

Senate Bill 157

An act relating to recovery residence certification



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Senate Committee on Health and Welfare

Written Testimony of:

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Thank you Chair Lyons and members of the Senate Committee on Health and Welfare for your time this morning. My name is Jeff Moreau, and I am the Founding Executive Director of the Vermont Alliance for Recovery Residences (VTARR). For the past 16 years, I have also served as a surveyor for the Commission on Accreditation of Rehabilitation Facilities (CARF), an international accrediting body for behavioral health and substance use disorder.

I want to begin by acknowledging the Vermont Legislature's strong and sustained commitment to recovery. Your investments in recovery centers, peer support, partnerships with corrections, and the establishment of reengagement beds at Valley Vista and Serenity House represent significant progress in strengthening Vermont's recovery system.

Prior to 2019, Vermont had no oversight or best-practice guidelines for recovery residences. Today, there are more than 150 certified beds across 20 residences statewide. VTARR administers a scholarship fund to ensure that financial need is not a barrier to access. Most importantly, certified operators have demonstrated effective responses to relapse as well as violent and threatening behaviors while safeguarding the wellbeing of other residents.

S.157 codifies these proven practices and the certification process developed over the past two years, and we urge you to make this framework permanent. We strongly support the Department's commitment to prioritizing recovery housing within Vermont's broader housing strategy, including goals to add 250 certified beds, ensure coverage in every county, support specific populations, reduce barriers to access, and implement ongoing monitoring and quality improvement through data.

By way of background, VTARR is Vermont's affiliate to the National Alliance for Recovery Residences (NARR). Certification is voluntary and includes substantial technical assistance, particularly for new operators. Certification is incentivized through access to funding, scholarships, training, and other supports—it is not intended to be mandated. We follow evidence-based practices, including those established by the Substance Abuse and Mental Health Services Administration (SAMHSA). NARR Certification recognizes four levels; however, for the purposes of this bill, all levels should be treated the same - assuring that they can keep the overall home healthy and safe.

What this bill does:

- Assigns oversight of recovery residences to the Vermont Department of Health, with VTARR supporting national certification standards and coordinated data collection for quality improvement.
- Ensures the safety of all residents by making permanent certain exemptions to landlord-tenant law related to temporary and/or permanent removal.

Under Act 163, we learned that removal decisions must address more than return to use or violent behavior alone. The Department has recommended that removal apply when a resident violates substance use policies, repeatedly refuses to engage in services, commits a crime or theft, interferes with the recovery of others, or engages in acts that threaten the health or safety of residents or staff.

How the removal process works:

- The bill applies only to certified recovery residences.
- Residents consent to program rules, rights, and social standards.
- Operators work with residents to develop a self-directed plan for relocation when removal is necessary.
- If that plan cannot be executed, operators assist residents in accessing reengagement or crisis beds.

Recovery residences are not treatment. They offer a vital option for individuals seeking recovery following a residential treatment program. They offer a safe, substance-free environment rooted in peer support—often removing individuals from settings that fuel addiction. Residents live together as a family, sharing meals, responsibilities, and activities while emphasizing structure, accountability, employment, and service to the community. Research consistently shows that recovery residences improve long-term recovery outcomes, including reduced substance use and relapse, lower incarceration rates, increased employment, and improved family functioning.

According to the Centers for Disease Control and Prevention, Vermont experienced the highest percentage increase in overdose deaths during the pandemic. At the same time, the Vermont Department of Health reports that alcohol remains the most commonly used substance among Vermonters. While Vermont is rightly recognized for its hub-and-spoke system and access to medication-assisted treatment, returning individuals to environments marked by trauma, substance use, and instability undermines recovery. Recovery residences provide a critical continuum-of-care solution by building recovery capital in a supportive, healthy environment.

In closing, this bill provides the clarity and structure needed to responsibly scale a safe, effective statewide network of recovery residences. We urge you to pass S.157 during this session. It will save lives and help restore the progress we were seeing prior to the pandemic.

Thank you again for the opportunity to testify. Recovery residences work. They are cost-effective—and as I said they work. I am happy to answer any of your questions today or in the future.

With Gratitude,

JM

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