Resources, of Human Services, and of Transportation, or any of their components, the secretaries of those agencies; for agencies attached to other departments or any of their components, the commissioners of those departments; and for other agencies, the chief officer of the agency. However, for the procedural rules of boards with quasi-judicial powers, for the Transportation Board, for the Vermont Veterans' Memorial Cemetery Advisory Board,

and for the Fish and Wildlife Board, the chair or executive secretary of the board shall be the adopting authority. The Secretary of State shall be the adopting authority for the Office of Professional Regulation.

(12) "Small business" means a business employing no more than 20 full-time employees.

(13)(A) "Arbitrary," when applied to an agency rule or action, means that one or more of the following apply:

(i) There is no factual basis for the decision made by the agency.

(ii) The decision made by the agency is not rationally connected to the factual basis asserted for the decision.

(iii) The decision made by the agency would not make sense to a reasonable person.

(B) The General Assembly intends that this definition be applied in accordance with the Vermont Supreme Court's application of "arbitrary" in *Beyers v. Water Resources Board*, 2006 VT 65, and *In re Town of Sherburne*, 154 Vt. 596 (1990).

(14) "Guidance document" means a written record that has not been adopted in accordance with sections 836-844 of this title and that is issued by an agency to assist the public by providing an agency's current approach to or interpretation of law or describing how and when an agency will exercise discretionary functions. The term does not include the documents described in subdivisions (8)(A) through (F) of this section.

(15) "Index" means a searchable list of entries that contains subjects and titles with page numbers, hyperlinks, or other connections that link each entry to the text or document to which it refers. (Added 1967, No. 360 (Adj. Sess.), § 1, eff. July 1, 1969; amended 1981, No. 82, § 1; 1983, No. 158 (Adj. Sess.), eff. April 13, 1984; 1985, No. 56, § 1; 1985, No. 269 (Adj. Sess.), § 4; 1987, No. 76, § 18; 1989, No. 69, § 2, eff. May 27, 1989; 1989, No. 250 (Adj. Sess.), § 88; 2001, No. 149 (Adj. Sess.), § 46, eff. June 27, 2002; 2017, No. 113 (Adj. Sess.), § 3; 2017, No. 156 (Adj. Sess.), § 2.)



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Deadline For Public Comment

Deadline: Sep 05, 2025

The deadline for public comment has expired. Contact the agency or primary contact person listed below for assistance.

Rule Details

Rule Number:	25P032
Title:	Psychiatric Residential Treatment Facility for Youth Licensing Rule.
Type:	Standard
Status:	Proposed
Agency:	Department of Health, Agency of Human Services
Legal Authority:	Section 8 of Act No. 137 of 2024 and 3 V.S.A. § 801(b)(11) This rule sets forth the standards that apply to the licensing of psychiatric residential treatment facilities for youth (PRTF) in Vermont. This rulemaking establishes the process by which a psychiatric residential treatment facility for youth can apply for a license in Vermont. This rulemaking also establishes the minimum requirements a PRTF must meet in order to be eligible for licensure.
Summary:	
Persons Affected:	Entities Establishing, Maintaining, or Operating PRTFs, the Vermont Department of Health, and the Department of Disabilities, Aging, and Independent Living (DAIL). This rulemaking establishes a licensing and regulatory program for PRTF within the Department of Health, as required by statute (18 V.S.A. § 7261). There are only minimal economic impacts anticipated for the Agency of Human Services and for the Entities Establishing, Maintaining, or Operating PRTFs from this Rule.
Economic Impact:	
Posting date:	Jul 30, 2025

Hearing Information

Information for Hearing # 1

Hearing 08-29-2025 11:00 AM [ADD TO YOUR CALENDAR](#)
date:
Location: Waterbury State Office Complex, Room A213

Address: 280 State Drive

City: Waterbury

State: VT

Zip: 05671-8300

also virtually via MS Teams at: <https://teams.microsoft.com/l/>

Hearing [meetupjoin/193ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVkMTJkMWNh40thread.v2/0?](https://teams.microsoft.com/join/193ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVkMTJkMWNh40thread.v2/0?context=7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22e6440c4f-7582-4db1-800b-a2038a1e1e68227d)

Notes: [context7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22e6440c4f-7582-4db1-800b-a2038a1e1e68227d](https://teams.microsoft.com/join/193ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVkMTJkMWNh40thread.v2/0?context=7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22e6440c4f-7582-4db1-800b-a2038a1e1e68227d)

Information for Hearing # 2

Hearing 08-29-2025 11:00 AM [ADD TO YOUR CALENDAR](#)
date:

Location: Virtually via MS Teams

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Address: [meetupjoin/193ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVkMTJkMWNh40thread.v2/0?](https://teams.microsoft.com/join/193ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVkMTJkMWNh40thread.v2/0?context=7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22e6440c4f-7582-4db1-800b-a2038a1e1e68227d)
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City: n/a

State: VT

Zip: n/a

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Notes: [context7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22e6440c4f-7582-4db1-800b-a2038a1e1e68227d](https://teams.microsoft.com/join/193ameeting_NjRiOWZkMjMtOGY3MC00NmFiLTkzMjYtMTk5ODVkMTJkMWNh40thread.v2/0?context=7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22e6440c4f-7582-4db1-800b-a2038a1e1e68227d)

Contact Information

Information for Primary Contact

PRIMARY CONTACT PERSON - A PERSON WHO IS ABLE TO ANSWER QUESTIONS ABOUT THE CONTENT OF THE RULE.

