No. 156. An act making appropriations for the support of government.

(H.789)

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

Sec. A.100 SHORT TITLE

(a) This bill may be referred to as the BIG BILL - Fiscal Year 2011 Appropriations Act.

Sec. A.101 PURPOSE

(a) The purpose of this act is to provide appropriations for the operations of state government during fiscal year 2011. It is the express intent of the general assembly that activities of the various agencies, departments, divisions, boards, and commissions be limited to those which can be supported by funds appropriated in this act or other acts passed prior to June 30, 2010. Agency and department heads are directed to implement staffing and service levels at the beginning of fiscal year 2011 so as to meet this condition unless otherwise directed by specific language in this act or other acts of the general assembly.

Sec. A.102 APPROPRIATIONS

(a) It is the intent of the general assembly that this act serve as the primary source and reference for appropriations for fiscal year 2011.

(b) The sums herein stated are appropriated for the purposes specified in the following sections of this act. When no time is expressly stated during which any of the appropriations are to continue, the appropriations are single-year appropriations and only for the purpose indicated and shall be paid from funds shown as the source of funds. If in this act there is an error in either addition or subtraction, the totals shall be adjusted accordingly. Apparent errors in referring to section numbers of statutory titles within this act may be disregarded by the commissioner of finance and management.

(c) Unless codified or otherwise specified, all narrative portions of this act apply only to the fiscal year ending June 30, 2011.

Sec. A.103 DEFINITIONS

(a) For the purposes of this act:

(1) "Encumbrances" means a portion of an appropriation reserved for the subsequent payment of existing purchase orders or contracts. The commissioner of finance and management shall make final decisions on the appropriateness of encumbrances. (2) "Grants" means subsidies, aid, or payments to local governments, to community and quasi-public agencies for providing local services, and to persons who are not wards of the state for services or supplies and means cash or other direct assistance, including pension contributions.

(3) "Operating expenses" means property management, repair and maintenance, rental expenses, insurance, postage, travel, energy and utilities, office and other supplies, equipment including motor vehicles, highway materials, and construction, expenditures for the purchase of land, and construction of new buildings and permanent improvements; and similar items.

(4) "Personal services" means wages and salaries, fringe benefits, per diems, and contracted third party services; and similar items.

Sec. A.104 RELATIONSHIP TO EXISTING LAWS

(a) Except as specifically provided, this act shall not be construed in any way to negate or impair the full force and effect of existing laws.

Sec. A.105 OFFSETTING APPROPRIATIONS

(a) In the absence of specific provisions to the contrary in this act, when total appropriations are offset by estimated receipts, the state appropriations shall control, notwithstanding receipts being greater or less than anticipated.

Sec. A.106 FEDERAL FUNDS

(a) In fiscal year 2011, the governor, with the approval of the legislature, or the joint fiscal committee if the legislature is not in session, may accept federal funds available to the state of Vermont, including block grants in lieu of or in addition to funds herein designated as federal. The governor, with the approval of the legislature or the joint fiscal committee if the legislature is not in session, may allocate all or any portion of such federal funds for any purpose consistent with the purposes for which the basic appropriations in this act have been made.

(b) If, during fiscal year 2011, federal funds available to the state of Vermont and designated as federal in this and other acts of the 2010 session of the Vermont general assembly are converted into block grants or are abolished under their current title in federal law and reestablished under a new title in federal law, the governor may continue to accept such federal funds for any purpose consistent with the purposes for which the federal funds were appropriated. The governor may spend such funds for such purposes for no more than 45 days prior to legislative or joint fiscal committee approval. Notice shall be given to the joint fiscal committee without delay if the governor intends to use the authority granted by this section, and the joint fiscal committee shall meet in an expedited manner to review the governor's request for approval.

Sec. A.107 DEPARTMENTAL RECEIPTS

(a) All receipts shall be credited to the general fund except as otherwise provided and except the following receipts, for which this subsection shall constitute authority to credit to special funds:

Connecticut river flood control

Public service department - sale of power

Tax department - unorganized towns and gores

(b) Notwithstanding any other provision of law, departmental indirect cost recoveries (32 V.S.A. § 6) receipts are authorized, subject to the approval of the secretary of administration, to be retained by the department. All recoveries not so authorized shall be credited to the general fund or, for agency of transportation recoveries, the transportation fund.

Sec. A.108 NEW POSITIONS

(a) Notwithstanding any other provision of law, the total number of authorized state positions, both classified and exempt, excluding temporary positions as defined in 3 V.S.A. § 311(11), shall not be increased during fiscal year 2011 except for new positions authorized by the 2010 session. Limited service positions approved pursuant to 32 V.S.A. § 5 shall not be subject to this restriction.

Sec. A.109 LEGEND

(a) The bill is organized by functions of government. The sections between B.100 and B.9999 contain appropriation of funds. The sections between E.100 and E.9999 contain language that relates to specific appropriations and/or government functions. The function areas by section numbers are as follows:

B.100-B.199 and E.100-E.199	General Government
B.200-B.299 and E.200-E.299	Protection to Persons and Property
B.300-B.399 and E.300-E.399	Human Services
B.400-B.499 and E.400-E.499	Labor
B.500-B.599 and E.500-E.599	General Education
B.600–B.699 and E.600–E.699	Higher Education
B.700–B.799 and E.700–E.799	Natural Resources
B.800–B.899 and E.800–E.899	Commerce and Community

	Development	
B.900–B.999 and E.900–E.999	<u>Transportation</u>	
B.1000–B.1099 and E.1000–E.1099	Debt Service	
B.1100–B.1199 and E.1100–E.1199	One-time and other appropriation	
	actions	
Sec. B.100 Secretary of administration	on - secretary's office	
Personal services	584,928	
Operating expenses	<u>73,832</u>	
Total	658,760	
Source of funds		
General fund	<u>658,760</u>	
Total	658,760	
Sec. B.101 Information and innovation - communications and information technology		
Personal services	6,842,098	
Operating expenses	2,505,878	
Grants	700,000	
Total	10,047,976	
Source of funds		
General fund	20,911	
Internal service funds	10,027,065	
Total	10,047,976	
Sec. B.102 Finance and management - budget and management		
Personal services	880,871	
Operating expenses	<u>234,515</u>	
Total	1,115,386	
Source of funds		
General fund	882,783	
Interdepartmental transfe	rs <u>232,603</u>	
Total	1,115,386	
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Sec. B.103 Finance and management - financial operations	
Personal services	2,474,557
Operating expenses	<u>552,210</u>
Total	3,026,767
Source of funds	
Internal service funds	3,026,767
Total	3,026,767
Sec. B.104 Human resources - operations	
Personal services	2,543,406
Operating expenses	<u>414,786</u>
Total	2,958,192
Source of funds	
General fund	1,689,278
Special funds	280,835
Interdepartmental transfers	<u>988,079</u>
Total	2,958,192
Sec. B.105 Human resources - employee benefits and wellness	
Personal services	1,152,032
Operating expenses	<u>647,868</u>
Total	1,799,900
Source of funds	
Internal service funds	1,760,047
Interdepartmental transfers	<u>39,853</u>
Total	1,799,900
Sec. B.106 Libraries	
Personal services	1,857,236
Operating expenses	1,804,985
Grants	<u>62,500</u>
Total	3,724,721
Source of funds	

General fund	2,534,917
Special funds	132,656
Federal funds	955,372
Interdepartmental transfers	<u>101,776</u>
Total	3,724,721
Sec. B.107 Tax - administration/collection	
Personal services	12,586,124
Operating expenses	<u>3,138,092</u>
Total	15,724,216
Source of funds	
Tobacco fund	58,000
General fund	14,399,315
Special funds	1,069,901
Interdepartmental transfers	<u>197,000</u>
Total	15,724,216
Sec. B.108 Buildings and general services - administration	
Personal services	1,487,119
Operating expenses	<u>153,311</u>
Total	1,640,430
Source of funds	
Interdepartmental transfers	<u>1,640,430</u>
Total	1,640,430
Sec. B.109 Buildings and general services - engineering	
Personal services	2,124,181
Operating expenses	<u>341,604</u>
Total	2,465,785
Source of funds	
Interdepartmental transfers	<u>2,465,785</u>
Total	2,465,785
Sec. B.110 Buildings and general services - information centers	VT LEG 259081.1

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Personal services	3,060,509
Operating expenses	1,324,371
Grants	<u>45,000</u>
Total	4,429,880
Source of funds	
General fund	4,379,880
Special funds	<u>50,000</u>
Total	4,429,880
Sec. B.111 Buildings and general services - purchasing	
Personal services	642,843
Operating expenses	<u>149,518</u>
Total	792,361
Source of funds	
General fund	<u>792,361</u>
Total	792,361
Sec. B.112 Buildings and general services - postal services	
Personal services	636,412
Operating expenses	<u>148,967</u>
Total	785,379
Source of funds	
General fund	35,716
Internal service funds	749,663
Total	785,379
Sec. B.113 Buildings and general services - copy center	
Personal services	715,491
Operating expenses	122,107
Total	837,598
Source of funds	
Internal service funds	837,598
Total	837,598 VT LEG 259081.1

Sec. B.114 Buildings and general services - fleet management	nt services
Personal services	473,550
Operating expenses	<u>119,974</u>
Total	593,524
Source of funds	
Internal service funds	<u>593,524</u>
Total	593,524
Sec. B.115 Buildings and general services - federal surplus p	oroperty
Personal services	91,690
Operating expenses	44,687
Total	136,377
Source of funds	
Enterprise funds	136,377
Total	136,377
Sec. B.116 Buildings and general services - state surplus pro	perty
Personal services	66,974
Operating expenses	<u>99,806</u>
Total	166,780
Source of funds	
Internal service funds	<u>166,780</u>
Total	166,780
Sec. B.117 Buildings and general services - property manage	ement
Personal services	1,120,071
Operating expenses	<u>1,457,881</u>
Total	2,577,952
Source of funds	
Internal service funds	<u>2,577,952</u>
Total	2,577,952
Sec. B.118 Buildings and general services - workers' compet	nsation insurance
Personal services	1,295,161 VT LEG 259081.1
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Operating expenses	<u>271,331</u>
Total	1,566,492
Source of funds	
Internal service funds	<u>1,566,492</u>
Total	1,566,492
Sec. B.119 Buildings and general services - general liability	insurance
Personal services	304,042
Operating expenses	<u>76,203</u>
Total	380,245
Source of funds	
Internal service funds	<u>380,245</u>
Total	380,245
Sec. B.120 Buildings and general services - all other insurance	ce
Personal services	39,531
Operating expenses	<u>30,469</u>
Total	70,000
Source of funds	
Internal service funds	70,000
Total	70,000
Sec. B.121 Buildings and general services - fee for space	
Personal services	13,357,546
Operating expenses	<u>13,886,975</u>
Total	27,244,521
Source of funds	
Internal service funds	27,244,521
Total	27,244,521
Sec. B.122 Geographic information system	
Grants	<u>408,700</u>
Total	408,700
Source of funds	

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Special funds	408,700
Total	408,700
Sec. B.123 Executive office - governor's office	
Personal services	1,169,079
Operating expenses	<u>391,275</u>
Total	1,560,354
Source of funds	
General fund	1,366,854
Interdepartmental transfers	<u>193,500</u>
Total	1,560,354
Sec. B.124 Legislative council	
Personal services	2,090,029
Operating expenses	<u>192,964</u>
Total	2,282,993
Source of funds	
General fund	<u>2,282,993</u>
Total	2,282,993
Sec. B.125 Legislature	
Personal services	3,608,557
Operating expenses	<u>3,329,011</u>
Total	6,937,568
Source of funds	
General fund	<u>6,937,568</u>
Total	6,937,568
Sec. B.126 Legislative information technology	
Personal services	376,107
Operating expenses	504,480
Total	880,587
Source of funds	
General fund	<u>880,587</u> VT LEG 259081.1

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Total	880,587
Sec. B.127 Joint fiscal committee	
Personal services	1,391,465
Operating expenses	<u>113,201</u>
Total	1,504,666
Source of funds	
General fund	<u>1,504,666</u>
Total	1,504,666
Sec. B.128 Sergeant at arms	
Personal services	477,005
Operating expenses	<u>82,428</u>
Total	559,433
Source of funds	
General fund	<u>559,433</u>
Total	559,433
Sec. B.129 Lieutenant governor	
Personal services	150,836
Operating expenses	<u>16,376</u>
Total	167,212
Source of funds	
General fund	<u>167,212</u>
Total	167,212
Sec. B.130 Auditor of accounts	
Personal services	3,494,631
Operating expenses	<u>139,445</u>
Total	3,634,076
Source of funds	
General fund	399,951
Special funds	53,099
Internal service funds	<u>3,181,026</u> VT LEG 259081.1

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Total	3,634,076
Sec. B.131 State treasurer	
Personal services	2,522,619
Operating expenses	331,089
Grants	<u>16,484</u>
Total	2,870,192
Source of funds	
General fund	1,130,500
Special funds	1,636,099
Interdepartmental transfers	<u>103,593</u>
Total	2,870,192
Sec. B.132 State treasurer - unclaimed property	
Personal services	670,521
Operating expenses	243,474
Total	913,995
Source of funds	
Private purpose trust funds	<u>913,995</u>
Total	913,995
Sec. B.133 Vermont state retirement system	
Personal services	6,370,747
Operating expenses	27,934,748
Total	34,305,495
Source of funds	
Pension trust funds	34,305,495
Total	34,305,495
Sec. B.134 Municipal employees' retirement system	
Personal services	2,002,388
Operating expenses	<u>451,355</u>
Total	2,453,743
Source of funds	VT LEG 259081.1

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Pension trust funds	<u>2,453,743</u>
Total	2,453,743
Sec. B.135 State labor relations board	
Personal services	161,823
Operating expenses	<u>38,452</u>
Total	200,275
Source of funds	
General fund	194,699
Special funds	2,788
Interdepartmental transfers	<u>2,788</u>
Total	200,275
Sec. B.136 VOSHA review board	
Personal services	42,635
Operating expenses	<u>10,531</u>
Total	53,166
Source of funds	
General fund	26,583
Interdepartmental transfers	<u>26,583</u>
Total	53,166
Sec. B.137 Homeowner rebate	
Grants	16,720,000
Total	16,720,000
Source of funds	
General fund	<u>16,720,000</u>
Total	16,720,000
Sec. B.138 Renter rebate	
Grants	<u>8,300,000</u>
Total	8,300,000
Source of funds	
General fund	2,500,000 VT LEG 259081.1

Education fund	<u>5,800,000</u>
Total	8,300,000
Sec. B.139 Tax department - reappraisal and listing payments	, ,
Grants	<u>3,243,196</u>
Total	3,243,196
Source of funds	
Education fund	3,243,196
Total	3,243,196
Sec. B.140 Municipal current use	
Grants	<u>11,700,000</u>
Total	11,700,000
Source of funds	
General fund	<u>11,700,000</u>
Total	11,700,000
Sec. B.141 Lottery commission	
Personal services	1,658,986
Operating expenses	1,096,215
Total	2,755,201
Source of funds	
Enterprise funds	2,755,201
Total	2,755,201
Sec. B.142 Payments in lieu of taxes	
Grants	<u>5,650,000</u>
Total	5,650,000
Source of funds	
Special funds	<u>5,650,000</u>
Total	5,650,000
Sec. B.143 Payments in lieu of taxes - Montpelier	
Grants	184,000
Total	184,000
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Source of funds	
Special funds	<u>184,000</u>
Total	184,000
Sec. B.144 Payments in lieu of taxes - correctional facilities	
Grants	40,000
Total	40,000
Source of funds	
Special funds	40,000
Total	40,000
Sec. B.145 Total general government	190,068,094
Source of funds	
General fund	71,764,967
Education fund	9,043,196
Special funds	9,508,078
Tobacco fund	58,000
Federal funds	955,372
Enterprise funds	2,891,578
Internal service funds	52,181,680
Pension trust funds	36,759,238
Private purpose trust funds	913,995
Interdepartmental transfers	<u>5,991,990</u>
Total	190,068,094
Sec. B.200 Attorney general	
Personal services	6,942,359
Operating expenses	1,095,205
Total	8,037,564
Source of funds	
Tobacco fund	625,000
General fund	3,785,911
Special funds	990,000 VT LEG 259081.1

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Federal funds	707,526
Interdepartmental transfers	<u>1,929,127</u>
Total	8,037,564
Sec. B.201 Vermont court diversion	
Grants	<u>1,724,773</u>
Total	1,724,773
Source of funds	
General fund	1,204,776
Special funds	<u>519,997</u>
Total	1,724,773
Sec. B.202 Defender general - public defense	
Personal services	7,631,450
Operating expenses	<u>890,945</u>
Total	8,522,395
Source of funds	
General fund	8,009,107
Special funds	<u>513,288</u>
Total	8,522,395
Sec. B.203 Defender general - assigned counsel	
Personal services	3,414,589
Operating expenses	<u>41,909</u>
Total	3,456,498
Source of funds	
General fund	3,331,234
Special funds	125,264
Total	3,456,498
Sec. B.204 Judiciary	
Personal services	27,415,175
Operating expenses	10,118,692
Grants	<u>70,000</u> VT LEG 259081.1

Total	37,603,867
Source of funds	
Tobacco fund	39,871
General fund	30,944,988
Special funds	3,105,455
Federal funds	1,435,418
Interdepartmental transfers	2,078,135
Total	37,603,867
Sec. B.205 State's attorneys	
Personal services	9,398,345
Operating expenses	<u>1,137,233</u>
Total	10,535,578
Source of funds	
General fund	8,329,655
Special funds	32,775
Federal funds	31,000
Interdepartmental transfers	<u>2,142,148</u>
Total	10,535,578
Sec. B.206 Special investigative unit	
Grants	<u>1,060,950</u>
Total	1,060,950
Source of funds	
General fund	<u>1,060,950</u>
Total	1,060,950
Sec. B.207 Sheriffs	
Personal services	3,261,904
Operating expenses	283,826
Total	3,545,730
Source of funds	
General fund	<u>3,545,730</u> VT LEG 259081.1

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Total	3,545,730
Sec. B.208 Public safety - administration	
Personal services	1,619,185
Operating expenses	<u>197,234</u>
Total	1,816,419
Source of funds	
General fund	1,776,694
Federal funds	<u>39,725</u>
Total	1,816,419
Sec. B.209 Public safety - state police	
Personal services	45,090,220
Operating expenses	8,211,814
Grants	<u>854,866</u>
Total	54,156,900
Source of funds	
ARRA funds	969,703
General fund	19,301,332
Transportation fund	27,635,057
Special funds	2,116,262
Federal funds	2,826,886
Interdepartmental transfers	<u>1,307,660</u>
Total	54,156,900
Sec. B.210 Public safety - criminal justice services	
Personal services	6,625,882
Operating expenses	3,291,327
Grants	<u>5,977,000</u>
Total	15,894,209
Source of funds	
ARRA funds	640,956
General fund	5,546,732 VT LEG 259081.1

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Special funds	1,972,320
Federal funds	7,645,784
Interdepartmental transfers	<u>88,417</u>
Total	15,894,209
Sec. B.211 Public safety - emergency management	
Personal services	2,716,202
Operating expenses	879,113
Grants	<u>1,602,000</u>
Total	5,197,315
Source of funds	
General fund	63,969
Special funds	224,014
Federal funds	4,889,332
Interdepartmental transfers	20,000
Total	5,197,315
Sec. B.212 Public safety - fire safety	
Personal services	4,953,243
Operating expenses	1,281,790
Grants	<u>55,000</u>
Total	6,290,033
Source of funds	
General fund	714,083
Special funds	5,275,683
Federal funds	255,267
Interdepartmental transfers	45,000
Total	6,290,033
Sec. B.213 Public safety - homeland security	
Personal services	9,213,757
Operating expenses	718,374
Grants	2,380,000 VT LEG 259081.1

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Total	12,312,131
Source of funds	
ARRA funds	295,267
General fund	430,545
Federal funds	<u>11,586,319</u>
Total	12,312,131
Sec. B.214 Radiological emergency response plan	
Personal services	657,163
Operating expenses	215,438
Grants	<u>876,975</u>
Total	1,749,576
Source of funds	
Special funds	<u>1,749,576</u>
Total	1,749,576
Sec. B.215 Military - administration	
Personal services	548,148
Operating expenses	198,427
Grants	100,000
Total	846,575
Source of funds	
General fund	846,575
Total	846,575
Sec. B.216 Military - air service contract	
Personal services	4,618,657
Operating expenses	<u>1,214,629</u>
Total	5,833,286
Source of funds	
General fund	468,392
Federal funds	<u>5,364,894</u>
Total	5,833,286 VT LEG 259081.1

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Sec. B.217 Military - army service contract	
Personal services	3,729,599
Operating expenses	<u>9,185,720</u>
Total	12,915,319
Source of funds	
General fund	112,380
Federal funds	12,802,939
Total	12,915,319
Sec. B.218 Military - building maintenance	
Personal services	983,598
Operating expenses	<u>386,580</u>
Total	1,370,178
Source of funds	
General fund	<u>1,370,178</u>
Total	1,370,178
Sec. B.219 Military - veterans' affairs	
Personal services	467,788
Operating expenses	132,754
Grants	<u>163,815</u>
Total	764,357
Source of funds	
General fund	605,099
Special funds	83,529
Federal funds	<u>75,729</u>
Total	764,357
Sec. B.220 Center for crime victims' services	
Personal services	1,314,211
Operating expenses	302,306
Grants	<u>9,634,587</u>
Total	11,251,104 VT LEG 259081.1

Source of funds	
ARRA funds	571,809
General fund	1,118,448
Special funds	5,550,448
Federal funds	4,010,399
Total	11,251,104
Sec. B.221 Criminal justice training council	
Personal services	1,222,580
Operating expenses	<u>1,265,675</u>
Total	2,488,255
Source of funds	
General fund	1,592,462
Special funds	531,285
Interdepartmental transfers	<u>364,508</u>
Total	2,488,255
Sec. B.222 Agriculture, food and markets - administration	
Personal services	764,915
Operating expenses	323,363
Grants	<u>538,351</u>
Total	1,626,629
Source of funds	
General fund	1,097,260
Special funds	377,465
Federal funds	109,904
Interdepartmental transfers	<u>42,000</u>
Total	1,626,629
Sec. B.223 Agriculture, food and markets - food safety and consumer protection	
Personal services	2,717,103
Operating expenses	635,855
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Grants	<u>2,400,000</u>
Total	5,752,958
Source of funds	
General fund	2,147,861
Special funds	3,095,426
Federal funds	502,671
Interdepartmental transfers	<u>7,000</u>
Total	5,752,958
Sec. B.224 Agriculture, food and markets - agricultural deve	elopment
Personal services	1,062,108
Operating expenses	398,437
Grants	<u>1,718,200</u>
Total	3,178,745
Source of funds	
General fund	319,093
Special funds	1,536,567
Federal funds	1,023,085
Interdepartmental transfers	<u>300,000</u>
Total	3,178,745
Sec. B.225 Agriculture, food and markets - laboratories, agricultural resource management and environmental stewardship	
Personal services	2,877,085
Operating expenses	857,259

