



STATE OF VERMONT
GENERAL ASSEMBLY

MEMORANDUM

To: Representative Robin Scheu, Chair, House Committee on Appropriations
Representative Theresa Wood, Chair, House Committee on Human Services
Representative Alyssa Black, Chair, House Committee on Health Care
Senator Andrew Perchlik, Chair, Senate Committee on Appropriations
Senator Virginia Lyons, Chair, Senate Committee on Health and Welfare

From: Representative Brian Cina, NCSL Opioid Policy Fellow (2025)

Date: February 10, 2026

Subject: Opioid Abatement Special Fund Recommendations for Fiscal Year 2027

The Opioid Settlement Advisory Committee (OSAC) presented recommendations for expenditures from the opioid abatement special fund for fiscal year 2027 adhering to the set of five principles for the use of funds from opioid litigation espoused by Johns Hopkins:

1. Spend money to save lives; use the funds to supplement rather than replace existing spending.
2. Use evidence to guide spending.
3. Invest in youth prevention.
4. Focus on all forms of equity, including geographic/rural.
5. Develop a transparent, inclusive decision-making process guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other key groups.¹

Please consider how my 2026 opioid policy recommendations align with these principles and how they support some of OSAC's recommendations for spending.

My opioid policy recommendations for 2026 (with links to legislation):

- Expand the use of contingency management therapy and neurofeedback in Vermont's health care and criminal justice systems by funding existing programs, studying how to scale contingency management, and launching neurofeedback pilot programs to support recovery for justice-involved individuals ([H.853: An act relating to expanded use of contingency management therapy and neurofeedback in Vermont's health care and criminal justice systems](#));

¹ <https://opioidprinciples.jhsph.edu/wp-content/uploads/2022/02/Opioid-Principles-Doc.pdf>

- Create safe access to psychedelic therapy as a pathway to recovery by establishing a Psychedelic Therapy Advisory Board and requiring the Department of Health to enter into a contract with a Vermont entity to perform ibogaine clinic drug development trials ([H.859: An act relating to psychedelic therapy and clinical drug development trials](#));
- Create a working group to develop a proposal for a justice and recovery hub on State land near the Costello Courthouse and the Department of Labor in downtown Burlington, and to identify additional sites along public transit corridors for justice and recovery spokes offering similar services ([H.860: An act relating to establishing the Justice and Recovery Hub and Spoke System Working Group](#));
- Require the Agency of Human Services and partners to develop a statewide plan for implementing a “blue zone” in Vermont after a public engagement campaign that educates the public, gathers input, and builds a shared definition of a blue zone while assessing existing strengths, needs, and service gaps ([H.852: An act relating to developing a blue zone blueprint](#));
- Implement Green Mountain Care as a publicly financed health care program for all Vermonters, phased in over time—starting with primary care, then adding preventive dental and vision care, and expanding to additional services in later years ([H.433: An act relating to incremental implementation of Green Mountain Care](#)).

I request time to testify further about how these opioid policy recommendations may support these principles and promote recovery beyond the use of opioid abatement special funds for FY 2027. Thank you for your time and consideration.