Level: Primary
Name: Jessica Schifano, Policy Director
Agency: Department of Health, Agency of Human Services
Address: 280 State Drive, Building C
City: Waterbury
State: VT
Zip: 05671-1080
Telephone: 802-798-6756
Fax:
Email: jessica.schifano@vermont.gov

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Website Address: <http://www.healthvermont.gov/about-us/laws-regulations/public-comment>

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Information for Secondary Contact

SECONDARY CONTACT PERSON - A SPECIFIC PERSON FROM WHOM COPIES OF FILINGS MAY BE REQUESTED OR WHO MAY ANSWER QUESTIONS ABOUT FORMS SUBMITTED FOR FILING IF DIFFERENT FROM THE PRIMARY CONTACT PERSON.

Level: Secondary
Name: Natalie Weill, Policy Advisor
Agency: Department of Health, Agency of Human Services
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State: VT
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Telephone: 802-863-7200
Fax:
Email: natalie.weill@vermont.gov

[SEND A COMMENT](#)

Keyword Information

Keywords:

Psychiatric Residential Treatment Facility for Youth
Psychiatric
Youth
Mental Health
Licensing
Residential

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	Newport Daily Express (jlafae@newportvermontdailyexpress.com)	Tel: 334-6568 FAX: 334-6891 Attn: Jon Lafoe
	News & Citizen (mike@stowereporter.com)	Tel: 888-2212 FAX: 888-2173
	St. Albans Messenger Legals (legals@samessenger.com ; cfoley@orourkemediagroup.com)	Tel: 524-9771 ext. 117 FAX: 527-1948 Attn: Legals
	The Islander (islander@vermontislander.com)	Tel: 802-372-5600 FAX: 802-372-3025
	Vermont Lawyer (hunter.press.vermont@gmail.com)	Attn: Will Hunter

FROM: APA Coordinator, VSARA

Date of Fax: October 17, 2025

RE: The "Proposed State Rules " ad copy to run on

August 7, 2025

PAGES INCLUDING THIS COVER MEMO:

3

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If you have questions, or if the printing schedule of your paper is disrupted by holiday etc. please contact VSARA at 802-828-3700, or E-Mail sos.statutoryfilings@vermont.gov, Thanks.

PROPOSED STATE RULES

By law, public notice of proposed rules must be given by publication in newspapers of record. The purpose of these notices is to give the public a chance to respond to the proposals. The public notices for administrative rules are now also available online at <https://secure.vermont.gov/SOS/rules/>. The law requires an agency to hold a public hearing on a proposed rule, if requested to do so in writing by 25 persons or an association having at least 25 members.

To make special arrangements for individuals with disabilities or special needs please call or write the contact person listed below as soon as possible.

To obtain further information concerning any scheduled hearing(s), obtain copies of proposed rule(s) or submit comments regarding proposed rule(s), please call or write the contact person listed below. You may also submit comments in writing to the Legislative Committee on Administrative Rules, State House, Montpelier, Vermont 05602 (802-828-2231).

Psychiatric Residential Treatment Facility for Youth Licensing Rule.

Vermont Proposed Rule: 25P032

AGENCY: Agency of Human Services, Department of Health

CONCISE SUMMARY: This rule sets forth the standards that apply to the licensing of psychiatric residential treatment facilities for youth (PRTF) in Vermont. This rulemaking establishes the process by which a psychiatric residential treatment facility for youth can apply for a license in Vermont. This rulemaking also establishes the minimum requirements a PRTF must meet in order to be eligible for licensure.

FOR FURTHER INFORMATION, CONTACT: Jessica Schifano, Policy Director Agency of Human Services, Vermont Department of Health 280 State Drive, Building C, Waterbury, VT 05671 Tel: 802-798-6756 E-mail: jessica.schifano@vermont.gov URL: <http://www.healthvermont.gov/about-us/laws-regulations/public-comment>.

FOR COPIES: Natalie Weill, Policy Advisor, Agency of Human Services, Vermont Department of Health 280 State Drive, Building C, Waterbury, VT 05671 Tel: 802-863-7200 E-mail: natalie.weill@vermont.gov.

Manufactured Food Rule.

Vermont Proposed Rule: 25P033

AGENCY: Agency of Human Services, Department of Health

CONCISE SUMMARY: The purpose of the rule is to provide the requirements for the safe and sanitary manufacturing, packing, holding, and distributing of human food offered for sale in Vermont. This rulemaking does the following: 1) Defines cottage food operation, cottage food operator, and cottage food product, non-potentially hazardous baked good, and time or temperature control for safety; 2) Substitutes the more narrow bakery product exemption for a broader exemption categorized as the cottage food exemption and raises the exemption threshold of gross annual sales to \$30,000; 3) Amends the existing exemption filing requirement frequency from prior to operation to an annual filing; 4) Creates a required annual training for license-exempt food manufacturers; and 5) Creates a process for cottage food operators to submit requests to the Department for determination whether the product they are making is a cottage food.

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Vermont Department of Health 280 State Drive, Building C, Waterbury, VT 05671 Tel: 802-798-6756 E-mail: jessica.schifano@vermont.gov URL: <http://www.healthvermont.gov/about-us/laws-regulations/public-comment>.

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