

House Calendar

Friday, January 30, 2026

25th DAY OF THE ADJOURNED SESSION

House Convenes at 9:30 A.M.

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ORDERS OF THE DAY

ACTION CALENDAR

Third Reading

H. 648

An act relating to banking, insurance, and securities

Amendment to be offered by Rep. Olson of Starksboro to H. 648

That the bill be amended by striking out Sec. 48 in its entirety and by inserting in lieu thereof a new Sec. 48 to read as follows:

Sec. 48. 9 V.S.A. § 5202 is amended to read:

§ 5202. EXEMPT TRANSACTIONS

The following transactions are exempt from the requirements of sections ~~5301 through 5306~~ 5301–5306 and 5504 of this chapter:

* * *

(14)~~(A)~~ A sale or an offer to sell securities by or on behalf of an issuer, if the transaction is part of a single issue in which:

~~(A)~~(i) not more than ~~25~~ 10 purchasers are present in this State during any 12 consecutive months, other than those designated in subdivision (13) of this section;

~~(B)~~(ii) a general solicitation or general advertising is not made in connection with the offer to sell or the sale of the securities;

~~(C)~~(iii) a commission or other remuneration is not paid or given, directly or indirectly, to a person other than a broker-dealer registered under this chapter or an agent registered under this chapter for soliciting a prospective purchaser in this State; and

~~(D)~~(iv) the issuer reasonably believes that all the purchasers in this State, other than those designated in subdivision (13) of this section, are purchasing for investment.

(B) The exemption specified in this subdivision (14) shall not apply to a federal covered security that is otherwise subject to a notice filing requirement under section 5302 of this title.

* * *

H. 790

An act relating to fiscal year 2026 budget adjustments

Amendment to be offered by Reps. Scheu of Middlebury, Bluemle of Burlington, Dickinson of St. Albans Town, Feltus of Lyndon, Kascenska of Burke, Laroche of Franklin, Mrowicki of Putney, Nigro of Bennington, Squirrell of Underhill, Stevens of Waterbury, and Yacovone of Morristown to H. 790

That the bill be amended by striking out Sec. 77. in its entirety and inserting in lieu thereof a new Sec. 77. to read as follows:

Sec. 77. 2025 Acts and Resolves No. 27, Sec. E.312 is amended to read:

Sec. E.312 HEALTH; PUBLIC HEALTH

(a) HIV/AIDS funding:

* * *

(2) In fiscal year 2026, and as provided by this section, the Department of Health shall provide grants in the amount of ~~\$295,000~~ \$340,000 from the General Fund for HIV and Harm Reduction Services to the following organizations:

(A) Vermont CARES: ~~\$140,000~~ \$165,000;

(B) AIDS Project of Southern Vermont: ~~\$100,000~~ \$115,000; and

(C) HIV/HCV Resource Center: ~~\$55,000~~ \$60,000.

* * *

NOTICE CALENDAR

Favorable with Amendment

H. 541

An act relating to interference with voters and election officials

Rep. Goodnow of Brattleboro, for the Committee on Judiciary, recommends that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 17 V.S.A. § 1972 is amended to read:

§ 1972. ~~SHOWING BALLOT; INTERFERENCE WITH VOTER~~

~~(a) A voter who, except in cases of assistance as provided in this title, allows his or her the voter's ballot to be seen by another person with an apparent intention of letting it be known how he or she the voter is about to vote or makes a false statement to the presiding officer at an election as to his or her the voter's inability to mark his or her the voter's ballot or places a distinguishing mark on his or her the voter's ballot or a person who interferes with a voter when inside the guard rail or who, within the building in which the voting is proceeding, endeavors to induce a voter to vote for a particular candidate, shall be fined \$1,000.00.~~

~~(b) It shall be the duty of the election officers to see that the offender is duly prosecuted for a violation of this section.~~

Sec. 2. 17 V.S.A. § 1975 is added to read:

§ 1975. INTERFERENCE WITH VOTERS AND ELECTION OFFICIALS

(a) No person shall intentionally or recklessly intimidate, threaten, coerce, or attempt to intimidate, threaten, or coerce:

(1) any other person for the purpose of:

(A) obstructing the right of the other person to vote or to vote as the other person may choose; or

(B) causing the other person to vote for, or not to vote for, any candidate for public office or public question at any election; or

(2) a public servant, an election official, or a public employee for the purpose of obstructing the administration of an election.

(b) A person who violates subsection (a) of this section shall be imprisoned not more than two years or fined not more than \$2,000.00, or both.

Sec. 3. EFFECTIVE DATE

This act shall take effect on passage.

(Committee Vote: 10-0-1)

H. 611

An act relating to miscellaneous provisions affecting the Department of Vermont Health Access

Rep. Powers of Waterford, for the Committee on Health Care, recommends that the bill be amended by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 18 V.S.A. § 4635 is amended to read:

§ 4635. PRESCRIPTION DRUG COST TRANSPARENCY

(a) As used in this section:

(1) “Health insurer” means a health insurer, as defined in section 9402 of this title, with more than 5,000 covered lives in this State for major medical health insurance, as defined in 8 V.S.A. § 4011. The term does not include Vermont Medicaid.

(2) “Manufacturer” shall have has the same meaning as “pharmaceutical manufacturer” in section 4631a of this title.

~~(2)~~(3) “Prescription drug” means a drug as defined in 21 U.S.C. § 321.

~~(b)(1)(A) The Department of Vermont Health Access shall create annually a list of 10 prescription drugs on which the State spends significant health care dollars and for which the wholesale acquisition cost has increased by 50 percent or more over the past five years or by 15 percent or more during the previous calendar year, creating a substantial public interest in understanding the development of the drugs’ pricing. The list shall include at least one generic and one brand-name drug and shall indicate each of the drugs on the list that the Department considers to be specialty drugs. The Department shall include the percentage of the wholesale acquisition cost increase for each drug on the list; rank the drugs on the list from those with the largest increase in wholesale acquisition cost to those with the smallest increase; indicate whether each drug was included on the list based on its cost increase over the past five years or during the previous calendar year, or both; and provide the Department’s total expenditure for each drug on the list during the most recent calendar year.~~

~~(B) The Department of Vermont Health Access shall create annually a list of 10 prescription drugs on which the State spends significant health care dollars and for which the cost to the Department of Vermont Health Access, net of rebates and other price concessions, has increased by 50 percent or more over the past five years or by 15 percent or more during the previous calendar year, creating a substantial public interest in understanding the development of the drugs’ pricing. The list shall include at least one generic and one brand-name drug and shall indicate each of the drugs on the list that the Department considers to be specialty drugs. The Department shall rank the drugs on the list from those with the greatest increase in net cost to those with the smallest increase and indicate whether each drug was included on the list based on its cost increase over the past five years or during the previous calendar year, or both.~~

~~(C)(i)~~ Each health insurer with more than 5,000 covered lives in this State for major medical health insurance shall create annually a list of 10 prescription drugs on which its health insurance plans spend significant amounts of their premium dollars and for which the cost to the plans, net of rebates and other price concessions, has increased by 50 percent or more over the past five years or by 15 percent or more during the previous calendar year, or both, creating a substantial public interest in understanding the development of the drugs' pricing. The list shall include at least one generic and one brand-name drug and shall indicate each of the drugs on the list that the health insurer considers to be specialty drugs. The health insurer shall rank the drugs on the list from those with the greatest increase in net cost to those with the smallest increase and indicate whether each drug was included on the list based on its cost increase over the past five years or during the previous calendar year, or both.

~~(i)(A)~~ ~~(B)~~ Each health insurer creating a list pursuant to subdivision ~~(b)(1)(C)~~ shall provide to the Office of the Attorney General the percentage by which the net cost to its plans increased over the applicable period or periods for each drug on the list, as well as the insurer's total expenditure, net of rebates and other price concessions, for each drug on the list during the most recent calendar year. Information provided to the Office of the Attorney General pursuant to this subdivision ~~(b)(1)(C)(i)(B)~~ is exempt from public inspection and copying under the Public Records Act and shall not be released.

(2) The ~~Department of Vermont Health Access and the~~ health insurers shall provide to the Office of the Attorney General and the Green Mountain Care Board the lists of prescription drugs developed pursuant to ~~subdivisions (1)(A), (B), and (C)(i)~~ subdivision (1) of this subsection annually on or before June 1. The Office of the Attorney General and the Green Mountain Care Board shall make all of the information available to the public on their respective websites.