Personal services	2,877,085
Operating expenses	857,259
Grants	<u>880,952</u>
Total	4,615,296
Source of funds	
General fund	1,764,182
Special funds	2,148,284
Federal funds	518,072
Interdepartmental transfers	<u>184,758</u>
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	Total	4,615,296
Sec. B.226 Banking, insurance, securities, and health care administration - administration		
	Personal services	2,094,388
	Operating expenses	<u>110,601</u>
	Total	2,204,989
S	ource of funds	
	Special funds	<u>2,204,989</u>
	Total	2,204,989
Sec. B.227 banking	Banking, insurance, securities, and health care administ	ration -
	Personal services	1,338,504
	Operating expenses	243,041
	Total	1,581,545
S	ource of funds	
	Special funds	<u>1,581,545</u>
	Total	1,581,545
Sec. B.228 insurance	Banking, insurance, securities, and health care administ	ration -
	Personal services	2,768,091
	Operating expenses	433,803
	Total	3,201,894
S	ource of funds	
	Special funds	3,201,894
	Total	3,201,894
Sec. B.229 captive	Banking, insurance, securities, and health care administ	ration -
	Personal services	3,237,368
	Operating expenses	439,405
	Total	3,676,773

Source of funds	
Special funds	3,676,773
Total	3,676,773
Sec. B.230 Banking, insurance, securities, and health care a securities	dministration -
Personal services	447,065
Operating expenses	<u>140,714</u>
Total	587,779
Source of funds	
Special funds	<u>587,779</u>
Total	587,779
Sec. B.231 Banking, insurance, securities, and health care a health care administration	dministration -
Personal services	4,421,102
Operating expenses	<u>320,805</u>
Total	4,741,907
Source of funds	
Special funds	2,843,083
Global Commitment fund	<u>1,898,824</u>
Total	4,741,907
Sec. B.232 Secretary of state	
Personal services	5,639,766
Operating expenses	2,010,915
Grants	<u>1,000,000</u>
Total	8,650,681
Source of funds	
General fund	1,741,157
Special funds	4,834,524
Federal funds	2,000,000
Interdepartmental transfers	75,000
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Total	8,650,681
Sec. B.233 Public service - regulation and energy	
Personal services	7,227,506
Operating expenses	703,315
Grants	21,203,466
Total	29,134,287
Source of funds	
ARRA funds	15,796,250
Special funds	12,180,237
Federal funds	<u>1,157,800</u>
Total	29,134,287
Sec. B.234 Public service board	
Personal services	2,716,697
Operating expenses	<u>364,000</u>
Total	3,080,697
Source of funds	
ARRA funds	265,834
Special funds	2,814,863
Total	3,080,697
Sec. B.235 Enhanced 9-1-1 Board	
Personal services	2,441,508
Operating expenses	1,252,574
Grants	<u>911,721</u>
Total	4,605,803
Source of funds	
Special funds	4,605,803
Total	4,605,803
Sec. B.236 Human rights commission	
Personal services	402,730
Operating expenses	<u>86,264</u> VT LEG 259081.1

Total	488,994
Source of funds	
General fund	318,255
Federal funds	<u>170,739</u>
Total	488,994
Sec. B.237 Liquor control - administration	
Personal services	1,442,422
Operating expenses	<u>625,578</u>
Total	2,068,000
Source of funds	
Tobacco fund	6,661
Enterprise funds	1,811,339
Interdepartmental transfers	250,000
Total	2,068,000
Sec. B.238 Liquor control - enforcement and licensing	
Personal services	1,930,027
Operating expenses	<u>377,524</u>
Total	2,307,551
Source of funds	
Tobacco fund	289,645
Enterprise funds	<u>2,017,906</u>
Total	2,307,551
Sec. B.239 Liquor control - warehousing and distribution	
Personal services	813,769
Operating expenses	329,615
Total	1,143,384
Source of funds	
Enterprise funds	<u>1,143,384</u>
Total	1,143,384

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Sec. B.240 Total protection to persons and property Source of funds	290,020,924
General fund	101,547,048
Transportation fund	27,635,057
Special funds	68,479,128
Tobacco fund	961,177
Global Commitment fund	1,898,824
Federal funds	57,153,489
ARRA funds	18,539,819
Enterprise funds	4,972,629
Interdepartmental transfers	8,833,753
Total	290,020,924
Sec. B.300 Human services - agency of human services - se	cretary's office
Personal services	8,997,483
Operating expenses	2,427,168
Grants	<u>5,195,241</u>
Total	16,619,892
Source of funds	
Tobacco fund	423,330
General fund	4,911,040
Special funds	7,517
Global Commitment fund	415,000
Federal funds	7,444,102
Interdepartmental transfers	<u>3,418,903</u>
Total	16,619,892
Sec. B.301 Secretary's office - global commitment	
Grants	<u>1,069,564,058</u>
Total	1,069,564,058
Source of funds	
ARRA funds	114,748,181 VT LEG 259081.1

Tobacco fund	35,848,873
General fund	66,312,737
Special funds	11,398,028
State health care resources fund	176,395,700
Catamount fund	19,076,195
Federal funds	645,426,677
Interdepartmental transfers	<u>357,667</u>
Total	1,069,564,058
Sec. B.302 Rate setting	
Personal services	858,339
Operating expenses	70,029
Total	928,368
Source of funds	
Global Commitment fund	<u>928,368</u>
Total	928,368
Sec. B.303 Developmental disabilities council	
Personal services	269,694
Operating expenses	51,991
Grants	220,000
Total	541,685
Source of funds	
Federal funds	<u>541,685</u>
Total	541,685
Sec. B.304 Human services board	
Personal services	282,894
Operating expenses	<u>67,804</u>
Total	350,698
Source of funds	
General fund	49,713
Federal funds	150,493 VT LEG 259081.1

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Interdepartmental transfers	<u>150,492</u>
Total	350,698
Sec. B.305 AHS - administrative fund	
Personal services	250,000
Operating expenses	4,750,000
Total	5,000,000
Source of funds	
Interdepartmental transfers	<u>5,000,000</u>
Total	5,000,000
Sec. B.306 Department of Vermont health access - administ	ration
Personal services	44,647,574
Operating expenses	2,593,853
Grants	7,625,573
Total	54,867,000
Source of funds	
General fund	1,549,943
Special funds	3,016,174
Global Commitment fund	37,417,425
Federal funds	12,883,458
Total	54,867,000
Sec. B.307 Department of Vermont health access - Medicai commitment	d program - global
Grants	<u>632,073,546</u>
Total	632,073,546
Source of funds	
Global Commitment fund	<u>632,073,546</u>
Total	632,073,546
Sec. B.308 Department of Vermont health access - Medicaiterm care waiver	d program - long
Grants	206,544,910
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Total	206,544,910
Source of funds	200,011,910
ARRA funds	22,351,327
General fund	62,936,176
Federal funds	121,257,407
Total	206,544,910
Sec. B.309 Department of Vermont health access - only	Medicaid program - state
Grants	18,026,949
Total	18,026,949
Source of funds	
General fund	16,296,293
Global Commitment fund	1,730,656
Total	18,026,949
Sec. B.310 Department of Vermont health access - matched	Medicaid nonwaiver
Grants	48,367,662
Total	48,367,662
Source of funds	
General fund	17,328,535
Federal funds	<u>31,039,127</u>
Total	48,367,662
Sec. B.311 Health - administration and support	
Personal services	5,741,814
Operating expenses	2,182,153
Grants	2,612,000
Total	10,535,967
Source of funds	
General fund	1,070,058
Special funds	232,148
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	Global Commitment fund	3,400,011
	Federal funds	<u>5,833,750</u>
	Total	10,535,967
Sec. B.312	Health - public health	
	Personal services	31,006,247
	Operating expenses	7,030,217
	Grants	30,531,561
	Total	68,568,025
Se	purce of funds	
	Tobacco fund	1,166,803
	General fund	7,737,787
	Special funds	4,783,956
	Global Commitment fund	20,959,163
	Catamount fund	2,510,319
	Federal funds	30,795,573
	Permanent trust funds	10,000
	Interdepartmental transfers	604,424
	Total	68,568,025
Sec. B.313	Health - alcohol and drug abuse programs	
	Personal services	2,931,722
	Operating expenses	709,845
	Grants	28,007,483
	Total	31,649,050
Se	purce of funds	
	Tobacco fund	2,382,834
	General fund	2,929,387
	Special funds	232,084
	Global Commitment fund	17,503,430
	Federal funds	8,341,315
	Interdepartmental transfers	<u>260,000</u> VT LEG 259081.1

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Total	31,649,050
Sec. B.314 Mental health - mental health	
Personal services	5,363,774
Operating expenses	904,685
Grants	<u>128,312,179</u>
Total	134,580,638
Source of funds	
General fund	792,412
Special funds	6,836
Global Commitment fund	127,939,561
Federal funds	5,821,829
Interdepartmental transfers	20,000
Total	134,580,638
Sec. B.315 Mental health - Vermont state hospital	
Personal services	20,934,634
Operating expenses	2,234,840
Grants	<u>82,335</u>
Total	23,251,809
Source of funds	
General fund	22,687,045
Special funds	50,000
Global Commitment fund	1,200
Federal funds	213,564
Interdepartmental transfers	300,000
Total	23,251,809
Sec. B.316 Department for children and families - administration services	istration and support
Personal services	37,767,592
Operating expenses	7,451,074
Grants	842,829
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Total	46,061,495
Source of funds	
General fund	15,044,158
Global Commitment fund	17,233,385
Federal funds	<u>13,783,952</u>
Total	46,061,495
Sec. B.317 Department for children and families - family set	rvices
Personal services	22,899,710
Operating expenses	3,344,491
Grants	<u>63,133,025</u>
Total	89,377,226
Source of funds	
ARRA funds	705,724
Tobacco fund	275,000
General fund	21,230,731
Special funds	1,691,637
Global Commitment fund	37,870,954
Federal funds	27,503,180
Interdepartmental transfers	100,000
Total	89,377,226
Sec. B.318 Department for children and families - child deve	elopment
Personal services	3,265,859
Operating expenses	498,925
Grants	56,136,434
Total	59,901,218
Source of funds	
ARRA funds	2,282,687
General fund	23,198,997
Special funds	1,820,000
Global Commitment fund	5,448,940 VT LEG 259081.1

Federal funds	27,011,087
Interdepartmental transfers	<u>139,507</u>
Total	59,901,218
Sec. B.319 Department for children and families - office	of child support
Personal services	9,071,791
Operating expenses	4,122,248
Total	13,194,039
Source of funds	
ARRA funds	431,230
General fund	2,690,672
Special funds	455,718
Federal funds	9,228,819
Interdepartmental transfers	<u>387,600</u>
Total	13,194,039
Sec. B.320 Department for children and families - aid to disabled	aged, blind and
Personal services	1,801,009
Grants	10,738,080
Total	12,539,089
Source of funds	
General fund	8,789,089
Global Commitment fund	<u>3,750,000</u>
Total	12,539,089
Sec. B.321 Department for children and families - generation	al assistance
Grants	<u>5,850,928</u>
Total	5,850,928
Source of funds	
ARRA funds	1,699,412
General fund	2,700,196
Global Commitment fund	340,000
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Federal funds	<u>1,111,320</u>
Total	5,850,928
Sec. B.322 Department for children and families - food s	tamp cash out
Grants	22,610,178
Total	22,610,178
Source of funds	
ARRA funds	575,000
Federal funds	22,035,178
Total	22,610,178
Sec. B.323 Department for children and families - reach	up
Grants	49,229,159
Total	49,229,159
Source of funds	
ARRA funds	1,127,346
General fund	19,927,750
Special funds	19,916,856
Global Commitment fund	374,400
Federal funds	7,882,807
Total	49,229,159
Sec. B.324 Department for children and families - home assistance/LIHEAP	heating fuel
Personal services	20,000
Operating expenses	90,000
Grants	<u>11,502,664</u>
Total	11,612,664

Source of funds	
Federal funds	<u>11,612,664</u>
Total	11,612,664

opportunity	
Personal services	266,289
Operating expenses	78,339
Grants	4,747,762
Total	5,092,390
Source of funds	
General fund	1,241,285
Special funds	57,990
Federal funds	3,793,115
Total	5,092,390
Sec. B.326 Department for children and families - OEO - assistance	weatherization
Personal services	183,254
Operating expenses	130,762
Grants	<u>14,959,936</u>
Total	15,273,952
Source of funds	
ARRA funds	8,421,288
Special funds	4,602,998
Federal funds	2,249,666
Total	15,273,952
Sec. B.327 Department for children and families - Woodsi center	de rehabilitation
Personal services	3,453,113
Operating expenses	<u>578,399</u>
Total	4,031,512
Source of funds	
General fund	3,976,620
Interdepartmental transfers	<u>54,892</u>
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Sec. B.325 Department for children and families - office of economic opportunity

Total	4,031,512
Sec. B.328 Department for children and families - disabi services	lity determination
Personal services	4,353,948
Operating expenses	<u>1,133,361</u>
Total	5,487,309
Source of funds	
Global Commitment fund	246,517
Federal funds	<u>5,240,792</u>
Total	5,487,309
Sec. B.329 Disabilities, aging and independent living - a support	dministration and
Personal services	24,109,012
Operating expenses	<u>3,661,592</u>
Total	27,770,604
Source of funds	
General fund	7,131,010
Special funds	889,246
Global Commitment fund	6,014,470
Federal funds	11,246,096
Interdepartmental transfers	<u>2,489,782</u>
Total	27,770,604
Sec. B.330 Disabilities, aging and independent living - a independent living grants	dvocacy and
Grants	<u>22,233,616</u>
Total	22,233,616
Source of funds	
ARRA funds	404,000
General fund	9,908,037
Global Commitment fund	3,638,762

Federal funds	7,645,317
Interdepartmental transfers	637,500
Total	22,233,616
Sec. B.331 Disabilities, aging and independent living - impaired	blind and visually
Grants	<u>1,481,457</u>
Total	1,481,457
Source of funds	
General fund	364,064
Special funds	223,450
Global Commitment fund	245,000
Federal funds	<u>648,943</u>
Total	1,481,457
Sec. B.332 Disabilities, aging and independent living - rehabilitation	vocational
Grants	7,302,971
Total	7,302,971
Source of funds	
ARRA funds	1,334,000
General fund	1,535,695
Global Commitment fund	7,500
Federal funds	4,132,389
Interdepartmental transfers	293,387
Total	7,302,971
Sec. B.333 Disabilities, aging and independent living -	developmental services
Grants	149,922,473
Total	149,922,473
Source of funds	
General fund	155,125
Special funds	15,463
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Global Commitment fund	149,392,028
Federal funds	<u>359,857</u>
Total	149,922,473
Sec. B.334 Disabilities, aging and independent living -TBI community based waiver	home and
Grants	<u>4,044,899</u>
Total	4,044,899
Source of funds	
Global Commitment fund	<u>4,044,899</u>
Total	4,044,899
Sec. B.335 Corrections - administration	
Personal services	1,984,192
Operating expenses	<u>215,304</u>
Total	2,199,496
Source of funds	
General fund	<u>2,199,496</u>
Total	2,199,496
Sec. B.336 Corrections - parole board	
Personal services	328,861
Operating expenses	<u>60,198</u>
Total	389,059
Source of funds	
General fund	<u>389,059</u>
Total	389,059
Sec. B.337 Corrections - correctional education	
Personal services	4,419,709
Operating expenses	<u>306,274</u>
Total	4,725,983
Source of funds	
General fund	368,863
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	Special funds	696,991
	Interdepartmental transfers	3,660,129
	Total	4,725,983
Sec. B.338	Corrections - correctional services	
	Personal services	80,054,352
	Operating expenses	33,761,401
	Grants	3,722,953
	Total	117,538,706
Se	ource of funds	
	Tobacco fund	87,500
	General fund	113,305,822
	Special funds	483,963
	Global Commitment fund	3,094,144
	Federal funds	170,962
	Interdepartmental transfers	<u>396,315</u>
	Total	117,538,706
Sec. B.339	Correctional services - out of state beds	
	Personal services	17,008,240
	Total	17,008,240
Se	ource of funds	
	General fund	17,008,240
	Total	17,008,240
Sec. B.340	Corrections - correctional facilities - recreation	
	Personal services	475,506
	Operating expenses	342,362
	Total	817,868
Se	ource of funds	
	General fund	125,000
	Special funds	<u>692,868</u>
	Total	817,868 VT LEG 259081.1

Sec. B.341 Corrections - Vermont offender work program	
Personal services	986,255
Operating expenses	554,103
Total	1,540,358
Source of funds	
Internal service funds	<u>1,540,358</u>
Total	1,540,358
Sec. B.342 Vermont veterans' home - care and support services	
Personal services	15,385,424
Operating expenses	<u>3,673,019</u>
Total	19,058,443
Source of funds	
Special funds	11,615,802
Global Commitment fund	1,410,956
Federal funds	<u>6,031,685</u>
Total	19,058,443
Sec. B.343 Commission on women	
Personal services	235,132
Operating expenses	<u>66,690</u>
Total	301,822
Source of funds	
General fund	296,822
Special funds	<u>5,000</u>
Total	301,822
Sec. B.344 Retired senior volunteer program	
Grants	<u>131,096</u>
Total	131,096
Source of funds	
General fund	<u>131,096</u>
Total	131,096 VT LEG 259081.1

Sec. B.345 Total human services	3,038,198,507
Source of funds	
General fund	456,318,953
Special funds	62,894,725
Tobacco fund	40,184,340
Global Commitment fund	1,075,480,315
State health care resources fund	176,395,700
Catamount fund	21,586,514
Federal funds	1,031,436,809
ARRA funds	154,080,195
Permanent trust funds	10,000
Internal service funds	1,540,358
Interdepartmental transfers	18,270,598
Total	3,038,198,507
Sec. B.400 Labor - administration	
Personal services	2,746,693
Operating expenses	577,547
Grants	<u>30,000</u>
Total	3,354,240
Source of funds	
ARRA funds	348,824
General fund	272,756
Special funds	459,031
Catamount fund	76,844
Federal funds	2,001,785
Interdepartmental transfers	<u>195,000</u>
Total	3,354,240
Sec. B.401 Labor - programs	
Personal services	23,010,309
Operating expenses	5,488,024 VT LEG 259081.1

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Grants	<u>3,719,147</u>
Total	32,217,480
Source of funds	
ARRA funds	4,222,948
General fund	2,288,674
Special funds	2,912,759
Catamount fund	317,228
Federal funds	21,170,870
Interdepartmental transfers	<u>1,305,001</u>
Total	32,217,480
Sec. B.402 Total labor	35,571,720
Source of funds	
General fund	2,561,430
Special funds	3,371,790
Catamount fund	394,072
Federal funds	23,172,655
ARRA funds	4,571,772
Interdepartmental transfers	<u>1,500,001</u>
Total	35,571,720
Sec. B.500 Education - finance and administration	
Personal services	5,666,454
Operating expenses	1,715,341
Grants	<u>11,384,730</u>
Total	18,766,525
Source of funds	
General fund	3,103,135
Education fund	427,526
Special funds	12,395,755
Global Commitment fund	823,092
Federal funds	2,012,287 VT LEG 259081.1

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Interdepartmental transfers	<u>4,730</u>
Total	18,766,525
Sec. B.501 Education - education services	
Personal services	12,293,389
Operating expenses	1,598,645
Grants	<u>166,683,243</u>
Total	180,575,277
Source of funds	
ARRA funds	46,719,169
General fund	4,805,426
Education fund	1,131,751
Special funds	2,061,526
Federal funds	125,832,574
Interdepartmental transfers	24,831
Total	180,575,277
Sec. B.502 Education - special education: formula grants	
Grants	<u>142,687,975</u>
Total	142,687,975
Source of funds	
Education fund	142,457,975
Global Commitment fund	230,000
Total	142,687,975
Sec. B.503 Education - state-placed students	
Grants	<u>15,700,000</u>
Total	15,700,000
Source of funds	
Education fund	15,700,000
Total	15,700,000
Sec. B.504 Education - adult education and literacy	
Grants	<u>6,463,656</u> vt leg 259081.1

Total	6,463,656
Source of funds	
General fund	787,995
Education fund	4,800,000
Federal funds	<u>875,661</u>
Total	6,463,656
Sec. B.505 Education - adjusted education payment	
Grants	<u>1,138,075,036</u>
Total	1,138,075,036
Source of funds	
ARRA interdepartmental transfer	38,575,036
Education fund	1,099,500,000
Total	1,138,075,036
Sec. B.506 Education - transportation	
Grants	<u>15,782,031</u>
Total	15,782,031
Source of funds	
Education fund	<u>15,782,031</u>
Total	15,782,031
Sec. B.507 Education - small school grants	
Grants	7,000,000
Total	7,000,000
Source of funds	
Education fund	<u>7,000,000</u>
Total	7,000,000
Sec. B.508 Education - capital debt service aid	
Grants	180,000
Total	180,000
Source of funds	
Education fund	<u>180,000</u> VT LEG 259081.1

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Total	180,000
Sec. B.509 Education - tobacco litigation	
Personal services	129,931
Operating expenses	46,222
Grants	812,764
Total	988,917
Source of funds	
Tobacco fund	<u>988,917</u>
Total	988,917
Sec. B.510 Education - essential early education grant	
Grants	<u>5,679,216</u>
Total	5,679,216
Source of funds	
Education fund	<u>5,679,216</u>
Total	5,679,216
Sec. B.511 Education - technical education	
Grants	12,784,382
Total	12,784,382
Source of funds	
Education fund	12,784,382
Total	12,784,382
Sec. B.512 Education - Act 117 cost containment	
Personal services	1,059,820
Operating expenses	131,887
Grants	<u>91,000</u>
Total	1,282,707
Source of funds	
Special funds	<u>1,282,707</u>
Total	1,282,707
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Sec. B.513 Appropriation and transfer to education fund	
Grants	240,803,945
Total	240,803,945
Source of funds	
General fund	240,803,945
Total	240,803,945
Sec. B.514 State teachers' retirement system	
Personal services	7,269,278
Operating expenses	20,964,109
Grants	<u>46,913,381</u>
Total	75,146,768
Source of funds	
General fund	46,913,381
Pension trust funds	28,233,387
Total	75,146,768
Sec. B.515 Total general education	1,861,916,435
Source of funds	
General fund	296,413,882
Education fund	1,305,442,881
Special funds	15,739,988
Tobacco fund	988,917
Global Commitment fund	1,053,092
Federal funds	128,720,522
ARRA funds	46,719,169
Pension trust funds	28,233,387
Interdepartmental transfers	29,561
ARRA interdepartmental transfer	38,575,036
Total	1,861,916,435
Sec. B.600 University of Vermont	
Grants	<u>40,746,633</u> VT LEG 259081.1

Total	40,746,633
Source of funds	
General fund	36,740,477
Global Commitment fund	4,006,156
Total	40,746,633
Sec. B.601 Vermont Public Television	
Grants	<u>547,683</u>
Total	547,683
Source of funds	
General fund	<u>547,683</u>
Total	547,683
Sec. B.602 Vermont state colleges	
Grants	23,107,247
Total	23,107,247
Source of funds	
General fund	23,107,247
Total	23,107,247
Sec. B.603 Vermont state colleges - allied health	
Grants	<u>1,116,503</u>
Total	1,116,503
Source of funds	
General fund	711,096
Global Commitment fund	405,407
Total	1,116,503
Sec. B.604 Vermont interactive television	
Grants	785,679
Total	785,679
Source of funds	
General fund	<u>785,679</u>
Total	785,679 VT LEG 259081.1

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Sec. B.605 Vermont student assistance corporation	
Grants	18,363,607
Total	18,363,607
Source of funds	
General fund	18,363,607
Total	18,363,607
Sec. B.606 New England higher education compact	
Grants	<u>84,000</u>
Total	84,000
Source of funds	
General fund	<u>84,000</u>
Total	84,000
Sec. B.607 University of Vermont - Morgan Horse Farm	
Grants	<u>1</u>
Total	1
Source of funds	
General fund	<u>1</u>
Total	1
Sec. B.608 Total higher education	84,751,353
Source of funds	
General fund	80,339,790
Global Commitment fund	4,411,563
Total	84,751,353
Sec. B.700 Natural resources - agency of natural resources -	administration
Personal services	3,496,740
Operating expenses	1,107,048
Grants	70,510
Total	4,674,298
Source of funds	
General fund	4,269,265 VT LEG 259081.1

	Special funds	17,797
	Federal funds	174,332
	Interdepartmental transfers	<u>212,904</u>
	Total	4,674,298
Sec. B.701	Natural resources - state land local property tax	x assessment
	Operating expenses	<u>2,128,733</u>
	Total	2,128,733
Se	ource of funds	
	General fund	1,707,233
	Interdepartmental transfers	421,500
	Total	2,128,733
Sec. B.702	Fish and wildlife - support and field services	
	Personal services	12,803,506
	Operating expenses	4,897,176
	Grants	<u>904,333</u>
	Total	18,605,015
Se	ource of funds	
	General fund	1,157,253
	Fish and wildlife fund	17,113,525
	Interdepartmental transfers	334,237
	Total	18,605,015
Sec. B.703	Forests, parks and recreation - administration	
	Personal services	918,024
	Operating expenses	621,179
	Grants	<u>1,815,491</u>
	Total	3,354,694
Se	ource of funds	
	ARRA funds	50,000
	General fund	1,033,816
	Special funds	1,307,878 VT LEG 259081.1

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	0.62.000
Federal funds	<u>963,000</u>
Total	3,354,694
Sec. B.704 Forests, parks and recreation - forestry	4 511 100
Personal services	4,511,199
Operating expenses	531,567
Grants	<u>501,000</u>
Total	5,543,766
Source of funds	
ARRA funds	252,750
General fund	3,221,738
Special funds	679,372
Federal funds	1,259,906
Interdepartmental transfers	<u>130,000</u>
Total	5,543,766
Sec. B.705 Forests, parks and recreation - state parks	
Personal services	5,503,357
Operating expenses	<u>1,984,815</u>
Total	7,488,172
Source of funds	
ARRA funds	70,000
General fund	532,197
Special funds	6,751,451
Interdepartmental transfers	<u>134,524</u>
Total	7,488,172
Sec. B.706 Forests, parks and recreation - lands administration	
Personal services	450,413
Operating expenses	1,209,166
Total	1,659,579
Source of funds	
General fund	385,374 VT LEG 259081.1

Special funds	179,205
Federal funds	1,050,000
Interdepartmental transfers	<u>45,000</u>
Total	1,659,579
Sec. B.707 Forests, parks and recreation - youth conservation	corps
Grants	<u>670,541</u>
Total	670,541
Source of funds	
General fund	42,320
Special funds	284,221
Federal funds	94,000
Interdepartmental transfers	250,000
Total	670,541
Sec. B.708 Forests, parks and recreation - forest highway mai	ntenance
Personal services	20,000
Operating expenses	<u>134,925</u>
Total	154,925
Source of funds	
General fund	<u>154,925</u>
Total	154,925
Sec. B.709 Environmental conservation - management and su	pport services
Personal services	3,745,984
Operating expenses	1,119,601
Grants	<u>100,000</u>
Total	4,965,585
Source of funds	
General fund	691,248
Special funds	2,366,427
Federal funds	1,397,800
Interdepartmental transfers	<u>510,110</u> VT LEG 259081.1

Total	4,965,585
Sec. B.710 Environmental conservation - air and waste m	nanagement
Personal services	7,715,537
Operating expenses	6,426,547
Grants	<u>1,756,800</u>
Total	15,898,884
Source of funds	
ARRA funds	540,966
General fund	560,448
Special funds	10,909,314
Federal funds	3,583,156
Interdepartmental transfers	305,000
Total	15,898,884
Sec. B.711 Environmental conservation - office of water	programs
Personal services	13,400,525
Operating expenses	1,967,669
Grants	2,246,681
Total	17,614,875
Source of funds	
ARRA funds	553,471
General fund	5,708,472
Special funds	4,705,975
Federal funds	6,136,957
Interdepartmental transfers	<u>510,000</u>
Total	17,614,875
Sec. B.712 Environmental conservation - tax-loss-Conne control	cticut river flood
Operating expenses	34,700
Total	34,700

Source of funds	
General fund	3,470
Special funds	<u>31,230</u>
Total	34,700
Sec. B.713 Natural resources board	
Personal services	2,375,663
Operating expenses	<u>356,939</u>
Total	2,732,602
Source of funds	
General fund	766,716
Special funds	<u>1,965,886</u>
Total	2,732,602
Sec. B.714 Total natural resources	85,526,369
Source of funds	
General fund	20,234,475
Fish and wildlife fund	17,113,525
Special funds	29,198,756
Federal funds	14,659,151
ARRA funds	1,467,187
Interdepartmental transfers	2,853,275
Total	85,526,369

Sec. B.800 Commerce and community development - agency of commerce and community development - administration

Personal services	1,925,799
Operating expenses	1,078,886
Grants	<u>1,486,390</u>
Total	4,491,075
Source of funds	
ARRA funds	350,000
General fund	2,726,075
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Federal funds	800,000
Interdepartmental transfers	<u>615,000</u>
Total	4,491,075
Sec. B.801 Economic, housing, and community development	
Personal services	4,364,330
Operating expenses	1,360,756
Grants	18,162,346
Total	23,887,432
Source of funds	
ARRA funds	90,195
General fund	6,108,660
Special funds	4,131,257
Federal funds	<u>13,557,320</u>
Total	23,887,432
Sec. B.802 Historic sites - special improvements	
Personal services	40,000
Operating expenses	40,670
Total	80,670
Source of funds	
Special funds	20,000
Federal funds	40,000
Interdepartmental transfers	20,670
Total	80,670
Sec. B.803 Community development block grants	
Grants	<u>8,535,530</u>
Total	8,535,530
Source of funds	
ARRA funds	1,089,000
Federal funds	7,446,530
Total	8,535,530 VT LEG 259081.1

Sec. B.804 Downtown transportation and capital improvem	ent fund
Personal services	79,326
Grants	320,674
Total	400,000
Source of funds	
Special funds	400,000
Total	400,000
Sec. B.805 Tourism and marketing	
Personal services	1,503,826
Operating expenses	1,651,984
Grants	<u>130,000</u>
Total	3,285,810
Source of funds	
General fund	3,279,810
Special funds	<u>6,000</u>
Total	3,285,810
Sec. B.806 Vermont life	
Personal services	723,536
Operating expenses	<u>89,881</u>
Total	813,417
Source of funds	
Enterprise funds	<u>813,417</u>
Total	813,417
Sec. B.807 Vermont council on the arts	
Grants	<u>507,607</u>
Total	507,607
Source of funds	
General fund	<u>507,607</u>
Total	507,607

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Sec. B.808 Vermont symphony orchestra	
Grants	<u>113,821</u>
Total	113,821
Source of funds	
General fund	<u>113,821</u>
Total	113,821
Sec. B.809 Vermont historical society	
Grants	<u>795,669</u>
Total	795,669
Source of funds	
General fund	<u>795,669</u>
Total	795,669
Sec. B.810 Vermont housing and conservation board	
Grants	23,789,348
Total	23,789,348
Source of funds	
Special funds	6,606,662
Federal funds	<u>17,182,686</u>
Total	23,789,348
Sec. B.811 Vermont humanities council	
Grants	<u>172,670</u>
Total	172,670
Source of funds	
General fund	<u>172,670</u>
Total	172,670
Sec. B.812 Total commerce and community development	66,873,049
Source of funds	
General fund	13,704,312
Special funds	11,163,919
Federal funds	39,026,536 VT LEG 259081.1

ARRA funds	1,529,195
Enterprise funds	813,417
Interdepartmental transfers	<u>635,670</u>
Total	66,873,049
Sec. B.900 Transportation - finance and administration	
Personal services	9,737,904
Operating expenses	2,720,073
Grants	<u>385,000</u>
Total	12,842,977
Source of funds	
Transportation fund	11,883,975
Federal funds	<u>959,002</u>
Total	12,842,977
Sec. B.901 Transportation - aviation	
Personal services	2,643,444
Operating expenses	20,173,198
Grants	160,000
Total	22,976,642
Source of funds	
ARRA funds	3,500,000
Transportation fund	3,035,642
Federal funds	16,441,000
Total	22,976,642
Sec. B.902 Transportation - buildings	
Operating expenses	<u>2,467,500</u>
Total	2,467,500
Source of funds	
TIB fund	190,000
Transportation fund	1,517,500
Federal funds	<u>760,000</u> vt leg 259081.1

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Total	2,467,500
Sec. B.903 Transportation - program development	
Personal services	36,339,478
Operating expenses	220,453,550
Grants	26,819,421
Total	283,612,449
Source of funds	
ARRA funds	45,034,600
TIB fund	14,856,273
Transportation fund	18,937,922
Local match	1,434,254
Federal funds	199,707,420
Interdepartmental transfers	<u>3,641,980</u>
Total	283,612,449
Sec. B.904 Transportation - rest areas	
Personal services	270,000
Operating expenses	4,550,000
Total	4,820,000
Source of funds	
TIB fund	283,800
Transportation fund	405,144
Federal funds	<u>4,131,056</u>
Total	4,820,000
Sec. B.905 Transportation - maintenance state system	
Personal services	34,530,658
Operating expenses	32,821,229
Grants	30,000
Total	67,381,887
Source of funds	
Transportation fund	65,552,943 VT LEG 259081.1

Federal funds	1,728,944
Interdepartmental transfers	100,000
Total	67,381,887
Sec. B.906 Transportation - planning, outreach and commun	nity affairs
Personal services	3,080,461
Operating expenses	1,350,317
Grants	4,969,488
Total	9,400,266
Source of funds	
Transportation fund	1,986,265
Federal funds	7,166,001
Interdepartmental transfers	248,000
Total	9,400,266
Sec. B.907 Transportation - rail	
Personal services	3,344,027
Operating expenses	<u>48,385,856</u>
Total	51,729,883
Source of funds	
ARRA funds	26,231,846
TIB fund	1,609,000
Transportation fund	10,026,291
Local match	250,000
Federal funds	<u>13,612,746</u>
Total	51,729,883
Sec. B.908 Transportation - public transit	
Personal services	707,567
Operating expenses	168,602
Grants	23,863,535
Total	24,739,704

Source of funds	
ARRA funds	2,000,000
Transportation fund	6,842,927
Federal funds	<u>15,896,777</u>
Total	24,739,704
Sec. B.909 Transportation - central garage	
Personal services	3,347,147
Operating expenses	<u>14,130,716</u>
Total	17,477,863
Source of funds	
Internal service funds	<u>17,477,863</u>
Total	17,477,863
Sec. B.910 Department of motor vehicles	
Personal services	15,786,441
Operating expenses	8,303,553
Grants	<u>136,476</u>
Total	24,226,470
Source of funds	
Transportation fund	23,022,730
Federal funds	1,203,740
Total	24,226,470
Sec. B.911 Transportation - town highway structures	
Grants	<u>5,833,500</u>
Total	5,833,500
Source of funds	
Transportation fund	<u>5,833,500</u>
Total	5,833,500
Sec. B.912 Transportation - town highway Vermont local roads	
Grants	<u>390,000</u>
Total	390,000
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Source of funds	
Transportation fund	235,000
Federal funds	<u>155,000</u>
Total	390,000
Sec. B.913 Transportation - town highway class 2 roadway	
Grants	7,248,750
Total	7,248,750
Source of funds	
Transportation fund	<u>7,248,750</u>
Total	7,248,750
Sec. B.914 Transportation - town highway bridges	
Personal services	3,600,000
Operating expenses	<u>15,489,340</u>
Total	19,089,340
Source of funds	
ARRA funds	3,990,070
TIB fund	1,616,014
Transportation fund	658,224
Local match	766,631
Federal funds	<u>12,058,401</u>
Total	19,089,340
Sec. B.915 Transportation - town highway aid program	
Grants	<u>24,982,744</u>
Total	24,982,744
Source of funds	
Transportation fund	24,982,744
Total	24,982,744
Sec. B.916 Transportation - town highway class 1 supplemental grants	
Grants	<u>128,750</u>
Total	128,750 VT LEG 259081.1

S	ource of funds	
	Transportation fund	<u>128,750</u>
	Total	128,750
Sec. B.917	Transportation - town highway emergency fund	
	Grants	750,000
	Total	750,000
S	ource of funds	
	Transportation fund	750,000
	Total	750,000
Sec. B.918	Transportation - municipal mitigation grant program	
	Grants	<u>2,112,998</u>
	Total	2,112,998
S	ource of funds	
	Transportation fund	247,998
	Federal funds	<u>1,865,000</u>
	Total	2,112,998
Sec. B.919	Transportation - public assistance grant program	
	Grants	200,000
	Total	200,000
S	ource of funds	
	Federal funds	200,000
	Total	200,000
Sec. B.920	Transportation board	
	Personal services	75,633
	Operating expenses	<u>10,911</u>
	Total	86,544
S	ource of funds	
	Transportation fund	86,544
	Total	86,544

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Sec. B.921 Total transportation	582,498,267
Source of funds	
Transportation fund	183,382,849
TIB fund	18,555,087
Local match	2,450,885
Federal funds	275,885,087
ARRA funds	80,756,516
Internal service funds	17,477,863
Interdepartmental transfers	<u>3,989,980</u>
Total	582,498,267
Sec. B.1000 Debt service	
Debt service	71,576,314
Total	71,576,314
Source of funds	
ARRA funds	667,565
TIB fund	600,000
General fund	65,804,622
Transportation fund	3,477,902
Special funds	<u>1,026,225</u>
Total	71,576,314
Sec. B.1001 Total debt service	71,576,314
Source of funds	
General fund	65,804,622
Transportation fund	3,477,902
TIB fund	600,000
Special funds	1,026,225
ARRA funds	<u>667,565</u>
Total	71,576,314

Sec. B.1100 FISCAL YEAR 2011 NEXT GENERATION APPROPRIATION AND TRANSFERS

(a) In fiscal year 2011, \$4,793,000 is appropriated or transferred from the next generation initiative fund, created in 16 V.S.A. § 2887, as prescribed below:

(1) Workforce development: \$1,948,500 as follows:

(A) Workforce Education Training Fund (WETF). The sum of \$1,300,500 is transferred to the Vermont workforce education and training fund and subsequently appropriated to the department of labor for workforce development. Up to seven percent of the funds may be used for administration of the program.

(B) Adult Technical Education Programs. The amount of \$410,500 is appropriated to the department of labor working with the workforce development council. This appropriation is for the purpose of awarding grants to regional technical centers and comprehensive high schools to provide adult technical education, as that term is defined in 16 V.S.A. § 1522, to unemployed and underemployed Vermont adults. Centers receiving funding shall provide to the department the Social Security number of each individual who has completed a training program within 30 days of the completion of the program. The department shall include the Adult Education Program in the table required by Sec. 6(b) of No. 46 of the Acts of 2007 as added by Sec. 8 of No. 54 of the Acts of 2009.

(C) UVM Technology Transfer Program. The amount of \$118,750 is appropriated to the University of Vermont. This appropriation is for patent development and commercialization of technology created at the university for the purpose of creating employment opportunities for Vermont residents.

(D) Vermont center for emerging technologies. The amount of \$118,750 is appropriated to the agency of commerce and community development for a grant to the Vermont center for emerging technologies to enhance development of high technology businesses and next generation employment opportunities throughout Vermont.

(2) Loan repayment: The sum of \$300,000 is appropriated to the agency of human services Global Commitment for the department of health to use for health care loan repayment. The department shall use these funds for a grant to the area health education centers (AHEC) for repayment of commercial or governmental loans for postsecondary health-care-related education or training owed by persons living and working in Vermont in the health care field.

(3) Scholarships and grants: \$2,544,500 as follows:

(A) Nondegree VSAC Grants. The amount of \$494,500 is appropriated to the Vermont Student Assistance Corporation. These funds shall be for the purpose of providing nondegree grants to Vermonters to improve job skills and increase overall employability, enabling them to enroll in a postsecondary education or training program, including adult technical education that is not part of a degree or accredited certificate program. A portion of these funds shall be used for grants for indirect educational expenses to students enrolled in training programs. The grants shall not exceed \$3,000 per student. None of these funds shall be used for administrative overhead.

(B) The sum of \$150,000 is appropriated to the Vermont Student Assistance Corporation to fund the national guard educational assistance program established in 16 V.S.A. § 2856.

(C) Scholarships. The sum of \$1,500,000 is appropriated to the University of Vermont, the Vermont State Colleges, and the Vermont Student Assistance Corporation for need-based scholarships to Vermont residents. These funds shall be divided equally among the University of Vermont, the Vermont State Colleges, and the Vermont Student Assistance Corporation. The Vermont Student Assistance Corporation shall reserve these funds for students attending institutions other than the University of Vermont or the Vermont State Colleges. None of these funds shall be used for administrative overhead.

(D) Dual Enrollment Programs. The sum of \$400,000 is appropriated to the Vermont State Colleges for dual enrollment programs. The state colleges shall develop a voucher program that will allow Vermont students to attend programs at a postsecondary institution other than the state college system when programs at the other institution are better academically or geographically suited to student need.

Sec. B.1101 FISCAL YEAR 2011 BASE REDUCTIONS

(a) In fiscal year 2011, the secretary of administration is authorized to reduce the following amounts from appropriations and shall provide a report to the joint fiscal committee by November 15, 2010 on these reductions:

(1) Labor contract savings due to negotiated contract. The secretary of administration is authorized to reduce fiscal year 2011 appropriations consistent with these contract savings: <u>General fund</u> \$5,548,030

(2) Adjustment to state employees' retirement.

Transportation fund \$686,400

(b) In fiscal year 2011, the secretary of administration is authorized to reduce the following amounts from appropriations for savings associated with the consolidation of servers and other information technology changes.

General fund \$1,636,574 Sec. B.1102 FISCAL YEAR 2011 CONTRACT IMPLEMENTATION (a) There is appropriated to the secretary of administration for contract nonsalary items, to be transferred to departments as the secretary may determine to be necessary: General fund \$556,500 Sec. B.1103 FISCAL YEAR 2011 ONE-TIME APPROPRIATIONS (a) In fiscal year 2011, the following amounts are appropriated: (1) To the secretary of administration for the 27th payday in fiscal year 2011, to be transferred to departments as the secretary may determine to be necessary: General fund \$9,485,885 Transportation fund \$2,288,340 (2) To the department of finance and management, for the governor's transition. These funds are for costs incurred by the transitions of the executive office. No funds shall be used for inaugural celebrations. Any unexpended portion of these funds shall revert to the general fund: General fund \$75,000 (3) To the secretary of state for the 2010 elections: General fund \$610,000 (4) To the agency of commerce and community development for communities to utilize the sales tax reallocation in fiscal year 2011 pursuant to Sec. 54 of H.783 of 2010: General fund \$600.000 (5) To the department of environmental conservation for transition of the geological survey program to the University of Vermont: General fund \$125,000 (6) To the military department, division of veterans' affairs for Supplemental Assistance to Survivors (DeptID 2150890501) to be used in accordance with the guidelines as set forth in Sec. 72b of No. 66 of the Acts of 2003, as amended by Sec. 16 of No. 80 and Sec. 72 of No. 122 of the Acts of the 2003 Adi. Sess. (2004): General fund \$30,000 (7) To the department of finance and management for ARRA audits:

	General fund	\$351,000	
(8) To the University of Vermont:	General fund	<u>\$2,587,646</u>	
(9) To the Vermont State Colleges:	General fund	<u>\$1,722,837</u>	
(10) To the Vermont Student Assist	ance Corporation:		
	General fund	<u>\$1,244,995</u>	
(11) To the department of health to levaluation and review board:	<u>be allocated by the tol</u> General fund	<u>5acco</u> <u>\$1,200,000</u>	
(12) To the department of tourism as Shires of Vermont:	nd marketing for a gra General fund	<u>ant to the</u> <u>\$20,000</u>	
(13) To the department of mental he for mental health services provided to Verr their families:	-		
(14) To the secretary of state for init reapportionment; it is anticipated that in fis	scal year 2012 additio	nal costs will	
be incurred:	General fund	<u>\$30,000</u>	
(15) To the department of Vermont Hospital for costs incurred related to closur			
Champlain Bridge:	General fund	<u>\$40,000</u>	
(16) To the agency of commerce and grant to the Bennington County industrial of composites industry cluster:	• •		
(b) In fiscal year 2011, the following amount is appropriated to the secretary of administration (DeptID 1100020000) from the American Recovery and Reinvestment Act: State Fiscal Stabilization Fund to be transferred and expended in Sec. B.505 – adjusted education payment:			
		<u>\$38,575,036</u>	
Sec. C.100 Sec. B.309 of No. 1 of the Acts of the 2009 Special Session as amended by Sec. 21 of No. 67 of the Acts of the 2009 Adj. Sess. (2010) is further amended to read:			
Sec. B.309 Office of Vermont health access - Medicaid program - state only			
Grants			
Total	<u>34,701,782</u>	24,801,782	
		<u>24,801,782</u> 24,801,782	
Source of funds		· · · · ·	
Source of funds General fund		24,801,782	

Global Commitment fund	1,550,377	1,550,377
Catamount fund	7,136,202	7,136,202
Total	34,701,782	24,801,782

Sec. B.345 of No. 1 of the Acts of the 2009 Special Session as amended by Sec. 40 of No. 67 of the Acts of the 2009 Adj. Sess. (2010) is further amended to read:

Sec. B.345 Total human services	2,882,737,164 2,872,837,164	
Source of funds		
ARRA funds	167,300,631	167,300,631
General fund	4 54,794,342	444,894,342
Special funds	62,339,324	62,339,324
Tobacco fund	40,173,740	40,173,740
Global Commitment fund	967,449,491	967,449,491
State health care resources fund	154,368,435	154,368,435
Catamount fund	27,895,990	27,895,990
Federal funds	988,751,818	988,751,818
Permanent trust funds	10,000	10,000
Internal service funds	1,709,076	1,709,076
Interdepartmental transfers	<u>17,944,317</u>	<u>17,944,317</u>
Total	2,882,737,164 2	2,872,837,164

Sec. C.100.2 CHITTENDEN COUNTY COMMUNITY COORDINATOR

(a) The \$100,000 of funds allocated in fiscal year 2010 in the department of corrections justice reinvestment for recovery center expansion but remaining unexpended as of May 12, 2010, shall be used to provide a grant for a community coordinator initiative to be developed by the Chittenden County state's attorney and the Burlington police department in consultation with the judiciary, the department for children and families, and the department of corrections to reduce the number of Vermont youths and young adults who are at risk of incarceration or re-incarceration. The department of corrections shall develop measures to evaluate the success of this grant-funded program. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

Sec. C.101 Sec. 60 of No. 67 of the Acts of the 2009 Adj. Sess. (2010) is amended to read:

Sec. 60. FUND TRANSFERS

(a) Notwithstanding any other provisions of law, in fiscal year 2010:

(1) The following amounts shall be transferred to the general fund from the funds indicated:

21405	Fidelity/interest earnings	51,797 Approx.
21500	Inter-Unit Transfer (Bus Unit #01150) - Buildings and General	
	Services	186,135
21500	Inter-Unit Transfers Spec Fd (Bus Unit #01120)) - Human
	Resources	23,020
21525	Conference Fee Special Fund (Bus Unit #05100) - Education 3,000	
21584	Surplus Property (Bus Unit #1130) - Libraries	2,237
21584	Surplus Property (Bus Unit #04100) - Labor	741
21585	Pers-Human Resources Development	13,282
21638	Attny Gen Fees - Reimbursements	1,500,000 Approx.
21844	PERS - Recruitment Services	12,506
21904	Wallace Foundation - SAELP	1,406
21991	Clean Energy Development Fund (VEDA For	d & Fuel) 150,000
21991	Clean Energy Development Fund	143,672
<u>21500</u>	Inter-unit Transfers Special Fund (Bus Unit	
	#01110) - Finance and Management	<u>293,672</u>
22005	AHS Central Office earned federal receipts	1,500,000
50300	Liquor Control	836,516
62100	Abandoned property	1,993,024 Approx.
Caledonia Fair 5,000		
North Country Hospital Loan24,250		

* * *

Sec. C.102 FISCAL YEAR 2010 CONTINGENT RESERVES, TRANSFERS, AND APPROPRIATIONS

(a) Notwithstanding 32 V.S.A. §308c and 32 V.S.A. §308d, after the general fund budget stabilization reserve attains its statutory maximum, up to \$15,110,000 of any additional unreserved and undesignated general fund balance shall be retained in the general fund for expenditure during fiscal year 2011 consistent with the enacted budget. The amount of \$15,110,000 shall be adjusted by any expenditure of general funds authorized in subsection (d) of Sec. 9 of No. 68 of the Acts of the 2009 Adj. Sess. (2010) and any funds expended under Sec. 9(d) of No. 68 of the Acts of the 2009 Adj. Sess. (2010) shall not be included for the purposes of 32 V.S.A. § 308.

(b) Notwithstanding 32 V.S.A. § 308d, after satisfying subsection (a) of this section, any additional unreserved and undesignated general fund balance shall be reserved in accordance with 32 V.S.A. § 308c. Of the funds reserved in accordance with 32 V.S.A. § 308c:

(1) To the extent that said funds are reserved, up to \$6,890,000 shall be unreserved and a like amount of funds which would otherwise be deposited into the general fund in accordance with Sec. D.104 of this act shall not be deposited into the general fund but shall be deposited into the education fund.

(2) If the provisions of Sec. D.106(a) of this act result in the preclusion of the provisions of Sec.D.106(c)(2)(B) of this act, then in fiscal year 2011 the next \$6,400,000 shall be unreserved and appropriated for expenditure as follows:

(A) \$3,000,000 to implement the computer server and e-mail consolidation project;

(B) \$3,000,000 for the financial and human resource system development project; and

(C) \$400,000 for a case management system in the department of the attorney general.

(c) After satisfying subsections (a) and (b) of this section, any additional unreserved and undesignated general fund balance shall be reserved in accordance with 32 V.S.A. § 308d.

Sec. C.103 RADIO TRANSMITTER REPLACEMENT

(a) The appropriation in Sec. B.214 of No. 1 of the Acts of the 2009 Special Session for Public Safety – emergency management – radiological emergency response fund shall be used to pay for 50 percent of transmitter replacement at WTSA, which has a contract with the public safety department

for the emergency alert system in the emergency planning zone around Vermont Yankee.

Sec. D.100 APPROPRIATIONS; PROPERTY TRANSFER TAX

(a) This act contains the following amounts appropriated from special funds that receive revenue from the property transfer tax. Expenditures from these appropriations shall not exceed available revenues.

(1) The sum of \$233,000 is appropriated from the property valuation and review administration special fund to the department of taxes for administration of the use tax reimbursement program. Notwithstanding 32 V.S.A. § 9610(c), amounts above \$233,000 from the property transfer tax that are deposited into the property valuation and review administration special fund shall be transferred into the general fund.

(2) The sum of \$6,101,662 is appropriated from the Vermont housing and conservation trust fund to the Vermont housing and conservation trust board. Notwithstanding 10 V.S.A. § 312, amounts above \$6,101,662 from the property transfer tax that are deposited into the Vermont housing and conservation trust fund shall be transferred into the general fund.

(3) The sum of \$3,449,427 is appropriated from the municipal and regional planning fund. Notwithstanding 24 V.S.A. § 4306(a), amounts above \$3,449,427 from the property transfer tax that are deposited into the municipal and regional planning fund shall be transferred into the general fund. The \$3,449,427 shall be allocated as follows:

(A) \$2,632,027 for disbursement to regional planning commissions in a manner consistent with 24 V.S.A. § 4306(b);

(B) \$408,700 for disbursement to municipalities in a manner consistent with 24 V.S.A. § 4306(b);

(C) \$408,700 to the Vermont center for geographic information.

Sec. D.101 FUND TRANSFERS AND RESERVES

(a) The following amounts are transferred or reserved from the funds indicated:

(1) from the general fund to the:

(A) communications and information technology internal service fund established by 22 V.S.A. § 902a: \$300,000.

(B) next generation initiative fund established by 16 V.S.A. § 2887: \$4,793,000.

(C) reserved for expenditure in fiscal year 2011 in the human services caseload reserve created by 32 V.S.A. § 308b: \$62,264,000.

(2) from the transportation fund to the downtown transportation and related capital improvement fund established by 24 V.S.A. § 2796 to be used by the Vermont downtown development board for the purposes of the fund: \$400,000.

Sec. D.102 TOBACCO LITIGATION SETTLEMENT FUND BALANCE

(a) Notwithstanding 18 V.S.A. § 9502(b), the actual balances at the end of fiscal year 2010 in the tobacco litigation settlement fund shall remain for appropriation in fiscal year 2011.

Sec. D.103 TRANSFER OF TOBACCO TRUST FUNDS

(a) Notwithstanding 18 V.S.A. § 9502(a)(3) and (4), the actual amount of investment earnings of the tobacco trust fund at the end of fiscal year 2011 shall be transferred from the tobacco trust fund to the tobacco litigation settlement fund in fiscal year 2011.

Sec. D.104 EDUCATION MEDICAID RECEIPTS IN FISCAL YEAR 2011

(a) Notwithstanding 16 V.S.A. § 2959a(g), during fiscal year 2011, after the application of subsections 2959a(a) through (f), any remaining Medicaid reimbursement funds shall be deposited in the general fund.

Sec. D.105 GROSS RECEIPTS TAX IN FISCAL YEAR 2011

(a) In fiscal year 2011, notwithstanding 33 V.S.A. § 2503(c), the first \$2,300,000 of gross receipts tax revenue shall be deposited in the general fund.

Sec. D.106 HUMAN SERVICES CASELOAD RESERVE

(a) If the commissioner of finance and management determines that state funding needed to support the Medicaid program including the "Part D Clawback" payment is not adequate as a result of the federal government not extending the ARRA Enhanced Federal Medical Assistance Percentage (EFMAP) to June 30, 2011, then the amount determined to be inadequate by the commissioner shall be appropriated from the human services caseload reserve established in 32 V.S.A. § 308b in fiscal year 2011 and the commissioner shall report such action to the joint fiscal committee.

(b) Of the reserve balance remaining after the requirements of subsection (a) of this section have been met, the secretary of administration in fiscal year 2011 shall authorize the secretary of human services to include up to \$13,500,000 of funds available in the reserve as an available state match when setting the per-member per-month actuarial rates for Medicaid eligibility groups in the Global Commitment program for federal fiscal year 2011 and

submitting these rates for approval by the Centers for Medicare and Medicaid Services.

(c) Any balance remaining after the requirements of subsections (a) and (b) of this section have been met shall be allocated to the extent available as follows:

(1) \$10,000,000 is appropriated to the department of buildings and general services for planning and construction of replacement for Vermont State Hospital beds.

(2) \$12,035,000 shall be appropriated to the secretary of administration for use as follows:

(A) In addition to any amount provided as a result of Sec. C.102 (b)(2)(A), up to a total of \$3,000,000 shall be used to implement the computer server and e-mail consolidation and virtualization project. The commissioner of the department of information and innovation is authorized to implement the server consolidation and virtualization plan for state government. All units of the executive branch shall participate in this initiative. Any proposal for the purchases and implementation of servers shall be approved by the commissioner to ensure that projects are aligned. The commissioner of finance and management is authorized to capture savings of departments related to this project of \$1,636,574 consistent with the authority in Sec. B.1101(b) in fiscal year 2011 and \$2,000,000 in fiscal year 2012. The fiscal year 2012 assessment shall be used to fund the fiscal year 2012 implementation costs of this project.

(B) \$3,635,000 shall be used for expenditures related to the Vermont Integrated Eligibility Workflow System (VIEWS). These funds, in addition to funds appropriated in the capital bill process shall be available to cover fiscal year 2011 and 2012 project expenditures;

(C) In addition to any amount provided as a result of Sec. C.102(b)(2)(B), up to a total of 5,000,000 shall be used for expenditures related to the VISION Financial and Human Resource System. The commissioner of information and innovation is authorized to enter into a contract for up to \$7,000,000 for full implementation of this project. In fiscal year 2013, the commissioner of finance and management is authorized to assess up to \$2,000,000 to all units of the executive branch for project costs from savings that the project will produce.

(D) In addition to any amount provided as a result of Sec. C.102(b)(2)(C), up to a total of \$400,000 shall be used for expenditures related to the Attorney General's case management system development costs. It is the intent of the general assembly to the extent possible to create a unified multidepartment case management system built on the same system platform. The commissioner of the department of information and innovation with the approval of the secretary of administration is authorized to ensure that all appropriations and investments in new case management software by the executive branch be done in a manner that shall promote a unified case management system. A report on this effort shall be submitted to the house and senate committees on appropriations and on government operations by January 15, 2011.

(3) \$2,000,000 shall be appropriated for investments consistent with Sec. C.35 of H.792 of 2010 which will result in a reduction in the number of people entering the criminal justice system and decrease the recidivism of those who enter the system; and

(4) \$3,164,500 shall be appropriated to lower long-term expenses within the correctional system consistent with Sec. D.9 of H.792 of 2010.

(5) \$1,000,000 shall be appropriated to the department of Vermont health access to be used to provide payment amounts for outpatient hospital services closer to levels paid by Medicare. The department of Vermont health access shall increase payment rates to hospitals by an amount estimated to equal a total of \$2,800,000 for outpatient hospital services. The department of Vermont health access shall provide quarterly reports to hospitals indicating the additional amounts paid for outpatient hospital services.

(6) Contingent Appropriations and Transfers:

(A) \$2,100,000 shall be appropriated to the department of Vermont health access to fund a 53rd week of claims in the long-term care program in fiscal year 2011 if funding is not available within the appropriation provided.

(B) In the event that provisions of Sec. C.102(b)(1) do occur, then \$6,890,000 is unreserved and a like amount of funds which would otherwise be deposited into the general fund in accordance with Sec. D.104 of this act shall not be deposited into the general fund but shall be deposited into the education fund.

(C) \$3,000,000 is transferred to the education fund to the extent that it is needed to bring the reserve to 3.5 percent. This transfer shall be repaid to the general fund in fiscal year 2012.

(d) Any remaining funds shall be reserved for expenditure or transfer during the fiscal year 2011 budget adjustment process.

Sec. D.107 AMERICAN RECOVERY AND REINVESTMENT ACT: STATE FISCAL STABILIZATION FUND PROGRAM FOR THE SUPPORT OF PUBLIC ELEMENTARY, SECONDARY, AND HIGHER EDUCATION

(a) The governor is authorized to submit an application as soon as practicable for Vermont's share of the American Recovery and Reinvestment Act (ARRA) State Fiscal Stabilization Fund Program (SFSF) consistent with the intent of the act and this section. The amount of \$38,575,036, which is one-half of Vermont's SFSF funds, is available to school districts as part of the funding of the state's adjusted education payment under Sec. B.505 of this act.

(b) The commissioner of education shall ensure that federal reporting is carried out as to:

(1) the use of funds provided under the SFSF program;

(2) the estimated number of jobs created or saved with program funds;

(3) estimated tax increases that were averted as a result of program funds;

(4) the state's progress in the areas covered by the application assurances; and

(5) maintaining records to ensure the ability to effectively monitor, evaluate, and audit the state fiscal stabilization fund.

* * * GENERAL GOVERNMENT * * *

Sec. E.100 [DELETED]

Sec. E.100.1 3 V.S.A. § 2222 is amended to read:

§ 2222. POWERS AND DUTIES; BUDGET AND REPORT

(a) In addition to the duties expressly set forth elsewhere by law the secretary shall:

* * *

(9) Submit to the general assembly concurrent with the governor's annual budget request required under 32 V.S.A. § 306, a strategic plan for information technology which outlines the significant deviations from the previous year's information technology plan, and which details the plans for information technology activities of state government for the following fiscal year as well as the administration's financing recommendations for these activities. All such plans shall be reviewed and approved by the commissioner of information and innovation prior to being included in the governor's annual budget request. The plan shall identify the proposed sources of funds for each

project identified. <u>The plan shall also contain a review of the state's</u> information technology and an identification of priority projects by agency. The plan shall include, for any proposed new computer system or system upgrade information technology activity with a cost in excess of \$150,000.00 \$100,000.00:

* * *

(E) a statewide budget for all information technology activities with a cost in excess of \$100,000.

(10) The secretary shall annually submit to the general assembly a five-year information technology plan which indicates the anticipated information technology activities of the legislative, executive, and judicial branches of state government. For purposes of this subdivision section, "information technology activities" shall mean:

* * *

Sec. E.100.2 22 V.S.A. § 901 is amended to read:

§ 901. Creation of department DEPARTMENT OF INFORMATION AND

INNOVATION

There is created the <u>The</u> department of information and innovation within the agency of administration. The department, created in 3 V.S.A. Sec. 2283b, shall have all the responsibilities assigned to it by law, including the following:

* * *

(5) to review and approve computer systems or computer system upgrades <u>in all departments</u> with a cost in excess of $\frac{150,000.00}{100,000.00}$, and annually submit to the general assembly a strategic plan for information technology as required of the secretary of administration by subdivision 2222(a)(9) of Title 3;

(6) to review and approve information technology activities in all departments with a cost in excess of \$100,000.00, and annually submit to the general assembly a budget for information technology as required of the secretary of administration by subdivision 2222(a)(9) of Title 3. For purposes of this section, "information technology activities" is defined in 3 V.S.A. § 2222(a)(10);

(7) to administer the independent review responsibilities of the secretary of administration described in subsection 2222(g) of Title 3;

(7)(8) to perform the responsibilities of the secretary of administration under section 227b of Title 30;

(8)(9) to administer communication, information, and technology services, which are transferred from the department of buildings and general services;

(9)(10) to inventory technology assets within state government;

(10)(11) to coordinate information technology training within state government;

(11)(12) to support the statewide development of broadband telecommunications infrastructure and services, in a manner consistent with the telecommunications plan prepared pursuant to 30 V.S.A. § 202d and community development objectives established by the agency of commerce and community development, by:

* * *

(12)(13) to provide technical support and services to the departments of human resources and of finance and management for the statewide central accounting and encumbrance system, the statewide budget development system, the statewide human resources management system, and other agency of administration systems as may be assigned by the secretary.

Sec E.100.3 INFORMATION TECHNOLOGY INFRASTRUCTURE NEEDS

(a) In order for state government operations to be effective and efficient, timely and reasonable replacement and upgrading of information technology systems is appropriate and necessary. Therefore the secretary of administration, working in collaboration with the state treasurer, shall study long term options for financing information technology infrastructure needs. The study shall include:

(1) A comprehensive review of the budget projections for information technology activities of more than \$100,000 for all departments as presented in the five-year information technology plan written pursuant to 3 V.S.A. § 2222(a)(10) or through other methods of data collection the secretary may deem appropriate in order to conduct the study.

(2) Specific strategies to pay for information technology investments that consider maximization of all available funding sources, including match opportunities. Options to be examined include:

(A) Reviewing how other states fund information technology projects.

(B) Reinvesting the savings that are a result of information technology projects

(C) Creating and capitalizing a revolving loan fund for information technology infrastructure needs. This fund would be used for buying or leasing information technology infrastructure and contain repayment protocols, where possible, for agencies and departments. Examination of this concept shall include capitalization funding options from the general fund, capital funds, or other funds including examination of the option of using: two-thirds of one percent of the prior year appropriations from the general fund, the transportation fund, and, as determined by the commissioner of finance and management, up to two-thirds of one percent of the prior year appropriations from special funds. Special fund participation should relate to past, present, or future information system investments.

(D) Dedicating ongoing funding from annual funds or capital funds, or both.

(E) Establishing special agency funds supported by agency revenues such as fees.

(F) Authorizing occasional increases in the debt limit to accommodate specific projects.

(G) Other options.

(b) On or before December 1, 2010, the secretary shall submit a report to the house and senate committees on appropriations, the house committee on institutions and corrections, and the senate committee on institutions presenting the various options and recommendations for setting up and funding these needs.

Sec. E.100.4 IN CASE OF FISCAL YEAR 2011 PROPOSAL TO REDUCE STATE WORK FORCE BY MORE THAN ONE PERCENT

(a) Due to the current and continuing fiscal stress that will impact the Vermont fiscal year 2011 state budget and the unique interplay between the underlying state budget and the Challenges for Change reductions which have been delegated to the administration, it may become necessary to take further significant measures to achieve savings in order to ensure a balanced budget in the general fund. If, after all savings required by the 2010 Challenges for Change legislation in Act 68 and H. 792 as enacted have been identified by the secretary of administration, the secretary of administration determines that in order to ensure a balanced fiscal year 2011 budget it is also necessary, when the general assembly is not in session, to eliminate by reduction in force or positions identified for elimination or both more than one percent of the entire state workforce in fiscal year 2011, with the one percent measured cumulatively from July 1, 2010, the secretary shall first submit a plan which complies with the standards outlined in subdivisions (1) through (6) of this

subsection to the joint fiscal committee for its consideration. For the purposes of this section, "entire state workforce" means all full-time, permanent, classified, and exempt state employees.

(1) The plan shall outline the proportional impacts on exempt employees, classified confidential employees, and all other employee classifications and shall not have an unduly disproportionate impact on any employee classification;

(2) The plan shall not have an unduly disproportionate effect on any single function, program, service, or benefit;

(3) The plan shall describe how it will minimize any negative impacts on delivery of services to the public, on public health, and on public safety:

(4) The plan shall describe how it will minimize cost impacts on other departments, agencies, or areas of government;

(5) The plan shall describe all proposed reductions in expenditures authorized by a general appropriations or budget adjustment act; and

(6) The plan shall reflect the priorities established by the general assembly in law.

(b) A plan developed under subsection (a) of this section shall be submitted to the joint fiscal committee and shall not be implemented before 28 days after submission to the joint fiscal committee as set forth under this section. The joint fiscal committee shall meet within 14 days of the date the secretary's plan is filed to review and act upon the plan in accordance with the standards in subsection (a) of this section. If the plan does not meet the standards of subsection (a) of this section or if all savings required by the 2010 Challenges for Change legislation in Act 68 and H.792 as enacted have not been identified by the secretary of administration at the time the plan is submitted to the committee, the committee may disapprove the plan and, if disapproved, the plan may not be implemented.

Sec. E.100.5 STATE MONITORING OF INTERNET USE; FINDINGS; AUTHORITY; AGENCIES COVERED; WEB-CONTENT FILTERING COMMITTEE

(a) Findings. The general assembly finds that:

(1) The Personnel Policies and Procedures Manual (PPPM) for the state of Vermont authorizes limited personal use of Internet services. Number 5.6 of the PPPM specifies that "employees shall not use, or attempt to use, state personnel, property, or equipment for their private use or for any use not required for the proper discharge of their official duties." Pursuant to policy 11.7 of the PPPM, "that policy has been interpreted to allow a limited degree

of personal use of state telephones for private call when such use meets certain guidelines," and similar allowances are permitted for Internet, electronic and wireless communication devices and services, and e-mail capabilities.

(2) Further, the rules for Internet services under Number 11.7 of the PPPM give agencies the right to monitor their systems and the Internet activities of their employees. For example, Rule 10 of Number 11.7 specifies that Internet monitoring "may occur in, but is not limited to, circumstances when there is a reason to suspect that an employee is involved in activities that are prohibited by law, violate state policy or regulations, or jeopardize the integrity and/or performance of the computer systems of the state government." The rule goes on to further specify that "[m]onitoring may also occur in the normal course of network administration and trouble-shooting, or on a random basis using electronic tools designed to monitor internet usage."

(b) The general assembly anticipates that Internet and computer monitoring software, such as Marshall 86, shall be administered consistently with stated policies in PPPM Numbers 5.6 and 11.7.

Sec. E.101 Information and innovation - communications and information technology (Sec. B.101, #1105500000)

(a) Of this appropriation, \$300,000 is for a grant to the Vermont telecommunications authority established in 30 V.S.A. § 8061.

Sec. E.103 Finance and management – financial operations (Sec. B.103, #1115001000)

(a) Pursuant to 32 V.S.A. § 307(e), financial management fund charges not to exceed \$6,266,531 plus the costs of fiscal year 2011 salary adjustments bargained as part of the state/VSEA agreement are hereby approved. Of this amount, \$3,239,764 plus the costs of fiscal year 2011 salary adjustments bargained as part of the state/VSEA agreement shall be used to support the HCM system that is operated by the department of information and innovation.

Sec. E.107 Tax - administration/collection (Sec. B.107, #1140010000)

(a) Pursuant to Sec. 79 of No. 67 of the Acts of the 2009 Adj. Sess. (2010), the timing of hiring and filling the six additional positions in fiscal year 2011 and the five additional positions in fiscal year 2012 designed to augment the department of taxes' compliance efforts shall be determined by the commissioner. However, the commissioner shall ensure that fiscal year 2011 and fiscal year 2012 compliance revenue targets are achieved. These targets, relative to the close of fiscal year 2010, are an increase of \$2,721,276 in revenue in fiscal year 2011 and an increase of \$4,543,506 in fiscal year 2012.

(b) Of this appropriation, \$30,000 is from the current use special fund and shall be appropriated for programming changes to the CAPTAP software used for the valuation of property tax.

(c) Notwithstanding any law or regulation to the contrary, the department is authorized to pay up to \$20.00 an hour for interns to assist with the tax expenditure work required of the department during calendar year 2010.

Sec. E.109 Buildings and general services - engineering (Sec. B.109, #1150300000)

(a) The \$2,465,785 interdepartmental transfer in this appropriation shall be from the general bond fund appropriation in the Capital Appropriations Act of the 2010 session.

Sec. E.114 Buildings and general services – fleet management services (Sec. B.114, #1160150000)

(a) The commissioner of the department of buildings and general services shall submit a report to the house and senate committees on appropriations by January 15th of each year detailing the number of state employees, by department, that exceed a \$14,000 mileage reimbursement amount for use of their private vehicle.

Sec. E.118 Buildings and general services – workers' compensation insurance (Sec. B.118, #1160450000)

(a) Pursuant to 32 V.S.A. § 307(e), workers' compensation fund charges not to exceed \$9,800,000 are hereby approved.

Sec. E.121 Buildings and general services – fee-for-space (Sec. B.121, #1160550000)

(a) Pursuant to 29 V.S.A. § 160a(b)(3), facilities operations fund charges not to exceed \$27,244,521 plus the costs of fiscal year 2011 salary adjustments bargained as part of the state/VSEA agreement are hereby approved.

Sec. E.125 Legislature (Sec. B.125, #1210002000)

(a) It is the intent of the general assembly that funding for the legislature in fiscal year 2012 and beyond be included at a level sufficient to support an 18-week legislative session.

Sec. E.127 Joint Fiscal Committee (Sec. B.127, #1220000000)

(a) Notwithstanding 3 V.S.A. § 2222(g) and the general requirements of the bulletin 3.5 (Contracting Procedures), up to \$149,700 shall be used for the purposes of retaining a consultant on health care information technology. In that the consultant's services are provided in part to executive branch entities,

the joint fiscal committee is authorized to negotiate interdepartmental transfers to offset some of the consultant's cost.

Sec. E.127.1 Sec. 5.012.2 of No. 192 of the Acts of the 2007 Adj. Sess. (2008) is amended to read:

Sec. 5.012.2. JOINT FISCAL COMMITTEE – NUCLEAR ENERGY ANALYSIS (Sec. 2.031)

(a) The joint fiscal committee may authorize or retain consultant services to assist the general assembly in any <u>legislative</u> proceeding commenced under <u>or</u> <u>related to</u> 30 V.S.A. § 248(e) <u>or chapter 157 of Title 10</u>.

(b) Consultants retained pursuant to subsection (a) of this section shall work under the direction of a special committee consisting of the chairs of the house and senate committees on natural resources and energy and the joint fiscal committee.

(c) The public service board shall allocate expenses incurred pursuant to subsection (a) of this section to the applicant or the public service company or companies involved in those proceedings and such allocation and expense may be reviewed by the public service board pursuant to 30 V.S.A. § 21.

Sec. E.127.2 32 V.S.A. § 5(a)(2) is amended to read:

(2) The governor's approval shall be final unless within 30 days of receipt of such information a member of the joint fiscal committee requests such grant be placed on the agenda of the joint fiscal committee, or, when the general assembly is in session, be held for legislative approval. In the event of such request, the grant shall not be accepted until approved by the joint fiscal committee or the legislature. The 30-day period may be reduced where expedited consideration is warranted in accordance with adopted joint fiscal committee shall file a notice with the house and senate clerks for publication in the respective calendars of any grant approval requests that are submitted by the administration.

Sec. E.128 REVERSION; SERGEANT AT ARMS FUNDS

(a) Notwithstanding any other provisions of law, the first \$50,000 of general funds carried forward from fiscal year 2010 in the sergeant at arms appropriation shall revert to the general fund in fiscal year 2011.

Sec. E.131 State treasurer (Sec. B.131, #1260010000)

(a) Of this general fund appropriation, \$16,484 shall be deposited into the armed services scholarship fund established in 16 V.S.A. § 2541.

Sec. E.131.1 [DELETED]

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Sec. E.133 Vermont state retirement system (Sec. B.133, #1265020000):

(a) Notwithstanding 3 V.S.A. § 473(d), in fiscal year 2011, investment fees shall be paid from the corpus of the fund.

Sec. E.139 16 V.S.A. § 4025(c) is amended to read:

(c) An equalization and reappraisal account is established within the education fund. Moneys from this account are to be used by the division of property valuation and review to assist towns with maintenance or reappraisal on a case-by-case basis; and for reappraisal and grand list maintenance assistance payments pursuant to section 32 V.S.A. §§ 4041a of Title 32 and 5405(f).

Sec. E.141 Lottery commission (Sec. B.141, #2310010000)

(a) Of this appropriation, the lottery commission shall transfer \$150,000 to the department of health, office of alcohol and drug abuse programs, to support the gambling addiction program.

(b) The Vermont state lottery shall provide assistance and work with the Vermont council on problem gambling on systems and program development.

Sec. E.142 Payments in lieu of taxes (Sec. B.142, #1140020000)

(a) This appropriation is for state payments in lieu of property taxes under subchapter 4 of chapter 123 of Title 32, and the payments shall be calculated in addition to and without regard to the appropriations for PILOT for Montpelier and for correctional facilities elsewhere in this act.

Sec. E.143 Payments in lieu of taxes - Montpelier (Sec. B.143, #1150800000)

(a) Payments in lieu of taxes under this section shall be paid from the PILOT special fund under 32 V.S.A. § 3709.

Sec. E.144 Payments in lieu of taxes – correctional facilities (Sec. B.144, #1140030000)

(a) Payments in lieu of taxes under this section shall be paid from the pilot special fund under 32 V.S.A. § 3709.

* * * PROTECTION TO PERSONS AND PROPERTY * * *

Sec. E.200 Attorney general (Sec. B.200, #2100001000)

(a) Notwithstanding any other provisions of law, the office of the attorney general, Medicaid fraud control unit, is authorized to retain, subject to appropriation, one-half of any civil monetary penalty proceeds from global Medicaid fraud settlements. All penalty funds retained shall be used to finance Medicaid fraud and residential abuse unit activities.

(b) Of the revenue available to the attorney general under 9 V.S.A. § 2458(b)(4), \$510,000 is appropriated in Sec. B.200 of this act.

(c) The establishment of one new exempt position—enforcement attorney—is authorized in fiscal year 2011. This position shall be transferred and converted from existing vacant positions in the executive branch of state government.

(d) The attorney general shall develop measures to evaluate the success of the position carrying out the purpose in subsection (c) of this section. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

Sec. E.201 3 V.S.A. § 163(c)(9) is amended to read:

(9) Each participant shall pay a fee to the local juvenile court diversion project. The amount of the fee shall be determined by project officers based upon the financial capabilities of the participant. The fee shall not exceed \$150.00. The fee shall be a debt due from the participant, and payment of such shall be required for successful completion of the program. Fees Notwithstanding 32 V.S.A. § 502(a), fees collected under this subdivision shall be paid to the court diversion fund and shall be retained and used solely for the purpose of the court diversion program.

Sec. E.201.1 3 V.S.A. § 164(c)(9) is amended to read:

(9) Each participant shall pay a fee to the local adult court diversion project. The amount of the fee shall be determined by project officers or employees based upon the financial capabilities of the participant. The fee shall not exceed \$300.00. The fee shall be a debt due from the participant, and payment of such shall be required for successful completion of the program. Fees-Notwithstanding 32 V.S.A. § 502(a), fees collected under this subdivision shall be paid to the court diversion fund and shall be retained and used solely for the purposes of the court diversion program.

Sec. E.201.2 3 V.S.A. § 166 is amended to read:

§ 166. COURT DIVERSION FUND

The court diversion fund is hereby established in the state treasury. All fees and assessments of the juvenile and adult court diversion programs shall be deposited recorded in the fund. Interest earned on the fund and any remaining balance shall be retained in the fund for the purposes of this subchapter. Annually Quarterly, the director of each court diversion program shall report to the attorney general in a manner as prescribed by the attorney general's office on all fees paid under sections 163 and 164 of this title. An independent audit that includes all state funding sources shall be required biennially.

Sec. E.204 Judiciary (Sec. B.204, #2120000000)

(a) For compensation paid from July 1, 2010 to June 30, 2011, the supreme court is authorized to reduce by up to five percent salaries established by statute that are paid by the judicial department appropriation and to reduce by up to five percent the hourly rates of nonbargaining unit employees.

(b) The chief justice is authorized to apply provisions of the judiciary collective bargaining unit to exempt permanent state employees of the judicial branch who are not judicial officers.

Sec. E.205 24 V.S.A. § 362 is amended to read:

§ 362. FULL-TIME STATE'S ATTORNEYS; PRIVATE LAW PRACTICE

State's Elected state's attorneys and all full time deputy state's attorneys shall devote full time to their duties and during their terms shall not engage in the private practice of law nor be a partner or associate of any person practicing law. However, a full-time state's attorney or full-time deputy state's attorney may render legal assistance to a municipality or a municipal planning agency provided a fee is not charged. The state's attorneys of Essex and Grand Isle counties shall not serve on a full-time basis and shall not be subject to this section.

Sec. E.206 24 V.S.A. § 1940(c) is amended to read:

(c) A specialized investigative unit grants board is created which shall be comprised of the attorney general, the secretary of administration, the executive director of the department of state's attorneys, the commissioner of the department of public safety, a representative of the Vermont sheriffs' association, a representative of the Vermont association of chiefs of police, the executive director of the center for crime victim services, and the executive director of the Vermont League of Cities and Towns, Inc. Specialized investigative units organized and operating under this section for the investigation of sex crimes, child abuse, elder abuse, domestic violence, or crimes against those with physical or developmental disabilities may apply to the board for a grant or grants covering the costs of salaries and employee benefits to be expended during a given year for the performance of unit duties as well as unit operating costs for rent, utilities, equipment, training, and supplies. Grants under this section shall be approved by a majority of the entire board and shall not exceed 50 percent of the yearly salary and employee benefit costs of the unit. Preference shall be given to grant applications which include the participation of the department of public safety, the department for children and families, sheriffs' departments, community victims' advocacy organizations, and municipalities within the region. However, a sheriff's department in a county with a population of less than 8,000 residents shall

upon application receive a grant of up to \$20,000.00 for 50 percent of the yearly salary and employee benefits costs of a part-time specialized investigative unit investigator which shall be paid to the department as time is billed on a per hour rate as agreed by contract up to the maximum amount of the grant.

Sec. E.207 Sheriffs (Sec. B.207, #2130200000)

(a) In fiscal year 2011, the annual salaries of sheriffs earning \$60,000 or more shall be reduced by five percent from the salaries which would otherwise be paid under the provisions of 32 V.S.A. § 1182, and the annual salaries of sheriffs earning less than \$60,000 shall be reduced by three percent from the salaries which would otherwise be paid under the provision of 32 V.S.A. § 1182.

Sec. E.209 Public safety - state police (Sec. B.209, #2140010000)

(a) Of this appropriation, \$32,000 shall be used to make a grant to the Essex County sheriff's department for law enforcement purposes.

(b) Of this appropriation, \$35,000 in special funds shall be available for snowmobile law enforcement activities and \$35,000 in general funds shall be available to the southern Vermont wilderness search and rescue team, which comprises state police, the department of fish and wildlife, county sheriffs, and local law enforcement personnel in Bennington, Windham, and Windsor Counties, for snowmobile enforcement.

(c) Of the \$255,000 allocated for local heroin interdiction grants funded in this section, \$190,000 shall be used by the Vermont drug task force to fund three town task force officers. These town task force officers will be dedicated to heroin and heroin-related drug (e.g., methadone, oxycontin, crack cocaine, and methamphetamine) enforcement efforts. Any additional available funds shall remain as a "pool" available to local and county law enforcement to fund overtime costs associated with heroin investigations. Any unexpended funds from prior fiscal years' allocations for local heroin interdiction shall be carried forward.

Sec. E.212 Public safety - fire safety (Sec. B.212, #2140040000)

(a) Of this general fund appropriation, \$55,000 shall be granted to the Vermont rural fire protection task force for the purpose of designing dry hydrants.

Sec. E.214 Public safety - emergency management - radiological emergency response plan (Sec. B.214, #2140080000)

(a) Of this special fund appropriation, up to \$30,000 shall be available to contract with any radio station serving the emergency planning zone for the emergency alert system.

Sec. E.215 Military – administration (Sec. B.215, #2150010000)

(a) Of this appropriation, \$100,000 shall be disbursed to the Vermont student assistance corporation for the national guard educational assistance program established in 16 V.S.A. § 2856.

Sec. E.219 Military - veterans' affairs (Sec. B.219, #2150050000):

(a) Of this appropriation, \$5,000 shall be used for continuation of the Vermont medal program, \$4,800 shall be used for the expenses of the governor's veterans' advisory council, \$7,500 shall be used for the Veterans' Day parade, \$5,000 shall granted to the Vermont state council of the Vietnam Veterans of America to fund the service officer program, and \$5,000 shall be used for the military, family, and community network.

Sec. E.220 Center for crime victim services (Sec. B.220, #2160010000)

(a) Of this appropriation, the amount of \$806,195 from the victims' compensation fund created by 13 V.S.A. § 5359 is appropriated for the Vermont network against domestic and sexual violence initiative.
Expenditures for this initiative shall not exceed the revenues raised in fiscal year 2011 from the \$10.00 increase authorized by Sec. 20 of No. 174 of the Acts of the 2007 Adj. Sess. (2008) applied to the assessment in 13 V.S.A. § 7282(a)(8)(B) and from the \$20.00 authorized by Sec. 21 of No. 174 of the Acts of the 2007 Adj. Sess. (2008) applied to the fee in 32 V.S.A. § 1712(1).

(b) Of the appropriation in this section, \$50,000 shall be for a grant to certified batterer intervention programs.

(c) Of the appropriation in this section, \$65,000 shall be for a grant for the anti-violence partnership at the University of Vermont.

Sec. E.220.1 20 V.S.A. § 2365 is amended to read:

§ 2365. DOMESTIC VIOLENCE TRAINING

(a) In order to remain certified, law enforcement officers shall receive by $2010 \ 2011$ at least eight hours of domestic violence training in a program approved by the Vermont criminal justice training council and the Vermont network against domestic and sexual violence.

(b) Law enforcement officers shall receive domestic violence retraining every two years in a program approved by the Vermont criminal justice training council.

(c) The Vermont police academy shall employ a domestic violence trainer for the sole purpose of training Vermont law enforcement and related practitioners on issues related to domestic violence. Funding for this position shall be transferred by the center for crime victims services from the victims' compensation fund created by 13 V.S.A. § 5359.

Sec. E.222 Agriculture, food and markets – administration

(a) It is the intent of the general assembly that when the fiscal year 2012 budget is prepared for the two plus two scholarship program, the agency of agriculture, food and markets examine whether there would be potential cost savings if the funds were appropriated directly to the Vermont state colleges and the University of Vermont through the next generation fund. The agency shall report its finding to the house and senate committees on appropriations during the fiscal year 2012 budget presentations.

Sec. E.230 FEDERAL HEALTH CARE GRANT FUNDING TO SUPPORT CATAMOUNT HEALTH

(a) It is the intent of the general assembly that the state maximize federal funding opportunities to expand access to health care coverage for uninsured and underinsured Vermonters. The general assembly is aware of upcoming federal funding opportunities related to the creation of a high-risk pool and supports using the Catamount Health program, to the extent practicable, to leverage applicable federal funds while keeping eligibility standards consistent across all of the state's health care programs.

(b) The commissioner of banking, insurance, securities, and health care administration shall notify the members of the joint fiscal committee by telephone and provide the members with a copy of the application by electronic mail prior to applying for federal funding under the high-risk health insurance pool program authorized by Section 1101 of the Patient Protection and Affordable Care Act of 2010, Public Law 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Public Law 111-152, for the purpose of supporting the Catamount Health program or the market security trust provided for in 8 V.S.A. § 4062d. If feasible given the federal time lines, the commissioner shall make reasonable efforts to provide notice, a copy of the application, and an opportunity for the members to respond at least three business days prior to the application deadline.

(c)(1) Notwithstanding 32 V.S.A. § 5, and with the approval of the secretary of administration, the commissioner of banking, insurance, securities,

and health care administration shall request approval from the joint fiscal committee to accept federal funding under the high-risk health insurance pool program authorized by Section 1101 of the Patient Protection and Affordable Care Act of 2010, Public Law 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Public Law 111-152, for the purpose of supporting the Catamount Health program or the market security trust provided for in 8 V.S.A. § 4062d.

(2) The commissioner of banking, insurance, securities, and health care administration shall provide the joint fiscal committee with information on whether the proposal is budget neutral or financially beneficial to the state, as determined by the commissioner in consultation with the commissioner of the department of Vermont health access. If the grant meets the criteria under this subsection and notwithstanding 32 V.S.A. § 5, the commissioner may accept the grant after approval by a majority of voting members of the joint fiscal committee.

(d) Upon approval by the joint fiscal committee as part of the review under subsection (c) of this section or at a later meeting and notwithstanding 8 V.S.A. § 4080f (Catamount Health), 33 V.S.A. § 1973 (Vermont health access program), 33 V.S.A. § 1974 (employer-sponsored insurance assistance program) and 33 V.S.A. Chapter 19, Subchapter 3A (Catamount Health assistance program), the commissioner of banking, insurance, securities, and health care administration and the secretary of human services may waive the statutory requirements establishing the 12-month uninsured requirement and the pre-existing condition exclusion provisions if necessary to permit the state to accept grant funds under the federal high-risk pool program. The request to waive the statutory requirements shall specify a time period ending no later than June 30, 2011.

Sec. E.230.1 8 V.S.A. § 4062d is amended to read:

§ 4062d. NONGROUP MARKET SECURITY TRUST

(a) The commissioner shall <u>may</u> establish the nongroup <u>a</u> market security trust for the purpose of lowering the cost of and thereby increasing access to health care coverage in the individual or nongroup health insurance market.

(b) The commissioner shall permit nongroup carriers to transfer five percent of the carriers' claims costs to the nongroup market security trust, based on the earned premium as reported on the most recent annual statement of the carrier. At the close of the year, the commissioner shall reconcile the amount paid against the actual expenses of the carriers and collect or expend the necessary funds to ensure that five percent of the actual expenses are paid under this section. The individuals incurring the claims shall remain enrolled policyholders, members, or subscribers of the carrier's or insurer's plan, and VT LEG 259081.1

shall be subject to the same terms and conditions of coverage, premiums, and cost sharing as any other policyholder, member, or subscriber.

(c) The If the commissioner may develop the nongroup develops a market security trust <u>pursuant to this section</u>, the commissioner shall do so in a manner that permits the trust to be eligible for a federal grant grants to administer the trust, including a grant grants under the federal Trade Adjustment Act Patient Protection and Affordable Care Act of 2010, Public Law 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Public Law 111-152.

(d)(c) All of the revenues appropriated shall be deposited into the nongroup market security trust to be administered by the commissioner for the sole purpose of providing financial support for the nongroup market security trust authorized by this section. The trust shall be administered in accordance with subchapter 5 of chapter 7 of Title 32, except that interest earned shall remain in the trust <u>A</u> market security trust established pursuant to this section shall be budget neutral or financially beneficial to the state.

(e)(d) The commissioner may adopt rules <u>pursuant to chapter 25 of Title 3</u> for the nongroup market security trust relating to:

(1) Criteria governing the circumstances under which a nongroup carrier may transfer five percent of the claims expenses of the carrier to the trust as provided for in this section.

(2) Eligibility criteria for providing financial support to carriers under this section, including carrier claims' expenses eligible for financial support, standards and procedures for the treatment and chronic care management as defined in section 701 of Title 18, and any other eligibility criteria established by the commissioner.

(3)(2) The operation of the trust.

(4)(3) Any other standards or procedures necessary or desirable to carry out the purposes of this section.

(f) As used in this section, "nongroup carrier" means a nongroup carrier registered under section 4080b of this title that has an annual earned premium in excess of \$100,000.00.

Sec. E.231 Banking, insurance, securities, and health care administration – health care administration (Sec. B.231, #2210040000)

(a) The department of banking, insurance, securities, and health care administration (BISHCA) shall use the Global Commitment funds appropriated in this section for health care administration for the purpose of funding certain health care-related BISHCA programs, projects, and activities

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to increase the access of quality health care to uninsured persons, underinsured persons, and Medicaid beneficiaries.

Sec. E.232 Secretary of state (Sec. B.232, #2230010000)

(a) Of this special fund appropriation, \$492,991 represents the corporation division of the secretary of state's office, and these funds shall be from the securities regulation and supervision fund in accordance with 9 V.S.A. § 5613.

Sec. E.235 Enhanced 9-1-1 Board (Sec. B.238, #2260001000)

(a) The director shall develop a plan, for implementation in fiscal year 2012, to equitably fund E 9-1-1 call handling equipment seats at the 9-1-1 public safety answering points operated by the Vermont enhanced 9-1-1 board. This plan shall be submitted to the house and senate committees on appropriations by January 15, 2011.

* * * HUMAN SERVICES * * *

Sec. E.300 DEPARTMENT FOR CHILDREN AND FAMILY GRANT REDUCTIONS

(a) The department for children and families shall not reduce the following grants or programs: financial assistance provided by the division of family services to families who have adopted a child, financial assistance provided by the division of family services to foster families, grants to substitute care programs, and grants to emergency housing shelters.

(b) Of the funds appropriated, \$100,000 is to be granted to Vermont Legal Aid for a pilot project through the Vermont parent representation center for participation in pre-petition hearings.

Sec. E.301 Secretary's office – Global Commitment (Sec. B.301, #3400004000)

(a) The agency of human services shall use the funds appropriated in this section for payment of the actuarially certified premium required under the intergovernmental agreement between the agency of human services and the managed care organization in the department of Vermont health access as provided for in the Global Commitment for Health Waiver ("Global Commitment") approved by the Centers for Medicare and Medicaid Services under Section 1115 of the Social Security Act.

(b) In addition to the state funds appropriated in this section, a total estimated sum of \$30,608,548 is anticipated to be certified as state matching funds under the Global Commitment as follows:

(1) \$12,395,683 certified state match available from local education agencies for eligible special education school-based Medicaid services under

the Global Commitment. This amount combined with \$28,104,317 of federal funds appropriated in Sec. B.301 equals a total estimated expenditure of \$40,500,000. An amount equal to the amount of the federal matching funds for eligible special education school-based Medicaid services under Global Commitment shall be transferred from the Global Commitment fund to the Medicaid reimbursement special fund created in 16 V.S.A. § 2959a.

(2) \$8,956,247 certified state match available from local education agencies for direct school-based health services, including school nurse services, that increases the access of quality health care to uninsured persons, underinsured persons, and Medicaid beneficiaries.

(3) \$1,775,817 certified state match available from local education agencies for eligible services as allowed by federal regulation for early periodic screening, diagnosis, and treatment programs for school-aged children.

(4) \$1,913,490 certified state match available via the University of Vermont's child health improvement program for quality improvement initiatives for the Medicaid program.

(5) \$547,113 certified state match available via the University of Vermont's child health improvement program for expanded quality improvement initiatives for the Medicaid program.

(6) \$5,020,198 certified state match available from local designated mental health and developmental services agencies for eligible mental health services provided under Global Commitment.

Sec. E.301.1 RETAINING ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGE (FMAP)

(a) Notwithstanding 16 V.S.A. § 2959a, to the extent possible, any additional federal funds received as a result of an enhanced FMAP (Federal Medical Assistance Percentage) that are associated with the certified expenditures specified in subdivisions (b)(1) through (6) of Sec. E.301 of this act shall be retained in the Global Commitment fund and shall not be transferred to the certifying entity.

Sec. E.302 PAYMENT RATES FOR PRIVATE NONMEDICAL INSTITUTIONS PROVIDING RESIDENTIAL CHILD CARE SERVICES

(a) Notwithstanding any other provisions of law, for state fiscal year 2011, the division of rate setting shall calculate payment rates for private nonmedical institutions (PNMI) providing residential child care services as follows.

(1) General rule. The division of rate setting shall calculate PNMI per diem rates for state fiscal year 2011 as 100 percent of each program's final per diem rate in effect on June 30, 2010. These rates shall be issued as final.

(2) Reporting requirements.

(A) Providers are required to submit annual audited financial statements to the division within 30 days of receipt from the certified public accountant, but no later than four months following the end of each provider's fiscal year.

(B) Providers are not required to submit funding applications pursuant to section 3 of the PNMI rate setting rules for state fiscal year 2011.

(3) Exception to the general rule. For programs categorized by the placement authorizing departments (PADs) as crisis/stabilization programs with typical lengths of stay from 0–10 days, final rates for state fiscal year 2011 are set retroactively as follows:

(A) The allowable budget is 100 percent of the final approved budget for the rate year which includes June 30, 2010. The monthly allowable budget is the allowable budget divided by 12.

(B) Within five days of the end of each month in state fiscal year 2011, the program will submit the prior month's census to the division of rate setting. The per diem rate will be set for the prior month by dividing the monthly allowable budget amount by the total number of resident days for the month just ended.

(4) Adjustments to rates. Rate adjustment applications may not be used as a tool to circumvent the rate setting process for state fiscal year 2011 in order to submit a new budget for the entire program or for the sole reason that actual costs incurred by the facility exceed the rate of payment.

(A) The following provisions amend section 8 of the PNMI rules regarding adjustments to rates for state fiscal year 2011.

(i) The three-month waiting period of section 8.1(b) for the submission of a rate adjustment application is waived.

(ii) In rate adjustment applications, the division will only consider budget information specific to the program change and limited to direct program costs. Providers may not apply for increases to costs that are part of the current program and rate structure before the program change.

(iii) In its findings and order, the division may elect to use financial information from prior approved budget submissions to determine allowable costs related to the program change. (iv) The materiality test in section 8.1(c) is waived for changes to rates based on a change in licensed capacity.

(v) The effective date for approved rate adjustments based on a change in licensed capacity is the effective date of the change in licensed capacity.

(B) Adjustments to rates based on changes in licensed capacity. Programs that increase or decrease licensed capacity in state fiscal year 2011 shall provide prior written notification to the division of the change in licensed capacity.

(i) Decreased licensed capacity. In the case of programs that decrease licensed capacity in state fiscal year 2011, programs must have prior written approval from the PADs before applying to the division for an adjustment to the state fiscal year 2011 per diem rate.

(I) The allowable budget amount for state fiscal year 2011 may be no more than the final approved budget for the rate year which includes June 30, 2010.

(II) In its application for a rate adjustment, a program must provide to the division financial and staffing information directly related to the decrease in licensed capacity.

(III) In its findings and order, the division shall reduce the allowable budget amount by any decreased costs directly related to the change in licensed capacity.

(IV) The division shall divide the final allowable budget amount by the estimated occupancy level at the new licensed capacity to calculate the per diem rate.

(ii) Increased licensed capacity. In the case of programs that increase licensed capacity in state fiscal year 2011, the division shall automatically adjust the program's rate as follows.

(I) The initial allowable budget is 100 percent of the final approved budget amount for the rate year that includes June 30, 2010.

(II) With prior written approval from the PADs, programs may apply to the division for an adjustment to the allowable budget for costs directly related to the program change.

(III) The division shall divide the final allowable budget amount by the estimated occupancy level at the new licensed capacity to calculate the per diem rate.

Sec. E.306 Department of Vermont health access – administration (Sec. B.306, #3410010000)

(a) The establishment of six (6) new full-time positions is authorized in fiscal year 2011 to expand program integrity efforts. These positions shall be transferred and converted from vacant positions in the executive branch of state government.

(b) The department shall develop measures to evaluate the success of these new positions carrying out the purpose in subsection (a) of this section. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

(c) Unexpended funds in the department of health in fiscal year 2010 allocated for the Vermont blueprint for health shall be transferred from the department of health to the department of Vermont health access and used in fiscal year 2011 for expansion of the blueprint program.

Sec. E.308 FISCAL YEAR 2011 NURSING HOME RATE SETTING

(a) Notwithstanding any other provisions of law, for state fiscal year 2011, the division of rate setting shall modify its methodology for calculating Medicaid rates for nursing homes as follows:

(1) Inflation. For state fiscal year 2011 rate setting, the division shall calculate the incremental inflation amount between state fiscal years 2010 and 2011 for the following cost categories: nursing care, director of nursing, resident care, and indirect. The division shall add that incremental inflation amount to the inflation percentages used in state fiscal year 2010 rate setting.

(2) Case-mix weights. For state fiscal year 2011, the division shall decrease by one-half the case-mix weights for the following resource utilization groups: Impaired Cognition A (IA1), Challenging Behavior A (BA1), Reduced Physical Functioning A 2 (PA2) and Reduced Physical Functioning A 1 (PA1).

Sec. E.309 HOSPITAL RATES

(a) In order to provide payment amounts for inpatient hospital services closer to levels paid by Medicare, the department of Vermont health access shall increase payment rates to hospitals by an amount estimated to equal a total of \$20,000,000 for inpatient hospital services. The department of Vermont health access shall provide quarterly reports to hospitals indicating the additional amounts paid for inpatient hospital services.

Sec. E.309.1 MEDICAID; BENEFIT LIMITATIONS; RATES

(a) The department of Vermont health access may impose the following limitations and process requirements on benefits for adults in Medicaid and VHAP:

(1) Physical, occupational, or speech therapy visits may be limited to 30 visits per year, except that the department shall allow additional visits through the prior authorization process for individuals with the following diagnoses: spinal cord injury, traumatic brain injury, stroke, amputation, or severe burn. This limit shall not apply to therapy services provided by home health agencies.

(2) Urine drug tests may be limited to eight tests per month. The department of Vermont health access shall adopt SAMSHA guidelines, as available, for appropriate use of urine drug tests, including the frequency of testing, and shall develop protocols for exceptions to the limitation to eight tests.

(3) Emergency room visits may be limited to 12 visits per year, except that the department shall not include in the limitation emergency room visits resulting in the individual being admitted to the facility, resulting in the individual being transferred to another inpatient facility, or during which the individual becomes deceased.

(b) The department of Vermont health access may institute a prior authorization process for high-tech imaging, including scans such as computed tomography (CT), computed tomographic angiography (CTA), magnetic resonance imaging (MRI), magnetic resonance angiography (MRA), positron emission tomography (PET), positron emission tomography-computed tomography (PET-CT). The prior authorization process shall not apply to X-ray, ultrasound, mammogram, or dual X-ray absorptiometry (DXA) images and shall not apply to imaging ordered by emergency departments or during an inpatient admission. The prior authorization process shall include the following requirements:

(1) Approval guidelines shall be transparent, readily available to health care professionals upon request, based on peer-reviewed, published clinical standards, and include citations for the sources of the standards.

(2) Decisions on prior authorization requests shall be made in a timely manner and the department shall have sufficient clinical staff to provide timely access by health care professionals making requests.

(3) The department shall form an advisory committee comprised of health care professionals to comment on: the evidence-based guidelines used and the process for prior authorization with the goal of minimizing the

administrative burden on health care professionals, including any forms and the timelines for the process.

(4) If the department uses a vendor for prior authorization of imaging, the terms of the contract shall prohibit the vendor from creating financial incentives for the utilization management reviewer to deny requests for imaging services. The vendor chosen shall have relevant business experience and the department shall ensure that the vendor has information about the imaging-related findings in the report required by No. 49 of the Acts of 2009 that found Vermont health care professionals' imaging rates are among the lowest in the country.

(5) The department or its vendor shall conduct training about the prior authorization process at least 60 days prior to the implementation of the process. This training shall include:

(A) face to face regional meetings and demonstrations;

(B) webinars; and

(C) other training as requested by health care professionals.

(6) The department or its vendor shall distribute information about the prior authorization approval guidelines and the process to all participating providers at least 60 days prior to the implementation of the prior authorization process. The department or its vendor shall provide an on-line tool to allow health care professionals to determine if prior authorization is required for a particular service.

(7) The department shall track and report the following information:

(A) imaging usage rates, including usage in emergency departments; the aggregate amount reimbursed for imaging by the department; and net savings from implementing the prior authorization process;

(B) the number of requests processed, including numbers of approvals and denials, and number of requests by method, including through a website, by telephone, by fax, and by mail;

(C) the average transaction time by method of request, including web response time, call waiting time, and fax response time.

(D) the number of requests where additional clinical information was requested by the department or its vendor;

(E) the average time between the receipt of clinical information and the decision on the request; and

(F) the number of prior authorization requests where a professional requesting prior authorization asked for a discussion with a health care professional peer, including the average number of contacts required to engage in this discussion.

(8) The department or its vendor shall perform a satisfaction survey of health care professionals annually and meet with health care professionals and the Vermont medical society to discuss the survey results.

(9) The department or its vendor shall establish a process to exempt health care professionals from the prior authorization process when the health care professionals routinely order imaging consistent with the department's evidence-based guidelines and whose prior authorization requests are routinely granted by the department. In developing this exemption, the department shall review its data and meet with health care professionals and the Vermont medical society to discuss the appropriate process for this exemption.

(c) The department of Vermont health access may reduce the reimbursement rate to a laboratory for urine drug testing to \$10.49 per test.

(d) The department of Vermont health access may modify the reimbursement amount paid pharmacies for any drug priced utilizing the Average Wholesale Price (AWP) methodology to reflect the current published price.

Sec. E.309.2 HEALTH INSURANCE PREMIUM PROGRAM

(a) The department of Vermont health access may expand the health insurance premium program to new applicants to Medicaid, which enrolls a Medicaid beneficiary in employer-sponsored or private health insurance plan available to the beneficiary if it is cost-effective to the state to do so. The department may offer current beneficiaries the option of enrolling in an employer-sponsored or private health insurance plan available to the beneficiary.

Sec. E.309.3 SUSPENSION OF AUTOMATIC PREMIUM INCREASES; MAINTENANCE OF ELIGIBILITY REQUIREMENTS

(a) It is the intent of the general assembly to ensure compliance with Section 5001(f) of the American Recovery and Reinvestment Act of 2009, Public Law 111-5 and Section 2001 of the Patient Protection and Affordable Care Act of 2010, as amended by the Health Care and Education Reconciliation Act of 2010 (maintenance of eligibility) by maintaining the premiums at levels due on June 15, 2008 for individuals enrolled in health benefit plans or premium assistance funded by Medicaid. By maintaining the premiums and eligibility for programs included in Global Commitment to

Health and Choices for Care, the state will remain eligible for funds available for Medicaid and Medicaid-waiver programs.

(b) Notwithstanding 33 V.S.A. §§ 1974(j) and 1984(b), individuals receiving Catamount Health premium assistance or employer-sponsored premium assistance shall not have the premiums automatically indexed.

(c) This section of this act shall supersede any agency rules establishing premium amounts above the amounts due on June 15, 2008.

(d) By January 15, 2011, if the state has or is projected to have a budget deficit in state fiscal years 2011 or 2012, the secretary of human services may propose to the house committees on appropriations, on health care, and on human services and the senate committees on appropriations and health and welfare a proposal for certifying the proposed or actual deficit to the secretary of the U.S. Department of Health and Human Services under Section 2001 of the Patient Protection and Affordable Care Act of 2010, as amended by the Health Care and Education Reconciliation Act of 2010, including a proposal for modifying eligibility requirements for adults with incomes above 133 percent of the federal poverty guidelines who are not pregnant and do not have a disability, including by increasing premium amounts in the Vermont Health Access Plan, VPharm, VermontRx, employer-sponsored premium assistance, or Catamount Health assistance.

Sec. E.309.4 33 V.S.A. § 1953 is amended to read:

§ 1953. HOSPITAL ASSESSMENT

(a) Hospitals shall be subject to an annual assessment as follows:

(1) Beginning January 1, 2008, each Each hospital's annual assessment, except for hospitals assessed under subdivision (2) of this subsection, shall be 5.5 percent of its net patient revenues (less chronic, skilled, and swing bed revenues) for the hospital's fiscal year as determined annually by the director commissioner of Vermont health access from the hospital's financial reports and other data filed with the department of banking, insurance, securities, and health care administration. The annual assessment shall be based on data from a hospital's third most recent full fiscal year for which data has been reported to the department of banking, insurance, securities, and health care administration.

(2) Beginning July 1, 2004, each mental hospital or psychiatric facility's annual assessment shall be 4.21 percent, provided that the United States Department of Health and Human Services grants a waiver to the uniform assessment rate, pursuant to 42 C.F.R. § 433.68(e). If the United States Department of Health and Human Services fails to grant a waiver, mental

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hospitals and psychiatric facilities shall be assessed under subdivision (1) of this subsection.

(b) Each hospital shall be notified in writing by the <u>office department</u> of the assessment made pursuant to this section. If no hospital submits a request for reconsideration under section 1958 of this title, the assessment shall be considered final.

(c) Each hospital shall submit its assessment to the <u>office department</u> according to a payment schedule adopted by the <u>director commissioner</u>. Variations in payment schedules shall be permitted as deemed necessary by the <u>director commissioner</u>.

(d) Any hospital that fails to make a payment to the <u>office department</u> on or before the specified schedule, or under any schedule for delayed payments established by the <u>director commissioner</u>, shall be assessed not more than \$1,000.00. The <u>director commissioner</u> may waive this late payment assessment provided for in this subsection for good cause shown by the hospital.

(e) [Repealed.]

Sec. E.309.5 8 V.S.A. § 4080f(c)(1) is amended to read:

(c)(1) Catamount Health shall provide coverage for primary care, preventive care, chronic care, acute episodic care, and hospital services. The benefits for Catamount Health shall be a preferred provider organization plan with:

(A) a $$250.00 \\ 500.00 deductible for an individual and a $$500.00 \\ $1,000.00$ deductible for a family for health services received in network, and a $$500.00 \\ $1,000.00 \\ $1,000.00 \\ $1,000.00 \\ $2,000.0$

(B) 20 percent co-insurance, in and out of network;

(C) a \$10.00 office co-payment;

(D) prescription drug coverage without a deductible, 10.00 co-payments for generic drugs, 30.00 ± 35.00 co-payments for drugs on the preferred drug list, and 50.00 ± 55.00 co-payments for nonpreferred drugs;

(E) out-of-pocket maximums of \$800.00 \$1,050.00 for an individual and \$1,600.00 \$2,100.00 for a family for in-network services and \$1,500.00 \$2,100.00 for an individual and \$3,000.00 \$4,000.00 for a family for out-of-network services; and

(F) a waiver of the deductible and other cost-sharing payments for chronic care for individuals participating in chronic care management and for preventive care.

Sec. E.309.6 21 V.S.A. § 2003(b) is amended to read:

(b) For any quarter in fiscal years 2007 and 2008, the amount of the health care fund contribution shall be \$91.25 for each full-time equivalent employee in excess of eight. For each fiscal year after fiscal year 2008, the number of excluded full-time equivalent employees shall be adjusted in accordance with subsection (a) of this section, and the amount of the health care fund contribution shall be adjusted by a percentage equal to any percentage change in premiums for Catamount Health for that fiscal year; provided, however, that to the extent that Catamount Health premiums decrease due to changes in benefit design or deductible amounts, the health care fund contribution shall not be decreased by the percentage change attributable to such benefit design or deductible changes.

Sec. E.309.7 33 V.S.A. § 1984(b) is amended to read:

(b) The agency of administration or designee shall establish individual and family contribution amounts for Catamount Health under this subchapter based on the individual contributions established in subsection (c) of this section and shall index the contributions annually to the overall growth in spending per enrollee in Catamount Health as established in section 4080f of Title 8: provided, however, that to the extent that spending per Catamount Health enrollee decreases as a result of changes in benefit design or deductible amounts, contributions shall not be decreased by the percentage change attributable to such benefit design or deductible changes. The agency shall establish family contributions by income bracket based on the individual contribution amounts and the average family size.

Sec. E.309.8 33 V.S.A. § 1984(c)(1)(B) is amended to read:

(B) Income greater than 175 percent and less than or equal to 200 percent of FPL: $\frac{65.00}{500}$ per month.

Sec. E.309.9 33 V.S.A. § 2073(d)(2) is amended to read:

(2) An individual shall contribute the following base cost-sharing amounts which shall be indexed to the increases established under 42 C.F.R. § 423.104(d)(5)(iv) and then rounded to the nearest dollar amount:

(A) In the case of recipients whose household income is no greater than 150 percent of the federal poverty level, such premium shall be $\frac{17.00}{15.00}$ per month.

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(B) In the case of recipients whose household income is greater than 150 percent of the federal poverty level and no greater than 175 percent of the federal poverty level, the premium shall be $$23.00 \ $20.00$$ per month.

* * *

Sec. E.309.10 33 V.S.A. § 2074(c) is amended to read:

(c) Benefits under VermontRx shall be subject to payment of a premium and co-payment amounts by the recipient in accordance with the provisions of this section.

(1) In the case of recipients whose household income is no greater than 150 percent of the federal poverty level, the premium shall be $\frac{17.00 \text{ } 15.00}{\text{ } \text{ per month.}}$

(2) In the case of recipients whose household income is greater than 150 percent of the federal poverty level and no greater than 175 percent of the federal poverty level, the premium shall be $\frac{23.00 \text{ } 20.00}{20.00}$ per month.

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Sec. E.309.11 MEDICARE PRESCRIPTION DRUG BENEFIT; ONE-TIME PAYMENT

(a) Notwithstanding 33 V.S.A. § 2073 (VPharm assistance program), the agency of human services or designee or the department of human resources or designee may utilize one or more of the strategies provided for in subsection (b) of this section to seek reimbursement for the rebate or refund provided by the U.S. Department of Health and Human Services (HHS) as described in Sec. 3315 of the Patient Protection and Affordability Act of 2010, as amended by the Health Care and Education Reconciliation Act of 2010. The agency shall not recoup an amount greater than the refund or rebate paid to the individual by HHS nor an amount greater than that paid by the agency on behalf of an individual enrolled in VPharm after the individual exceeded the initial coverage limit under Section 1860D-2(b)(3) of the Social Security Act for 2010.

(b)(1) The agency of human services or designee or the department of human resources or designee may recoup the refund or rebate amount from the individual enrolled in VPharm, from HHS or the Medicare program, or from a Medicare prescription drug plan.

(2) The agency of human services or designee may require that an individual eligible for the refund incur up to \$250 in out-of-pocket expenses for the Medicare prescription drug benefit during the calendar year in which the rebate is received by the individual.

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Sec. E.309.12 HIT FUND

(a) Health information technology funds shall not be used for the implementation or purchase of software creating an electronic health record (EHR) unless the EHR is capable of providing data to the Blueprint for Health established in 18 V.S.A. chapter 13 through the state health information exchange network using the current interoperability exchange standards approved by the United States Department of Health and Human Services.

Sec. E.309.13 MEDICAID SUPPLEMENTAL DRUG REBATES

(a) The department of Vermont health access shall make every effort to increase the supplemental rebates provided by pharmaceutical manufacturers in order to offset the reduction in supplemental rebate amounts anticipated from the modifications to the mandatory federal drug rebates as provided for in the Patient Protection and Affordable Care Act of 2010, as amended by the Health Care and Education Reconciliation Act of 2010.

Sec. E.309.14 EMERGENCY RULEMAKING; MEDICAID

(a) In order to administer Sec. E.309.1(a) (benefit limits) and (b) (high-tech imaging) of this act relating to limiting the annual number of covered visits for physical therapy, occupational therapy, speech therapy, emergency room services, instituting a prior authorization for imaging, and limiting the monthly number of drug tests, and Sec. E.309.11 (Medicare drug benefit), the agency of human services shall be deemed to have met the standard for adoption of emergency rules as required by 3 V.S.A. § 844(a). Notwithstanding 3 V.S.A. § 844, the agency shall provide a minimum of five business days for public comment in advance of filing the emergency rules as provided for in 3 V.S.A. § 844(c).

Sec. E.309.15 33 V.S.A. § 1901(a)(4) is added to read:

(4) A manufacturer of pharmaceuticals purchased by individuals receiving state pharmaceutical assistance in programs administered under this chapter shall pay to the department of Vermont health access, as the secretary's designee, a rebate on all pharmaceuticals for which state-only funds are expended in an amount at least as favorable as the rebates provided under 42 U.S.C. section 1396r-8 paid to the department in connection with Medicaid and programs funded under the Global Commitment to Health Medicaid Section 1115 waiver.

Sec. E.309.16 33 V.S.A. § 2073(f) is amended to read:

(f) A manufacturer of pharmaceuticals purchased by individuals receiving assistance from VPharm established under this section shall pay to OVHA <u>DVHA</u>, as a condition of participation in the program as required by section

<u>1901 of this title</u>, a rebate <u>on all pharmaceuticals for which state-only funds are</u> <u>expended</u> in an amount at least as favorable as the rebate paid to OVHA <u>DVHA</u> in connection with the Medicaid program.

Sec. E.309.17 33 V.S.A. § 2074(d) is amended to read:

(d) Any manufacturer of pharmaceuticals purchased by individuals receiving assistance from VermontRx established under this section shall pay to OVHA <u>DVHA</u>, as a condition of participation in the program as required by section 1901 of this title, a rebate <u>on all pharmaceuticals for which state-only</u> <u>funds are expended</u> in an amount at least as favorable as the rebate paid to OVHA <u>DVHA</u> in connection with the Medicaid program.

Sec. E.309.18 PEDIATRIC PALLIATIVE CARE

(a) The agency of human services shall request a provision allowing Vermont to provide its Medicaid- and SCHIP-eligible children who have life-limiting illnesses with concurrent palliative services and curative care, either as part of its renewal of the state's Global Commitment for Health Medicaid Section 1115 waiver or as an amendment following renewal.

Sec. E.312 Health - public health (Sec. B.312, #3420021000)

(a) AIDS/HIV funding:

(1) In fiscal year 2011 and as provided for in this section, the department of health shall provide grants in the amount of \$335,000 in Global Commitment funds to Vermont AIDS service and peer-support organizations for client-based support services. It is the intent of the general assembly that if the Global Commitment funds appropriated in this subsection are unavailable, the funding for Vermont AIDS service and peer-support organizations for client-based support services shall be maintained through the general fund or other state-funding sources. The department of health AIDS program shall meet at least quarterly with the community advisory group (CAG) with current information and data relating to service initiatives. The funds shall be allocated as follows:

(A) AIDS Project of Southern Vermont, \$74,059;

(B) A Community Resource Network or its successor, \$36,750;

(C) VT CARES, \$155,491;

(D) Twin States Network, \$31,850;

(E) People with AIDS Coalition, \$36,850.

(2) Ryan White Title II funds for AIDS services and the AIDS Medication Assistance Program shall be distributed in accordance with federal

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guidelines. The federal guidelines shall not apply to programs or services funded solely by state general funds.

(3)(A) Notwithstanding the provisions of Sec. E.312(a)(6) of Act 1 of the 2009 special session, the department of health shall carry forward \$140,000 in general funds from fiscal year 2009 to provide assistance to individuals in the HIV/AIDS Medication Assistance Program (AMAP), including the costs of prescribed medications, related laboratory testing, and nutritional supplements. These funds may not be used for any administrative purposes by the department of health or by any other state agency or department. Before using the general fund allocation to cover the costs of AMAP, the department of health shall use pharmaceutical rebate special funds to cover the costs of AMAP. Any carry-forward general funds remaining at the end of fiscal year 2011 shall be distributed to AIDS service organizations in the same proportion as those outlined in this subsection.

(B) The secretary of human services shall immediately notify the joint fiscal committee if at any time there are insufficient funds in AMAP to assist all eligible individuals. The secretary shall work in collaboration with persons living with HIV/AIDS to develop a plan to continue access to AMAP medications until such time as the general assembly can take action.

(C) As provided for in this section, the secretary of human services shall work in collaboration with the AMAP advisory committee, which shall be composed of no less than 50 percent of members who are living with HIV/AIDS. If a modification to the program's eligibility requirements or benefit coverage is considered, the committee shall make recommendations regarding the program's formulary of approved medication, related laboratory testing, nutritional supplements, and eligibility for the program.

(4) In fiscal year 2011, the department of health shall provide grants in the amount of \$100,000 in general funds to Vermont AIDS service organizations and other Vermont HIV/AIDS prevention providers for community-based HIV prevention programs and services. These funds shall be used for HIV/AIDS prevention purposes, including improving the availability of confidential and anonymous HIV testing; prevention work with at-risk groups such as women, intravenous drug users, and people of color; anti-stigma campaigns; and promotion of needle exchange programs. No more than 15 percent of the funds may be used for the administration of such services by the recipients of these funds. The method by which these prevention funds are distributed shall be determined by mutual agreement of the department of health and the Vermont AIDS service organizations and other Vermont HIV/AIDS prevention providers.

(b) Funding for the tobacco programs in fiscal year 2011 shall consist of the \$1,166,803 in tobacco funds and \$529,704 in Global Commitment funds appropriated in Sec. B.312 of this act; and \$212,709 of the tobacco funds appropriated in Sec. B.300 of this act. The tobacco evaluation and review board shall determine how these funds are allocated to tobacco cessation, community based, media, public education, surveillance, and evaluation activities. This allocation shall include funding for tobacco cessation programs that serve pregnant women.

Sec. E.313 Health - alcohol and drug abuse programs (Sec. B.313, #3420060000)

(a) For the purpose of meeting the need for outpatient substance abuse services when the preferred provider system has a waiting list of five days or more or there is a lack of qualified clinicians to provide services in a region of the state, a state-qualified alcohol and drug abuse counselor may apply to the department of health, division of alcohol and drug abuse programs, for time-limited authorization to participate as a Medicaid provider to deliver clinical and case coordination services, as authorized.

(b) For fiscal year 2011, the department of Vermont health access and the office of drug and alcohol programs shall determine a means, notwithstanding any other provision of law to the contrary, of opening the preferred provider network to expand Medicaid funded substance abuse services from licensed alcohol and drug abuse counselors in geographic areas in which there are waiting lists for services for referrals from the department of corrections, the department for children and families, and the judiciary. The Vermont addiction professionals association shall be consulted in determining the means of expanding treatment access. The commissioners shall report on this directive to the joint fiscal committee at the September 2010 meeting.

(c)(1) In accordance with federal law, the division of alcohol and drug abuse programs may use the following criteria to determine whether to enroll a state-supported Medicaid and uninsured population substance abuse program in the division's network of designated providers, as described in the state plan:

(A) The program is able to provide the quality, quantity, and levels of care required under the division's standards, licensure standards, and accreditation standards established by the commission of accreditation of rehabilitation facilities, the joint commission on accreditation of health care organizations, or the commission on accreditation for family services.

(B) Any program that is currently being funded in the existing network shall continue to be a designated program until further standards are

developed, provided the standards identified in this subdivision (c)(1) are satisfied.

(C) All programs shall continue to fulfill grant or contract agreements.

(2) The provisions of subdivision (1) of this subsection shall not preclude the division's "request for bids" process.

(d) An amount of \$240,000 in Global Commitment funds is allocated to the Howard Center for the integrated Howard Center/Maple Leaf Farm Intensive Outpatient Program.

(e) A performance based contract for \$150,000 shall be issued to Maple Leaf Farm by July 1, 2010. This contract shall be in addition to other grants and contracts for Maple Leaf Farm and shall be to support enhanced medical and psychiatric services intended to reduce psychiatric and detoxification utilization at hospitals.

(f) Of the interdepartmental funds, \$110,000 are from the department of corrections justice reinvestment funds and shall be added to the recovery center base funding for fiscal year 2011. Grants of \$45,000 each shall be made for two new recovery centers.

Sec. E.314 DEPARTMENT OF MENTAL HEALTH; GRANT REDUCTION

(a) The department of mental health shall implement a five-percent reduction in general funds, totaling \$7,472 to community support programs for mental health treatment by allowing the programs to determine the most appropriate method to implement the reduction.

Sec. E.314.1 VERMONT STATE HOSPITAL; CANTEEN

(a) The general assembly finds that the availability of a cafeteria, also known as "the canteen," for use by patients of the Vermont state hospital is therapeutic for them and should be available for their use, as well as for their guests, hospital staff, and members of the general public.

(b) From any appropriation contained in any act of the general assembly to the department of buildings and general services, the sum of up to \$25,000 shall be used to make necessary repairs and upgrades to bring up to code the premises used as the canteen, which repairs and upgrades shall be completed by October 30, 2010.

(c) On or before November 1, 2010, the secretary of human services shall cause the canteen to reopen for no fewer than five days per week for a reasonable number of hours per day, for use by state hospital patients, their guests, staff, and members of the public. Notwithstanding any other provisions

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of law, the cafeteria service shall be provided either by state employees or a contracted vendor, so long as the operation is cost-neutral to the general fund. If the cafeteria service is offered by a vendor, the premises used by the vendor shall be leased at an annual cost of \$1.00, and the leased premises shall otherwise be offered to the vendor on the same terms and conditions as those offered to the vendor who operates the state house cafeteria.

(d) The canteen service shall continue in operation unless closure is authorized by act of the general assembly.

(e) The vendor shall strive to offer affordable lower-cost food prices to state hospital patients.

Sec. E.316 ELIGIBILITY DETERMINATION; QUALITY CONTROL

(a) The establishment of six (6) new full-time positions is authorized in fiscal year 2011 to enhance quality control efforts related to eligibility for Medicaid, Medicaid waiver programs, and programs administered by the agency of human services. These positions shall be transferred and converted from vacant positions in the executive branch of state government.

(b) The department shall develop measures to evaluate the success of these positions carrying out the purpose in subsection (a) of this section. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

Sec. E.317 Department for children and families – family services

(a) The following grants are made to reduce the number of Vermont youth and young adults who are at risk of incarceration or re-incarceration: \$135,800 to Lamoille County people in partnership program for wrap-around services for at risk youth and \$14,550 for a grant to the project against violent encounters for a program for domestic violence prevention and mentoring for youth. The department shall develop measures to evaluate the success of these grant funded programs. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

Sec. E.318 CHILD CARE ELIGIBILITY; PROCESSING

(a) Until February 1, 2011, the department for children and families shall continue to contract with community agencies for the determination of financial eligibility for the child care services program established in 33 V.S.A. § 3512. Between February 1, 2011 and June 30, 2011, the department for children and families shall continue to contract with community agencies to support families and child care providers with eligibility and payment needs so they can effectively and efficiently navigate the new system during the transition period and beyond.

(b) Before February 1, 2011, the department for children and families shall work with the community agencies to apply technology in a manner that most appropriately balances centralized services with community-based services so that these services will most efficiently and effectively address the needs of families and child care providers.

Sec. E.318.1 33 V.S.A. § 4602(a)(10) as added in Sec. 2 of S.268 of 2010 is amended to read:

(10) 12 at-large members, selected on the basis of appointed by the governor based on their commitment to early childhood well-being and representing a range of perspectives and geographic diversity. The governor shall consider the recommendations of the council's nominating committee. One of the at-large members shall be a representative of a local Head Start program and one shall be a member of a school board, to be chosen recommended by the Vermont school boards association.

Sec. E.318.2 S.268 of the 2009 Adj. Sess. (2010); TECHNICAL CORRECTION

(a) The second Sec. 2 in S.268 shall be renumbered to be Sec. 3 and Sec. 3 shall be renumbered to be Sec. 4.

Sec. E.318.3 Sec. 3 of S.268 of 2010, as enacted and as amended by this act, is amended to read:

Sec. 3. COMPOSITION OF COUNCIL

The members of the building bright futures council serving as of the effective date of this act shall continue to serve on the council after that date and shall adopt bylaws detailing the council's governance and procedures, including a procedure by which a nominating committee recommends prospective council members to the governor.

Sec. E.319 4 V.S.A. § 461 is amended to read:

§ 461. OFFICE OF MAGISTRATE; JURISDICTION; SELECTION; TERM

(a) The office of magistrate is created within the family <u>division of the</u> <u>superior</u> court. Except as provided in section 463 of this title, the office of magistrate shall have <u>nonexclusive</u> jurisdiction <u>concurrent with the family</u> court to hear and dispose of the following cases and proceedings:

(1) Proceedings for the establishment, modification, and enforcement of child support, including contempt proceedings instituted against an obligated party for the limited purpose of enforcing a child support order.

(2) Cases arising under the Uniform Interstate Family Support Act.

(3) Child support in parentage cases after parentage has been determined.

(4) Cases arising under section 5533 of Title 33 <u>33 V.S.A. § 5116</u>, when delegated by the family <u>a presiding judge of the superior</u> court.

(5) Proceedings to establish, modify, or enforce temporary orders for spousal maintenance in accordance with sections <u>15 V.S.A. §§</u> 594a and 752 of <u>Title 15</u>.

(6) Proceedings to modify or enforce temporary or final parent-child contact orders issued pursuant to this title.

(7) Proceedings to establish parentage.

(8) Proceedings to establish temporary parental rights and responsibilities and parent-child contact.

* * *

Sec. E.319.1 15 V.S.A. § 658(f) is amended to read:

(f)(1) The court shall order either or both parents owing a duty of support to provide a cash contribution or medical coverage for a child, provided that medical coverage is available to the parent at a reasonable cost. Medical coverage is presumed to be available to a parent at a reasonable cost only if the amount payable for the individual's contribution to the insurance or health benefit plan premium cost of adding the child to an existing insurance or health benefit plan or the difference between providing coverage to the individual alone and family coverage under an existing insurance or health benefit plan is five percent or less of the parent's gross income. The court, in its discretion, retains the right to order a parent to obtain medical coverage even if the cost exceeds five percent of the parent's gross income if the cost is deemed reasonable under all the circumstances after considering the factors pursuant to section 659 of this title.

(2) If private health insurance or an employer-sponsored health benefit plan is not available at a reasonable cost, the court may order one or both parents owing a duty of support to contribute a cash contribution of up to five percent of gross income toward the cost of health care coverage of a child under public or private health insurance or a health benefit plan. The court also may order a cash contribution if a child receives coverage or health benefits under Medicaid, a Medicaid waiver program, Dr. Dynasaur, or is uninsured. A cash contribution under this section shall be considered child support for tax purposes. When calculating the contribution of a parent whose child receives coverage under Medicaid, a Medicaid waiver program, or

Dr. Dynasaur, the court shall not order a contribution greater than the premium amount charged by the agency of human services for the child's coverage.

(3) The court, in its discretion, may order a parent to provide a cash contribution or coverage under a public or private insurance or health benefit plan even if the cost exceeds five percent of the parent's gross income, if the cost is deemed reasonable under the totality of the circumstances after considering the factors pursuant to section 659 of this title.

Sec. E.319.2 15 V.S.A. § 653 is amended to read:

§ 653. DEFINITIONS

As used in this subchapter:

(1) "Available income" means gross income, less

(A) the amount of spousal support or preexisting child support obligations actually paid;

(B) the actual cost to a parent of providing adequate health insurance coverage or a cash contribution as provided for in section 658 of this title for the children who are the subject of the order;

* * *

Sec. E.319.3 OFFICE OF CHILD SUPPORT; POSITIONS

(a) Using reinvestment funds authorized in No. 68 of the Acts of 2010, the office of child support may fill two existing full-time classified positions to increase collections of medical support and cash contributions, including from families with incomes between 185 and 300 percent of the federal poverty level.

(b) The office shall develop measures to evaluate the success of these positions carrying out the purpose in subsection (a) of this section. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

Sec. E.321 Department for children and families – general assistance (Sec. B.321, #3440060000)

(a) Commencing July 1, 2010, the commissioner for children and families may amend the maximum amount for death benefits paid at public expense through the general assistance program to \$1,100 per burial.

(b) If the department for children and families receives additional funds through the recoupment of Supplemental Security Income (SSI) funds for participants in the general assistance program, the commissioner shall use up to \$500,000 of these recouped funds to fund homelessness assistance provided through general assistance under Sec. E.321.2 of this act.

(c) The department for children and families may not reduce or eliminate the personal needs (PNI) amount provided to individuals eligible for and receiving ongoing general assistance without legislative approval.

Sec. E.321.1 33 V.S.A. § 2301 is amended to read:

§ 2301. BURIAL RESPONSIBILITY

(a)(1) When a person dies in this state, or a resident of this state dies within the state or elsewhere, and the decedent was a recipient of assistance under Title IV or XVI of the Social Security Act, or nursing home care under Title XIX of the Social Security Act, or assistance under state aid to the aged, blind or disabled, or an honorably discharged veteran of any branch of the U.S. military forces to the extent funds are available and to the extent authorized by department regulations rules, the decedent's burial shall be arranged and paid for by the department if the decedent was without sufficient known assets to pay for burial. The department shall pay burial expenses when arrangements are made other than by the department to the maximum permitted by its regulations for individuals that meet the requirements of this section in an amount not to exceed a maximum established by rule and shall establish by rule a process for reducing the maximum payment amount by the amount of other assets available from the decedent's estate or from the decedent's spouse to pay for the burial. In any case where other contributions are made, these payments shall be deducted from the amount otherwise paid by the department but in no case is the department responsible for any payment when the person arranging the burial selects a funeral the price of which exceeds the department's maximum. The maximum payment by the department does not preclude other individuals from paying for or receiving contributions to pay for additional disposition expenses.

(2) The department shall notify the directors of all funeral homes within the state and within close proximity to the state's borders of its regulations rules with respect to those services for which it shall make payment pays and the amount of payment authorized for such those services. All payments shall be made directly to the appropriate funeral director. In order to receive payment under this section, the funeral director shall provide the department and the party making the funeral arrangements with an itemized invoice for the specific services that are to be provided at public expense.

(3) As a condition of payment when arrangements are made other than by the department, funeral directors shall be required to do the following: (A) the funeral director shall determine from the person making the arrangements if the decedent was a recipient of assistance or an eligible veteran as specified in subdivision (a)(1) of this section;

(B) If, and if the decedent was such a recipient, give notice to the party person making the arrangements of the department's regulations rules.

(4) If the funeral home director does not advise the person making the arrangements of the department's regulations <u>rules</u> then that person shall not be liable for expenses incurred.

* * *

(c) When a person other than one described in subsection (a) or (b) of this section dies in the town of domicile without sufficient known assets to pay for burial, the burial shall be arranged and paid for by the town. The department shall reimburse the town up to \$250.00 for expenses incurred.

(d) In all other cases the department shall arrange for and pay <u>up to the</u> <u>maximum amount established by rule</u> for the burial of <u>eligible</u> persons who die in this state or residents of this state who die within the state or elsewhere when such the persons are without sufficient known assets to pay for their burial.

(e) [Omitted.]

(f) In all cases where the department is responsible for funeral and/or <u>or</u> burial expenses under this chapter, the department shall provide, by rule, the specific services that are to be provided at public expense, and on an itemized basis the maximum price to be paid by the department for each such service.

(g)(e) For the purpose of this chapter, "burial" means the act of <u>final</u> <u>disposition of human remains including</u> interring <u>or cremating</u> the human dead <u>a decedent</u> and the ceremonies directly related to that <u>cremation or</u> interment at the gravesite; and "funeral" means the ceremonies prior to burial of the body by interment, cremation, or other method.

Sec. E.321.2 GENERAL ASSISTANCE BENEFITS; FLEXIBILITY PROGRAM

(a) Commencing with state fiscal year 2007, the agency of human services may establish a housing assistance program within the general assistance program to create flexibility to provide these general assistance benefits. The purpose of the program is to mitigate poverty and serve applicants more effectively than they are currently served with the same amount of general assistance funds. The program shall operate in a consistent manner within existing statutes and rules except that it may grant exceptions to this program's eligibility rules and may create programs and services as alternatives to these

rules. The assistance provided under this section is not an entitlement and may be discontinued when the appropriation has been fully spent.

(b) The program may operate in up to 12 districts designated by the secretary of human services. This program will be budget neutral. For each district in which the agency operates the program, it shall establish procedures for evaluating the pilot and its effects. The agency shall report annually to the general assembly on its findings from the programs, its recommendations for changes in the general assistance program, and a plan for further implementation of the program.

(c) The agency shall continue to engage interested parties, including both statewide organizations and local agencies, in the design, implementation, and evaluation of the general assistance flexibility program.

Sec. E.321.3 HOUSING ASSISTANCE; ARRA FUNDS

(a) This section shall not apply to the administration of housing assistance funded with general funds provided through the general assistance program under Sec. E.321.2 of this act and existing rules.

(b) Commencing in fiscal year 2010, the agency of human services may establish a housing assistance program with homelessness prevention and rapid rehousing program (HPRP) funds from the American Recovery and Reinvestment Act of 2009, Public Law 111-5. HPRP funds shall be granted to direct-service community organizations which demonstrate experience and expertise in serving the homeless or those at risk for homelessness. The funds shall also be granted in accordance with requirements established by the U.S. Department of Housing and Urban Development (HUD).

(c) The agency shall engage interested parties in the ongoing delivery and evaluation of the program.

(d)(1) The agency shall maintain procedures established in fiscal year 2010 to ensure equitable access to housing assistance provided by direct service community organizations with HPRP funds, in compliance with chapter 139 of Title 9, through a standard application and assessment process.

(2) The agency shall ensure that grantees of these funds provide an appropriate grievance and appeal process for applicants and recipients of the funds, including for expedited appeals.

(e)(1) The agency shall maintain reporting procedures established in fiscal year 2010 for all grantees receiving HPRP funds to provide housing assistance and collect sufficient information to determine that grantees are following all requirements and to evaluate the program's effectiveness.

(2) The agency of human services field service directors shall monitor the housing assistance programs provided by direct service community organizations granted HPRP funds and assess the effectiveness of these programs.

Sec. E.321.4 EMERGENCY RULEMAKING FOR GENERAL ASSISTANCE PROGRAMS

(a) In order to administer Secs. E.321 and E.321.1 (general assistance burial) of this act, the department for children and families shall be deemed to have met the standard for adoption of emergency rules as required by 3 V.S.A. § 844(a). Notwithstanding 3 V.S.A. § 844, the agency shall provide a minimum of five business days for public comment in advance of filing the emergency rules as provided for in 3 V.S.A. § 844(c).

Sec. E.323 REPEAL

(a) Sec. 106 of No. 4 of the Acts of 2009 (Reach Ahead sunset) is repealed. Sec. E.323.1 33 V.S.A. § 1116(c)(1) is amended to read:

(c)(1)(A) For a first, second and third month in which a participating adult is not in compliance with a family development plan or work requirement and has not demonstrated good cause for such noncompliance, the family's financial assistance grant shall be reduced by the amount of \$75.00 for each adult sanctioned.

(B) For a second month in which a participating adult is not in compliance with a family development plan or work requirement and has not demonstrated good cause for such noncompliance, the family's financial assistance grant shall be reduced by the amount of \$100.00 for each adult sanctioned.

(C) For a third month in which a participating adult is not in compliance with a family development plan or work requirement and has not demonstrated good cause for such noncompliance, the family's financial assistance grant shall be reduced by the amount of \$125.00 for each adult sanctioned.

Sec. E.323.2 33 V.S.A. § 1116(h) is amended to read:

(h)(1) To receive payments during the fiscal sanction period, an adult who is the subject of the sanction shall meet no less than once each month to report his or her circumstances to the case manager or to participate in assessments as directed by the case manager. In addition, this meeting shall be for initial assessment and development of the family development plan when such tasks have not been completed; reassessment or review and revision of the family development plan, if appropriate; and to encourage the participant to fulfill the VT LEG 259081.1

work requirement. Meetings required under this section may take place in the district office, a community location, or in the participant's home. Facilitation of meeting the participant's family development plan goals shall be a primary consideration in determining the location of the meeting. The commissioner may waive any meeting when extraordinary circumstances prevent a participant from attending. The commissioner shall adopt rules to implement this subsection.

(2) To receive payments during the fourth month of fiscal sanction in a 12-month period, the participating adults shall engage in an assessment that includes the employability and life skills capabilities of the adult participants. If the evaluation reveals that a sanctioned adult should have had a modified or deferred work requirement during the current month of sanction or earlier months of sanction, the department shall strike the sanction, reinstate the full grant amount to which the family is entitled, and modify the participant's family development plan. The months of sanction incorrectly assessed shall be treated as if the months were forgiven as provided for under subsection (d) of this section. The assessment may be conducted by a team consisting of service providers familiar with the family and with an individual family member's needs.

Sec. E.323.3 33 V.S.A. § 1122(b) is amended to read:

(b) The program authorized by this section shall be administered by the commissioner or by a contractor designated by the commissioner, and. The program shall be supported with funds other than federal TANF block grant funds provided under Title IV-A of the Social Security Act, except that the commissioner may fund financial assistance grants and support services of families participating in the postsecondary education program with TANF block grant or state maintenance of effort funds when the participating adult's educational activities are a countable work activity under federal law and when it will further one or more of the purposes in subdivision 1121(c)(1) of this title.

Sec. E.323.4 POSTSECONDARY EDUCATION; CASE MANAGEMENT

(a) The department for children and families may reduce its contract by \$150,000 with postsecondary institutions for case management services to families participating in the postsecondary education program provided for in 33 V.S.A. § 1122 as follows:

(1) by renegotiating the amount in the contract attributable to administrative services provided by the postsecondary institution; and

(2) if renegotiation does not achieve the savings required in this section, then postsecondary institutions will team with Reach Up case managers in each

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district to provide coordinated case management services for students in the postsecondary program.

Sec. E.323.5 TANF; ARRA

(a) The department for children and families may use excess receipts authority to spend additional funds from the Temporary Assistance for Needy Families (TANF) emergency contingency fund for any of the purposes provided for in Section 2101 of the American Recovery and Reinvestment Act of 2009 (ARRA) which are subsidized employment, caseload increase, and short-term nonrecurrent benefits.

Sec. E.324 Department for children and families – home heating fuel assistance/LIHEAP (Sec. B.324, #3440090000)

(a) Of the funds appropriated for home heating fuel assistance/LIHEAP in this act, no more than \$450,000 shall be expended for crisis fuel direct service/administration exclusive of statewide after-hours crisis coverage.

Sec. E.324.1 HOME HEATING FUEL ASSISTANCE/LIHEAP

(a) For the purpose of a crisis set-aside, for seasonal home heating fuel assistance through December 31, 2010, and for program administration, the commissioner of finance and management shall transfer \$2,550,000 from the home weatherization assistance trust fund to the home heating fuel assistance fund to the extent that federal LIHEAP or similar federal funds are not available. An equivalent amount shall be returned to the home weatherization trust fund from the home heating fuel assistance fund to the extent that federal LIHEAP or similar federal funds are received. Should a transfer of funds from the home weatherization assistance trust fund be necessary for the 2010-2011 crisis set-aside and for seasonal home heating fuel assistance through December 31, 2010, and if LIHEAP funds awarded as of December 31, 2010, for fiscal year 2011 do not exceed \$2,550,000, subsequent payments under the home heating fuel assistance program shall not be made prior to January 30, 2011. Notwithstanding any other provision of law, payments authorized by the office of home heating fuel assistance shall not exceed funds available, except that for fuel assistance payments made through December 31, 2010, the commissioner of finance and management may anticipate receipts into the home weatherization assistance trust fund.

Sec. E.325 Department for children and families – office of economic opportunity (Sec. B.325, #3440100000)

(a) Of the general fund appropriation in this section, \$792,000 shall be granted to community agencies for homeless assistance by preserving existing services, increasing services, or increasing resources available statewide. These funds may be granted alone or in conjunction with federal McKinney

emergency shelter funds. Grant decisions shall be made with assistance from the coalition of homeless Vermonters.

Sec. E.325.1 INDIVIDUAL DEVELOPMENT SAVINGS PROGRAM

(a) In fiscal year 2011, the funding for the individual development (IDA) savings program established in 33 V.S.A. § 1123 shall be from multiple sources, including general funds, community services block grant funds, and federal funds for economic development. It is the intent of the general assembly to fully fund the IDA program in future fiscal years as an important tool for the state's economic development through providing matched savings for starting small businesses and through promotion of financial literacy.

Sec. E.326 Department for children and families - OEO - weatherization assistance (Sec. B.326, #3440110000)

(a) Of the special fund appropriation in this section, \$400,000 is for the replacement and repair of home heating equipment.

(b) Appropriations from the weatherization trust fund may be limited based on the revenue forecast for the fund from the gross receipts tax as adopted pursuant to 32 V.S.A. § 305a.

Sec. E.329 VERMONT VETERANS' HOME; REGIONAL BED CAPACITY

(a) The agency of human services shall not include the bed count at the Vermont veterans' home when recommending and implementing policies that are based on or intended to impact regional nursing home bed capacity in the state.

Sec. E.329.1 Sec. E.308.1 of No. 1 of the Acts of 2009 (Special Session) is amended to read:

Sec. E.308.1 FISCAL YEAR 2010 NURSING HOMES; HIT

INCENTIVES

(a) The By fiscal year 2014, the division of rate setting shall examine the <u>need to</u> provide an incentive or rate adjustment by rule to nursing homes to install electronic medical records in order to improve quality of care by avoiding medical errors and to achieve savings in health care costs through streamlined administration. The incentive or rate adjustment shall be in addition to any current adjustment for capital costs. The incentive or rate adjustment shall be available to nursing homes that have installed electronic medical records prior to the adoption of the rule. In examining the need for an incentive or rate adjustment, the division shall consider the availability and

likelihood of federal funding opportunities to achieve the intended purpose of this section.

Sec. E.330 Disabilities, aging, and independent living - advocacy and independent living (Sec. B.330, #3460020000)

(a) Certification of adult day providers shall require a demonstration that the new program is filling an unmet need for adult day services in a given geographic region and does not have an adverse impact on existing adult day services.

(b) Of this appropriation, \$109,995 in general funds shall be allocated for base funds to adult day programs in the same proportion as they were allocated in fiscal year 2010.

Sec E.337 Corrections – correctional education (Sec. B.337 #3480003000)

(a) The appropriation in this section shall be made, notwithstanding 28 V.S.A. § 120(g).

Sec. E. 338 Corrections – correctional services (Sec. B.338, #3480004000)

(a) In fiscal year 2011, \$110,000 of the funds allocated for recovery centers with justice reinvestment funds shall be transferred to the office of drug and alcohol programs to be added to the base funding for recovery centers.

Sec. E.342 Vermont veterans' home – care and support services (Sec. B.342, #3300010000)

(a) If Global Commitment fund monies are unavailable, the total funding for the Vermont veterans' home shall be maintained through the general fund or other state funding sources.

(b) The Vermont veterans' home will use the Global Commitment funds appropriated in this section for the purpose of increasing the access of quality health care to uninsured persons, underinsured persons, and Medicaid beneficiaries.

* * * LABOR * * *

Sec. E.401 Labor - programs (Sec. B.401, 4100500000)

(a) The workforce development council shall allocate funding to the workforce investment boards based upon the performance of the local workforce investment boards, measured according to standards established by the council.

Sec. E.401.1 21 V.S.A. chapter 17, subchapter 4 is added to read:

Subchapter 4. Benefits for Approved Job Training Program

§ 1471. TRAINING BENEFIT PROGRAM

(a) An individual who is otherwise eligible for benefits under this chapter, but who has exhausted his or her maximum benefit amount under section 1340 of this chapter and any other available federally funded extension, is entitled to a maximum of an additional 26 weeks of benefits in the same amount as the weekly benefit amount established in the individual's most recent benefit year if the individual is enrolled in and making satisfactory progress in either a state-approved training program or a job training program authorized under the workforce investment act of 1998.

(b) To be eligible for training benefits under this section an individual shall be in compliance with both the following:

(1) The individual has been separated from a declining occupation or has been involuntarily and indefinitely separated from employment as a result of a permanent reduction of operations at the individual's place of employment.

(2) The individual is enrolled in a program designed to train the individual for entry into a high demand occupation.

Sec. E.401.2 21 V.S.A. § 1101 is amended to read:

§ 1101. APPRENTICESHIP DIVISION AND COUNCIL

The apprenticeship division and state apprenticeship council, hereinafter referred to as the "council," shall be located within the department of labor. The commissioner of labor shall supervise the work of the division. The council shall consist of 11 10 members, five four ex officio members and six members who shall be appointed by the governor. Of the ex officio members, one shall be the commissioner of labor, one shall be the director of workforce development, one shall be the chief of licensing within the department of commissioner of public safety, or designee, one shall be the director of career and lifelong learning within the department commissioner of education or designee, and one shall be the state director of the apprenticeship division who shall act as secretary of the council without vote. Of the appointive members, three shall be individuals who on account of previous vocation, employment, occupation, or affiliation can be classed as employers and three shall be individuals who on account of previous vocation, employment, occupation, or affiliation can be classed as employees. Appointment of the employer and the employee members shall be made for the term of three years except the employer and employee members first appointed shall be appointed for the

term of one, two, and three years respectively. The governor shall annually designate one member of the council as chair. Each member of the council who is not a salaried official or employee of the state shall be entitled to compensation and expenses as provided in 32 V.S.A. § 1010.

Sec. E.401.3 21 V.S.A. § 1340 is amended to read:

§ 1340. COMPUTATION DURATION OF BENEFITS

Except as provided in subchapter 2 subchapters 2 and 4 of this chapter, the maximum total amount of benefits payable to any eligible individual during any benefit year shall not exceed 26 times his or her weekly benefit amount.

Sec. E.401.4 REPEAL

(a) 21 V.S.A. § 1423b (relating to extended benefits; approved training programs) is repealed.

* * * K-12 EDUCATION * * *

Sec. E.500 Education – finance and administration (Sec. B.500, #5100010000)

(a) The Global Commitment funds appropriated in this section for school health services, including school nurses, shall be used for the purpose of funding certain health-care-related projects. It is the goal of these projects to reduce the rate of uninsured or underinsured persons or both in Vermont and to increase the access of quality health care to uninsured persons, underinsured persons, and Medicaid beneficiaries.

Sec. E.500.1 16 V.S.A. § 4001(1) is amended to read:

§ 4001. DEFINITIONS

For the purpose of this chapter:

(1) "Average daily membership" of a school district, or if needed in order to calculate the appropriate homestead tax rate, of the municipality as defined in 32 V.S.A. § 5401(9), in any year means:

* * *

(C) The full-time equivalent enrollment for each prekindergarten child as follows: If a child is enrolled in 10 or more hours of prekindergarten education per week or receives 10 or more hours of essential early education services per week, the child shall be counted as one full-time equivalent pupil. If a child is enrolled in six or more but fewer than 10 hours of prekindergarten education per week or if a child receives fewer than 10 hours of essential early education services per week, the child shall be counted as a percentage of one full-time equivalent pupil, calculated as one multiplied by the number of hours

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per week divided by ten. A child enrolled in prekindergarten education for fewer than six hours per week shall not be included in the district's average daily membership. Although there is no limit on the total number of children who may be enrolled in prekindergarten education or who receive essential early education services, the total number of prekindergarten children that a district may include within its average daily membership shall be limited <u>determined</u> as follows:

(i) All children receiving essential early education services may be included.

(ii) Of the children enrolled in prekindergarten education offered by or through a school district who are not receiving essential early education services, the greater of the following may be included:

(I) ten children; or

(II) the number resulting from: (aa) one plus the average annual percentage increase or decrease in the district's first grade average daily membership as counted in the census period of the previous five years; multiplied by (bb) the most immediately previous year's first grade average daily membership; or

(III) the total number of children residing in the district who are enrolled in the prekindergarten program or programs and who are eligible to enter kindergarten in the district in the following academic year; or

(IV) one-fifth of the total number of children in grades 1-5 who were included in the district's average daily membership for the previous year.

(iii) Notwithstanding subdivision (ii) of this subdivision or any other provision limiting the number of prekindergarten children a district may include within its average daily membership, if the commissioner determines that a school district or a school within the district has made insufficient progress in improving student performance as required by subsection 165(b) of this title or federal law, then until the commissioner determines that sufficient progress is being made, the school district may include within its average daily membership the total number of children enrolled in prekindergarten education offered by or through a school district; provided, however, that the number included in the average daily membership shall not exceed the maximum number of children who can be accommodated in all qualified prekindergarten education programs, as defined in state board rule, that are offered by or through the school district and by private providers within the district as of:

(I) June 30, 2010 if the commissioner's determination of insufficient progress is made on or before that date; or

(II) June 30 of the year the commissioner's determination of insufficient progress is made for districts added to the list after June 30, 2010.

Sec. E.501 Sec. E. 501(a) of No. 1 of the Acts of 2009 (Special Session) is amended to read:

(a) In fiscal year 2010 and fiscal year 2011, \$1,131,751 shall be paid by the education fund for early education initiative grants for at-risk preschoolers. <u>These payments shall be made notwithstanding 16 V.S.A. § 4025(b)(1).</u> In fiscal year 2012, these expenses shall revert to the general fund, and the general fund transfer shall be adjusted accordingly.

Sec. E.501.1 Sec. 9.001(d) of No. 192 of the Acts of 2008 (sunset; teen parent education programs), as amended by Sec. E.501.1 of No. 1 of the Acts of the Special Session of 2009, is amended to read:

(d) Sec. 5.304.1 of this act shall take effect on July 1, 2008 and shall remain in effect until July 1, 2010.

Sec. E.502 Education – special education: formula grants (Sec. B.502, #5100040000)

(a) The education fund appropriated in this section shall be made notwithstanding 16 V.S.A. §§ 2963(c)(3) and 2967(b).

(b) Of the appropriation authorized in this section, and notwithstanding any other provision of law, an amount not to exceed \$3,300,654 shall be used by the department of education in fiscal year 2011 as funding for 16 V.S.A. § 2967(b)(2)–(6). In distributing such funds, the commissioner shall not be limited by the restrictions contained within 16 V.S.A. § 2969(c) and (d). In addition to funding for 16 V.S.A. § 2967(b)(2)–(6), up to \$169,061 may be used by the department of education for its participation in the higher education partnership plan.

Sec. E.503 Education – state-placed students (Sec. B.503, #5100050000)

(a) The independence place program of the Lund Family Center shall be considered a 24-hour residential program for the purposes of reimbursement of education costs.

Sec. E.504 Education – adult education and literacy (Sec. B.504, #5100060000)

(a) Of this appropriation, the amount from the education fund shall be distributed to school districts for reimbursement of high school completion services pursuant to 16 V.S.A. § 1049a(c).

(b) The education fund appropriated in this section shall be notwithstanding 16 V.S.A. § 1049a(c).

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Sec. E.505 Education – adjusted education payment (Sec. B.505, #5100090000)

(a) Any calculations required to identify funding levels for the education fund budget stabilization reserve under 16 V.S.A. § 4026(b) shall be calculated as if in fiscal year 2011, those revenues and appropriations included \$38,575,036 in additional revenues and \$38,575,036 in additional expenditures.

Sec. E.505.1 COMMUNITY HIGH SCHOOL OF VERMONT GRANT

(a) From the education funds appropriated in Sec. B.505 in fiscal year 2011, a base education payment shall be paid to the community high school of Vermont for full-time equivalent students studying high school equivalency coursework. For fiscal year 2011, this total grant shall be set at the base education amount for 355 full-time equivalent pupils. This amount shall be transferred from the funds appropriated in Sec. B.505 to the department of corrections - correctional education program. These payments shall be made, notwithstanding 16 V.S.A. § 4025(b)(1). In fiscal year 2012, these expenses shall revert to the general fund, and the general fund transfer shall be adjusted accordingly.

Sec. E.512 Education – Act 117 cost containment (Sec. B.512, #5100310000)

(a) Notwithstanding any provisions of law, expenditures made from this section shall be counted under 16 V.S.A. § 2967(b) as part of the state's 60 percent of the statewide total special education expenditures of funds which are not derived from federal sources.

Sec. E.513 Appropriation and transfer to education fund (Sec. B.513, #1110020000)

(a) Notwithstanding 16 V.S.A. § 4025(a)(2), for fiscal year 2011, the general fund transfer to the education fund shall be \$240,803,945.

Sec. E.514 State teachers' retirement system (Sec. B.514, #1265010000):

(a) In accordance with 16 V.S.A. § 1944(g)(2), the amount of annual contribution to the Vermont state teachers' retirement system shall be \$48,233,006 in fiscal year 2011.

(b) In accordance with 16 V.S.A. § 1944(c)(2), of the annual contribution, \$10,270,041 is the "normal contribution," and \$37,962,965 is the "accrued liability contribution."

(c) A combination of \$46,913,381 in general fund, and an estimated \$1,319,625 of Medicare Part D reimbursement funds is utilized to achieve funding at the actuarially recommended level.

* * * HIGHER EDUCATION * * *

Sec. E.600 University of Vermont (Sec. B.600, #1110006000)

(a) The commissioner of finance and management shall issue warrants to pay one-twelfth of this appropriation to the University of Vermont on or about the 15th day of each calendar month of the year.

(b) Of this appropriation, \$407,113 shall be transferred to EPSCoR (Experimental Program to Stimulate Competitive Research) for the purpose of complying with state matching fund requirements necessary for the receipt of available federal or private funds or both.

(c) If Global Commitment fund monies are unavailable, the total grant funding for the University of Vermont shall be maintained through the general fund or other state funding sources.

(d) The University of Vermont will use the Global Commitment funds appropriated in this section to support Vermont physician training. The University of Vermont prepares students, both Vermonters and out-of-state, and awards approximately 100 medical degrees annually. Graduates of this program, currently representing a significant number of physicians practicing in Vermont, deliver high quality health care services to Medicaid beneficiaries and to the uninsured or underinsured persons or both in Vermont and across the nation.

Sec. E.602 Vermont state colleges (Sec. B.602, #1110009000)

(a) The commissioner of finance and management shall issue warrants to pay one-twelfth of this appropriation to the Vermont state colleges on or about the 15th day of each calendar month of the year.

(b) Of this appropriation, \$459,801 shall be transferred to the Vermont manufacturing extension center for the purpose of complying with state matching fund requirements necessary for the receipt of available federal or private funds or both.

Sec. E.603 Vermont state colleges – allied health (Sec. B.603, #1110010000)

(a) If Global Commitment fund monies are unavailable, the total grant funding for the Vermont state colleges shall be maintained through the general fund or other state funding sources.

(b) The Vermont state colleges shall use the Global Commitment funds appropriated in this section to support the dental hygiene, respiratory therapy, and nursing programs which graduate approximately 250 health care providers annually. These graduates deliver direct, high quality health care services to Medicaid beneficiaries and uninsured or underinsured persons or both. No. 156

Sec. E.605 Vermont student assistance corporation (Sec. B.605, #1110012000)

(a) Of this appropriation, \$25,000 is appropriated from the general fund to the Vermont Student Assistance Corporation to be deposited into the trust fund established in 16 V.S.A. § 2845.

(b) Except as provided in subsection (a) of this section, not less than 93 percent of grants shall be used for direct student aid.

(c) Of state funds available to the Vermont Student Assistance Corporation pursuant to Secs. E.215(a) and B.1100(a)(3)(B) of this act, \$250,000 shall be used for the purposes of 16 V.S.A. § 2856. Any unexpended funds from these allocations shall carry forward for this purpose.

Sec. E. 605.1 VERMONT STUDENT ASSISTANCE CORPORATION; REPORT

(a) The Vermont student assistance corporation (VSAC) shall file a report with the general assembly and the higher education subcommittee of the prekindergarten-16 council by January 15, 2011. The report shall detail VSAC's changing role as a result of changes made in March 2010 to the federal higher education act through the enactment of the health care and education reconciliation act of 2010 (HCERA), Pub.L. 111-152 and HCERA's impacts on VSAC's operating revenues, its ability to provide state services to Vermonters, its strategic direction, and its spending and staffing levels. VSAC shall give updating reports to the higher education subcommittee of the prekindergarten-16 council at the council's meetings in 2010, and the council shall submit its comments on the reports to the general assembly.

Sec. E.605.2 ADVANCED PLACEMENT COURSES; DUAL ENROLLMENT AND OTHER POSTSECONDARY COURSES; POSTSECONDARY CREDIT

(a) On or before January 15, 2011, each Vermont postsecondary institution that receives general fund or capital appropriations from the state shall consider and provide recommendations to the house and senate committees on education regarding ways in which it could improve secondary completion and postsecondary aspiration rates by awarding postsecondary academic credit for the successful completion of one or more of the following:

(1) An advanced placement course at a Vermont secondary school and a score of three or higher on the advanced placement examination.

(2) A postsecondary-level course in a dual enrollment program.

(3) A postsecondary-level course offered online or by correspondence with an accredited college or university.

* * * NATURAL RESOURCES * * *

Sec. E.701 REPEAL

(a) 10 V.S.A. § 7553(h)(4) is repealed and the subsequent subdivisions of 10 V.S.A. § 7553(h) are renumbered accordingly.

(b) Subsections 6b(b) and (c) (transfer of funds from the solid waste management account for implementation of electronic waste program) of S.77 of 2010 as enacted are repealed.

Sec. E.701.1 Sec. 6c of S.77 of 2010 as enacted is amended to read:

Sec. 6c. ANR DISBURSEMENTS; APPROPRIATIONS

(a) In fiscal <u>years year</u> 2011 and 2012, the secretary of natural resources may authorize disbursements from the electronic waste collection and recycling account within the waste management assistance fund for the purpose of paying the costs of administering and implementing the electronic waste collection program set forth under chapter 166 of Title 10.

(b) In addition to any other funds appropriated to the agency of natural resources in fiscal year 2011, there is appropriated from the general fund to the agency \$50,000.00 in fiscal year 2011 from the waste management assistance fund under 10 V.S.A. § 6618 from fees assessed under 10 V.S.A. § 7553(g) for the purpose of administering and implementing the electronic waste collection and recycling program under chapter 166 of Title 10.

(c) Pursuant to 32 V.S.A. § 588(4)(C), the commissioner of finance and management may authorize the secretary to pay from anticipated receipts of the waste management assistance fund from fees assessed under 10 V.S.A. section 7553 the costs incurred by the secretary in implementing the standard plan established under 10 V.S.A. section 7552 in the first quarter of the program year beginning July 1, 2011.

Sec. E.702 Fish and wildlife - support and field services (Sec. B.702, #6120000000)

(a) It is the intent of the general assembly that the fiscal year 2011 budget provides funding to fill five (5) game warden positions that are vacant as of January 1, 2010, and funds two (2) limited service Fish and Wildlife Scientist II positions (position numbers 640148 and 640150). The Scientist II positions shall continue to implement the landowner Incentive Program and Community Wildlife Program.

(b) The department shall develop measures to evaluate the success of the Scientist II positions in carrying out the purposes in subsection (a) of this

section. This evaluation shall be submitted with the fiscal year 2012 budget materials to the house and senate committees on appropriations.

Sec. E.702.1 TRANSFER OF REGULATORY OVERSIGHT AND SPECIAL REQUIREMENTS FOR FACILITY AND HERD MANAGEMENT

(a) The general assembly finds and declares that:

(1) Vermont has long recognized that the protection and management of the state's native cervidae population is in the interest of the public welfare.

(2) An abundant, healthy deer herd is a primary goal of wildlife management, and hunting is a time-honored Vermont tradition.

(3) Vermont's captive cervidae herds are regulated as game farms under authority of the secretary of agriculture, food and markets under chapter 102 of Title 6 and the agency of agriculture, food and markets' rules governing captive cervidae.

(4) Captive cervidae herds provide economic benefit to Vermont in the same manner as farms producing cattle, sheep, pigs, and other amenable livestock.

(5) Tuberculosis is a transmissible disease that can infect species of both the cervidae and bovidae families and is zoonotic. The family bovidae includes cattle. The family cervidae include white-tailed deer, moose, and elk.

(6) Chronic wasting disease is a transmissible spongiform encephalopathy that has been identified in both free-ranging and captive cervidae populations in other parts of the United States, including New York state.

(7) Tuberculosis can be transmitted in cervidae and bovidae by nose-to-nose contact and through the sharing of watering and feeding troughs. It is not known exactly how chronic wasting disease is transmitted, but the most likely route of transmission is nose-to-nose contact. The agency of agriculture, food and markets' rules governing captive cervidae contain provisions both for managing herds that may be susceptible to chronic wasting disease and for testing cervidae to monitor for the control of zoonotic diseases contagious to livestock, including tuberculosis.

(8) The captive cervidae facility located in Irasburg manages a special-purpose herd established in 1994 within a 700-acre enclosure. At the time of the enclosure, the 700 acres contained a small population of native cervidae that currently falls outside the jurisdiction of the agency of agriculture, food and markets.

(9) In order to align state regulatory oversight of the facility and balance the state's responsibility to protect and manage its native cervidae populations with the economic benefit contributed by the 700-acre captive cervidae facility, it is necessary to transfer to the agency of agriculture, food and markets full jurisdiction and authority for regulatory oversight of the Irasburg facility and full authority for herd management of the facility and all cervidae currently contained within the 700-acre enclosure.

(b) Notwithstanding any law to the contrary, for the purposes of this section, the term "cervidae" shall include all white-tailed deer and moose currently entrapped in the Irasburg captive cervidae facility that contains a special-purpose herd, as "special-purpose herd" is defined in the agency of agriculture, food and markets' rules governing captive cervidae.

(c) The Irasburg captive cervidae facility that contains a special-purpose herd shall:

(1) Erect a secondary-perimeter fence inside the existing, primary-perimeter fence sufficient to reduce the possibility of contact between native cervidae and any cervidae within the facility. The secondary fencing shall be approved by the secretary of agriculture, food and markets and shall be erected no later October 1, 2010.

(2) Submit a written herd management plan for all cervidae, including entrapped native cervidae, within the facility to the secretary of agriculture, food and markets for approval. The plan shall:

(A) contain a specific disease surveillance component acceptable to the secretary of agriculture, food and markets that presents at least 30 mature native cervidae to the secretary of agriculture, food and markets for tuberculosis and chronic wasting disease testing per year. For purposes of this subdivision, "mature" means an animal older than 16 months of age;

(B) provide for the culling of antlerless native cervidae at a rate that prevents the herd size from overpopulating the enclosed area. The culling program shall include a provision to allow members of the Vermont National Guard who did not participate in the Vermont regular deer or moose hunting seasons and who were awarded or are eligible to receive a campaign ribbon for Operation Iraqi Freedom or Operation Enduring Freedom to assist with the cull; and

(C) be filed with the secretary of agriculture, food and markets no later than August 1, 2010.

(3) Comply with all disease testing protocols established and required by the secretary of agriculture, food and markets.

(4) Demonstrate by no later than September 1, 2010, substantial compliance with the agency of agriculture, food and markets' rules governing captive cervidae.

(5) Remain in good regulatory standing with the secretary of agriculture, food and markets.

(d) The secretary of agriculture, food and markets may grant a variance from the agency of agriculture, food and markets' rules for the design and construction of the secondary-perimeter fence required under subdivision (c)(1) of this section if the fence design proposed by the owner of the Irasburg facility serves the underlying purpose of reducing the possibility of contact between free-ranging native cervidae and any cervidae enclosed within the facility. The secretary of agriculture, food and markets may grant variances to other provisions of the agency of agriculture, food and markets' rules governing captive cervidae provided that the health and welfare of free-ranging native cervidae are not compromised or put at risk.

(e) In order to ensure that the appropriate number of native cervidae are provided to the secretary of agriculture, food and markets for disease surveillance as required under subdivision (c)(2)(A) of this section and that the facility is able to meet the cull rate required under subdivision (c)(2)(B) of this section, the facility may harvest cervidae during a special season, if necessary. Any special harvest shall be approved in advance by the secretary of agriculture, food and markets after consultation with the commissioner of fish and wildlife. Notice of approval for a special season shall be posted at least 10 days in advance of the season in the office of the town clerk of Irasburg.

(f) