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H.218

An act relating to fiscal year 2026 appropriations from the Opioid Abatement Special Fund

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. APPROPRIATIONS; OPIOID ABATEMENT SPECIAL FUND

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

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

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

(2) \$76,000.00 to the Department of Health for distribution to Vermonters for Criminal Justice Reform to fund an outreach worker position.

(3)(A) \$1,400,000.00 to the Department of Health for recovery residences certified by the Vermont Alliance for Recovery Residences.

1 (B) It is the intent of the General Assembly that recovery residences
2 be funded annually at not less than fiscal year 2026 levels, unless and until the
3 Special Fund does not have sufficient monies to fund this expenditure.

4 (4)(A) \$850,000.00 to the Department of Health for syringe services.

5 (B) It is the intent of the General Assembly that syringe services be
6 funded annually at not less than fiscal year 2026 levels, unless and until the
7 Special Fund does not have sufficient monies to fund this expenditure.

8 (5)(A) \$1,100,000.00 to the Department of Health for the purpose of
9 awarding grants to the City of Burlington for establishing an overdose
10 prevention center upon submission of a grant proposal that has been approved
11 by the Burlington City Council and meets the requirements of 18 V.S.A.
12 § 4256, including the guidelines developed by the Department of Health.

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

18 (6) \$800,000.00 for distribution as follows:

19 (A) not more than \$35,000.00 to the Department of Corrections for
20 distribution to Pathways Vermont to implement a contingency management

1 pilot program in Chittenden County for individuals under the supervision of
2 the Department of Corrections; and

3 (B) the remainder to the Department of Health for grants to providers
4 for ongoing support for contingency management.

5 (7) \$32,157.00 to the Department of Health for distribution to the
6 Brattleboro Fire Department to establish community training programs on the
7 administration of opioid antagonists, CPR, first aid, and Stop the Bleed
8 protocols.

9 (8) \$44,229.00 to the Department of Health for distribution to the
10 Champlain Housing Trust to continue a pilot program providing access to
11 wound care and preventative health care in three low-barrier shelters within
12 Chittenden County.

13 (9) \$800,000.00 to the Department for Children and Families' Office of
14 Economic Opportunity to support long-term programs at shelters for
15 individuals experiencing homelessness, including harm-reduction supports and
16 clinical nursing programs.

17 (10) \$309,000.00 to the Department of Health for Health Care and
18 Rehabilitation Services of Southeastern Vermont's Project Connectionworks to
19 reduce opioid use disorder morbidity and mortality in Windham County
20 through prevention, treatment, and recovery services.

1 (11) \$50,000.00 to the Judicial Branch to train Vermont’s judges on
2 issues related to opioid use disorder and strategies for use in dockets statewide.

3 (12) \$200,000.00 to the Department of Health for distribution to Elevate
4 Youth Services to establish Healthy Youth Program counselors at the
5 Basement Teen Center at Kellogg-Hubbard Library in Washington County.

6 (13) \$100,000.00 to the Department of Health for distribution to Friends
7 for Change’s Youth Center in Bellows Falls for the purpose of delivering
8 intervention strategies and harm reduction supports to youth and young adults.

9 (14) \$170,000.00 to the Department of Health for distribution to
10 Spectrum Youth and Family Services for two new positions to expand opioid
11 use disorder screening, treatment, and case management services to youth in
12 Chittenden and Franklin Counties.

13 (15) \$80,000.00 to the Department of Health for distribution to Prevent
14 Child Abuse Vermont for the purpose of teaching parenting skills and
15 providing social and emotional parenting supports for individuals with opioid
16 use disorder.

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

1 (17) \$550,000.00 to the Department of Health for distribution to
2 Northeast Kingdom Community Action to hire four peer support specialists to
3 assist individuals with opioid use disorder who are transitioning out of
4 homelessness into safe, permanent housing.

5 (18) \$150,000.00 to the Department of Health for distribution to
6 Connecticut Valley Addiction Services, Inc. to expand opioid use treatment in
7 rural Windsor County.

8 (19) \$300,000.00 to the Department of Health for distribution to
9 Vermonters for Criminal Justice Reform and the Johnson Health Center to
10 continue and improve the Managed Medical Response Partnership.

11 (20) \$30,000.00 to the Department of Health for distribution to
12 Treatment Associates of Washington County Mental Health to hire an
13 embedded recovery coach.

14 (21) \$20,824.00 to the Department of Health for distribution to
15 Umbrella to provide integrated services between domestic and sexual violence
16 providers and partners in recovery in northeastern Vermont.

17 (b) All grant agreements associated with funds appropriated pursuant to
18 this section shall require outcome and measurements data to be collected and
19 reported to the department issuing the grant and to the Opioid Settlement
20 Advisory Committee.

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

2 CHAPTER 93. OPIOID USE DISORDER

3 Subchapter 1. Treatment of Opioid Use Disorder

4 * * *

5 § 4754. LIMITATION ON PRIOR AUTHORIZATION REQUIREMENTS

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

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

14 Subchapter 2. Opioid Settlement

15 * * *

16 § 4772. OPIOID SETTLEMENT ADVISORY COMMITTEE

17 * * *

18 (b) Membership.

19 (1) The Advisory Committee shall be composed of the following
20 members and shall reflect the diversity of Vermont in terms of gender, race,
21 age, ethnicity, sexual orientation, gender identity, disability status, and

1 socioeconomic status and ensure inclusion of individuals with lived experience
2 of opioid use disorder and their family members whenever possible:

3 * * *

4 (E) a primary care prescriber with experience providing ~~medication-~~
5 ~~assisted treatment~~ medication for opioid use disorder within the Blueprint for
6 Health hub and spoke model, appointed by the Executive Director of the
7 Blueprint for Health, to provide a statewide perspective on the provision of
8 ~~providing medication-assisted treatment~~ medication for opioid use disorder
9 services;

10 * * *

11 (c) Powers and duties. The Advisory Committee shall demonstrate broad
12 ongoing consultation with individuals living with opioid use disorder about
13 their direct experience with related systems, including ~~medication-assisted~~
14 ~~treatment~~ medication for opioid use disorder, residential treatment, recovery
15 services, harm reduction services, overdose, supervision by the Department of
16 Corrections, and involvement with the Department for Children and Families'
17 Family Services Division. To that end, the Advisory Committee shall
18 demonstrate consultation with individuals with direct lived experience of
19 opioid use disorder, frontline support professionals, the Substance Misuse
20 Oversight Prevention and Advisory Council, and other stakeholders to identify
21 spending priorities as related to opioid use disorder prevention, intervention,

1 treatment, and recovery services and harm reduction strategies for the purpose
2 of providing recommendations to the Governor, the Department of Health, and
3 the General Assembly on prioritizing spending from the Opioid Abatement
4 Special Fund. The Advisory Committee shall consider:

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

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

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

14 * * *

15 (e) Presentation. Annually, the Advisory Committee shall vote on its
16 recommendations. Recommendations shall be informed by outcomes and
17 measurements reported by previous grantees. If the recommendations are
18 supported by an affirmative vote of the majority, the Advisory Committee shall
19 present its recommendations for expenditures from the Opioid Abatement
20 Special Fund established pursuant to this subchapter to the Department of
21 Health and concurrently submit its recommendations in writing to the House

1 Committees on Appropriations and on Human Services and the Senate
2 Committees on Appropriations and on Health and Welfare. The Advisory
3 Committee's written recommendations shall address how each
4 recommendation meets one or more of the criteria listed in subsections 4774(b)
5 and (c) of this subchapter. The Advisory Committee shall give priority
6 consideration to services requiring funding on an ongoing basis.

7 (f) Meetings.

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

10 (2) Annually, the Advisory Committee shall elect a voting vice chair
11 from among its nongovernmental members.

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

14 ~~(3)~~(4) The Advisory Committee shall adopt procedures to govern its
15 proceedings and organization, including voting procedures and how the
16 staggered terms shall be apportioned among members.

17 ~~(4)~~(5) All meetings of the Advisory Committee shall be consistent with
18 Vermont's Open Meeting Law pursuant to 1 V.S.A. chapter 5, subchapter 2.

19 * * *

20 § 4774. OPIOID ABATEMENT SPECIAL FUND

21 * * *

1 (c) Priority for expenditures from the Opioid Abatement Special Fund shall
2 be aimed at reducing overdose deaths, including the following:

3 * * *

4 (2) increasing access to ~~medication-assisted treatment~~ medication for
5 opioid use disorder and other opioid-related treatment, specifically:

6 (A) increasing distribution of ~~medication-assisted treatment~~
7 medication for opioid use disorder to individuals who are uninsured or whose
8 health insurance does not cover the needed goods and services;

9 (B) providing education to school-based and youth-focused programs
10 that discourage or prevent misuse, including how to access opioid use disorder
11 treatment;

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

15 * * *

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

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

20 (B) expanding comprehensive evidence-based or evidence-informed
21 treatment and recovery services, including ~~medication-assisted treatment~~

1 medication for opioid use disorder, for individuals with co-occurring opioid
2 use disorder and other substance or mental health disorders for up to 12 months
3 postpartum; and

4 * * *

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

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

10 * * *

11 (6) treating incarcerated populations, specifically:

12 (A) providing evidence-based or evidence-informed treatment and
13 recovery support, including ~~medication-assisted treatment~~ medication for
14 opioid use disorder for individuals with opioid use disorder or co-occurring
15 substance use or mental health disorders while transitioning out of the criminal
16 justice system; and

17 * * *

18 Sec. 3. EFFECTIVE DATE

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