(c)(1)(A) Of the prescription drugs listed by the ~~Department of Vermont Health Access and the~~ health insurers pursuant to ~~subdivisions (b)(1)(B) and (C)~~ subdivision (b)(1) of this section, the Office of the Attorney General shall identify 15 drugs as follows:

(i) of the drugs appearing on more than one payer's list, the Office of the Attorney General shall identify the top 15 drugs on which the greatest amount of money was spent across all payers during the previous calendar year, to the extent information is available; and

(ii) if fewer than 15 drugs appear on more than one payer's list, the Office of the Attorney General shall rank the remaining drugs based on the amount of money spent by any one payer during the previous calendar year, in descending order, and select as many of the drugs at the top of the list as necessary to reach a total of 15 drugs.

(B) For the 15 drugs identified by the Office of the Attorney General pursuant to subdivision (A) of this subdivision (c)(1), the Office of the Attorney General shall require the manufacturer of each such drug to provide all of the following:

(i) Justification for the increase in the net cost of the drug to ~~the Department of Vermont Health Access, to one or more health insurers, or both,~~ which shall be provided to the Office of the Attorney General in a format that the Office of the Attorney General determines to be understandable and appropriate and shall be provided in accordance with a timeline specified by the Office of the Attorney General. The manufacturer shall submit to the Office of the Attorney General all relevant information and supporting documentation necessary to justify the manufacturer's net cost increase to ~~the Department of Vermont Health Access, to one or more health insurers, or both~~ during the identified period of time, including:

(I) each factor that specifically caused the net cost increase to ~~the Department of Vermont Health Access, to one or more health insurers, or both~~ during the specified period of time;

* * *

Sec. 2. 18 V.S.A. § 4682 is amended to read:

§ 4682. DISCRIMINATION AGAINST 340B ENTITIES PROHIBITED

* * *

~~(d) A manufacturer or its agent shall offer or otherwise make available 340B drug pricing to a 340B covered entity or 340B contract pharmacy in the form of a discount at the time of purchase and shall not offer or otherwise make available 340B drug pricing in the form of a rebate. [Repealed.]~~

Sec. 3. 33 V.S.A. § 402 is amended to read:

§ 402. MEDICAID AND EXCHANGE ADVISORY COMMITTEE

(a) A The Medicaid and Exchange Advisory Committee is created for the purpose of advising the Commissioner of Vermont Health Access with respect to policy development and program administration for the Vermont Health Benefit Exchange, Medicaid, and Medicaid-funded programs, consistent with the requirements of federal law.

(b)(1) The Commissioner of Vermont Health Access shall appoint members of the Advisory Committee established by this section, who shall serve staggered three-year terms. The total membership of the Advisory Committee shall be at least 22 members and shall include individuals who are also members of the Beneficiary Advisory Committee, as required by 42 C.F.R. § 431.12. The Commissioner may remove members of the Committee who fail to attend three consecutive meetings and may appoint replacements. ~~The Commissioner may reappoint members to serve more than one term.~~

(2)(A) The Commissioner of Vermont Health Access shall appoint one representative of health insurers licensed to do business in Vermont to serve on the Advisory Committee. The Commissioner of Health shall also serve on the Advisory Committee.

(B) Of the remaining members of the Advisory Committee, one-quarter of the members shall be from each of the following constituencies:

(i) beneficiaries of Medicaid or Medicaid-funded programs;

(ii) representatives of those eligible for or enrolled in qualified health plans, such as individuals, self-employed individuals, health insurance brokers and agents, ~~and representatives of businesses eligible for or enrolled in the Vermont Health Benefit Exchange~~ small business owners and employees;

(iii) advocates for consumer organizations; and

(iv) health care professionals and representatives from a broad range of health care professionals.

* * *

Sec. 4. 33 V.S.A. § 1813 is amended to read:

§ 1813. REFLECTIVE HEALTH BENEFIT PLANS

(a)(1) In the event that federal cost-sharing reduction payments to insurers are suspended or discontinued, registered carriers may offer to individuals ~~and employees of small employers~~ nonqualified reflective health benefit plans that do not include funding to offset the loss of the federal cost-sharing reduction payments. These plans shall be similar to, but contain at least one variation from, qualified health benefit plans offered through the Vermont Health Benefit Exchange that include funding to offset the loss of the federal cost-sharing reduction payments.

* * *

Sec. 5. 33 V.S.A. § 2031 is amended to read:

§ 2031. CREATION OF CLINICAL UTILIZATION REVIEW BOARD

(a) ~~No later than June 15, 2010, the~~ The Department of Vermont Health Access shall ~~create a~~ maintain the Clinical Utilization Review Board to examine existing medical services, emerging technologies, and relevant evidence-based clinical practice guidelines and make recommendations to the Department regarding coverage, unit limitations, place of service, and appropriate medical necessity of services in the State's Medicaid programs.

(b) The Board shall comprise a minimum of 10 members with diverse medical experience, to be appointed by the Governor upon recommendation of the Commissioner of Vermont Health Access. The Board shall solicit additional input as needed from individuals with expertise in areas of relevance to the Board's deliberations. The Chief Medical Director Officer of the Department of Vermont Health Access shall serve as the State's liaison to the Board. Board member terms shall may be staggered, ~~but in no event longer than three years from the date of appointment.~~ The and the Board shall meet at least quarterly, ~~provided that the Board shall meet no less frequently than once per month for the first six months following its formation.~~

* * *

Sec. 6. 33 V.S.A. § 2072 is amended to read:

§ 2072. GENERAL ELIGIBILITY

(a) An individual shall be eligible for assistance under this subchapter if the individual:

(1) is a resident of Vermont at the time of application for benefits;

(2) is at least 65 years of age or is an individual with disabilities as defined in subdivision 2071(1) of this title; and

(3) has a household income, ~~when calculated using modified adjusted gross income as defined in 26 U.S.C. § 36B(d)(2)(B),~~ no not greater than 225 percent of the federal poverty level.

* * *

Sec. 7. INCREASE TO PREPAID BURIAL ARRANGEMENTS FOR
MEDICAID ELIGIBILITY PURPOSES; RULEMAKING

(a) Subject to approval from the Centers for Medicare and Medicaid Services, the Agency of Human Services shall amend its rules and procedures allowing Medicaid applicants and recipients to preserve monies for funeral and

burial expenses to increase from \$10,000.00 to \$15,000.00 the limit on the amount that may be preserved through an irrevocable prepaid funeral arrangement, as described in 26 V.S.A. § 1271, provided that:

(1) the written contract for the arrangement, as described in 26 V.S.A. § 1273, includes a provision specifying that Vermont Medicaid shall receive all amounts remaining after payment of the deceased individual's expenses up to an amount equal to the total Medicaid amount paid on behalf of the deceased individual; and

(2) in the event that the person responsible for making the funeral arrangements for the deceased individual fails to have funeral services provided, after the retention of assets by the funeral director as set forth in 26 V.S.A. § 1274(c), Vermont Medicaid shall receive all amounts remaining up to an amount equal to the total Medicaid amount paid on behalf of the deceased individual.

(b) Subject to approval from the Centers for Medicare and Medicaid Services, the Agency's amended rules and procedures shall apply to prepaid funeral arrangements entered into on or after July 1, 2027.

Sec. 8. 2025 Acts and Resolves No. 50, Sec. 7 is amended to read:

Sec. 7. STATE PLAN AMENDMENT

Not later than July 1, ~~2026~~ 2027, the Department of Vermont Health Access shall seek a state plan amendment from the Centers for Medicare and Medicaid Services to allow Vermont's Medicaid program to provide coverage for doula services in accordance with 33 V.S.A. § 1901n, as added by this act.

Sec. 9. 2025 Acts and Resolves No. 50, Sec. 8 is amended to read:

Sec. 8. EFFECTIVE DATES

(a) Secs. 1–4 (establishing certification program for community-based perinatal doulas) shall take effect on July 1, 2026, provided that the Director of the Office of Professional Regulation shall commence the rulemaking process prior to that date in order to ensure that the rules will be in effect on July 1, 2026.

(b) Sec. 5 (33 V.S.A. § 1901n; Medicaid coverage for doula services) shall take effect on the later of July 1, ~~2026~~ 2027, or approval of the state plan amendment requested pursuant to Sec. 7 of this act.

(c) The remaining sections shall take effect on passage.

Sec. 10. EFFECTIVE DATE

This act shall take effect on July 1, 2026.

(Committee Vote: 11-0-0)

CONSENT CALENDAR FOR ACTION

Concurrent Resolutions for Adoption Under Joint Rules 16a - 16d

The following concurrent resolutions have been introduced for approval by the Senate and House and will be adopted automatically unless a Senator or Representative requests floor consideration in that member's chamber before today's adjournment. Requests for floor consideration in either chamber should be communicated to the Senate Secretary's Office or the House Clerk's Office, as applicable. For text of resolutions, see Addendum to House Calendar of January 29, 2026.

H.C.R. 176

House concurrent resolution congratulating the 2025 West Rutland High School Golden Horde's Division IV championship softball team

H.C.R. 177

House concurrent resolution congratulating Twin Valley High School Athletic Director extraordinaire and 500 game-winning boys' soccer coach Buddy Hayford

H.C.R. 178

House concurrent resolution in memory of former Senator William H. Carris of Wells

H.C.R. 179

House concurrent resolution congratulating the Essex High School Hornets girls' volleyball team on winning the school's fifth consecutive divisional championship

H.C.R. 180

House concurrent resolution congratulating the 2025 Essex High School Hornets on winning the State boys' volleyball championship

H.C.R. 181

House concurrent resolution congratulating the winners of the 2025 Spirit of the ADA Award

H.C.R. 182

House concurrent resolution designating February 5, 2026, as Outdoor Recreation Day at the State House

H.C.R. 183

House concurrent resolution recognizing July 2026 as Park and Recreation Month in Vermont and designating July 17, 2026, as Vermont Park and Recreation Professionals Day in Vermont

H.C.R. 184

House concurrent resolution celebrating the restoration of a wild turkey population in Vermont

For Informational Purposes

CROSSOVER DATES

The Joint Rules Committee established the following crossover dates:

(1) All **Senate/House** bills must be reported out of the last committee of reference (including the Committees on Appropriations and Finance/Ways and Means, except as provided below in (2) and the exceptions listed below) on or before **Friday, March 13, 2026**, and filed with the Secretary/Clerk so they may be placed on the Calendar for Notice the next legislative day – Committee bills must be voted out of Committee by **Friday, March 13, 2026**.

(2) All **Senate/House** bills referred pursuant to Senate Rule 31 or House Rule 35(a) to the Committees on Appropriations and Finance/Ways and Means must be reported out by the last of those committees on or before **Friday, March 20, 2026**, and filed with the Secretary/Clerk so they may be placed on the Calendar for Notice the next legislative day.

Exceptions to the foregoing deadlines include the major money bills (the general Appropriations bill (“The Big Bill”), the Transportation Capital bill, the Capital Construction bill, and the Fee/Revenue bills).

HOUSE CONCURRENT RESOLUTION (H.C.R.) PROCESS

Joint Rules 16a–16d provide the procedure for the General Assembly to adopt concurrent resolutions pursuant to the Consent Calendar. Here are the steps for Representatives to introduce an H.C.R. and to have it ceremonially read during a House session:

1. Meet with or email Legislative Counselor Michael Chernick regarding your H.C.R. draft request. Come prepared with an idea and any relevant supporting documents.

2. Have a date in mind if you want a ceremonial reading. You should communicate with Counselor Chernick **at least two weeks prior** to the week you want your ceremonial reading to happen.
3. Counselor Chernick will draft your H.C.R., and Resolutions Editor and Coordinator Jill Pralle will edit it. Upon completion of this process, a paper or electronic copy will be released to you. If a paper copy is released to you, a sponsor sign-out sheet will also be included.
4. Please submit a final sponsor list (with all sponsors listed) to Counselor Chernick by paper *or* electronically, but not both.
5. The final list of sponsors needs to be submitted, by email *or* on a paper sign-out sheet, to Counselor Chernick **not later than 1:00 p.m. the Wednesday of the week prior** to the H.C.R.'s appearance on the Consent Calendar.
6. The Office of Legislative Counsel will then send your H.C.R. to the House Clerk's Office for incorporation into the Consent Calendar and House Calendar Addendum for the following week.
7. The week that your H.C.R. is on the Consent Calendar, any presentation copies that you requested will be mailed or available for pickup on Friday, after the House and Senate adjourn, which is when your H.C.R. is adopted pursuant to Joint Rules.
8. Your H.C.R. can be ceremonially read during a House session once it is adopted, meaning it must have been adopted through the House Consent Calendar not later than the week prior to your requested ceremonial reading date. Contact Second Assistant Clerk Courtney Reckord to confirm your requested ceremonial reading date.
9. **A Note:** If there is a **specific date, week, or month that your resolution must be read** (e.g. to designate a specified period of time or to recognize a group on a certain day), please inform Second Assistant Clerk Courtney Reckord as soon as possible, so she can reserve that date in advance. You do not need to have the resolution drafted by then.

JOINT FISCAL COMMITTEE NOTICES

Grants and Positions that have been submitted to the Joint Fiscal Committee by the Administration, under 32 V.S.A. §5(b)(3)(D):

JFO #3271: \$218,385.00 to the Vermont Center for Crime Victim Services from the U.S. Department of Justice. Funds will be used to

consolidate data into one case management system. *[Received January 27, 2026]*