

**S.36 Proposed Amendments - Chadd Viger, Recovery House, Inc.
March 5, 2025**

Sec. 1. 33 V.S.A. § 1901m is added to read:

§ 1901m. LONG-TERM HIGH-INTENSITY RESIDENTIAL TREATMENT FOR SUBSTANCE USE DISORDER AND CO-OCCURRING MENTAL HEALTH CONDITION

(a) The Agency of Human Services shall provide coverage for ~~medically necessary~~ high intensity medically-monitored residential treatment episodes ~~long-term residential treatment~~ to Medicaid beneficiaries with substance use disorder and a co-occurring mental health condition when high intensity medically-monitored long-term residential treatment episodes are prescribed by a health care professional practicing within the scope of the professional's license and the residential treatment program is participating in Vermont's Medicaid program.

(b) Coverage provided under this section shall be for the length of stay determined by the residential treatment provider, who shall take into account current best practices for levels of care within the substance use continuum of care. Coverage shall be provided for the total length of stay of the individual. ~~not be for less than:~~

~~(1) 30 days if the beneficiary's substance use disorder can be 6 successfully addressed by medication for opioid use disorder; and~~

~~(2) 60 days if the beneficiary's substance use disorder cannot be 8 successfully addressed by medication for opioid use disorder.~~

Sec 2 33 V.S.A. § 1901n is added to read:

§ 1901n. LOW-INTENSITY RESIDENTIAL TREATMENT FOR SUBSTANCE USE DISORDER AND CO-OCCURRING MENTAL HEALTH CONDITION

(a) The Agency of Human Services shall provide coverage for low-intensity, clinically managed residential treatment episodes to Medicaid beneficiaries with substance use disorder and a co-occurring mental health condition when low-intensity clinically managed residential treatment episodes are prescribed by a health care professional practicing within the scope of the professional's license and the residential treatment program is participating in Vermont's Medicaid program.

(b) Coverage provided under this section shall be determined by the residential treatment provider, who shall take into account current best practices for levels of care within the substance use continuum of care. Coverage shall be provided for the total length of stay of the individual.

Sec. 3 RATE SETTING

The Vermont Agency of Human Services, Department of Vermont Health Access shall conduct a review of the Medicaid payment model for residential substance use disorder (SUD) treatment services by July 2025. Medicaid reimbursement rates for residential substance use treatment providers shall take into account:

(1) Actual cost of providing services to an individual, commensurate with length of stay;

(2) Co-occurring medical and mental health needs; and

(3) Environmental needs for the individual's recovery, post-residential treatment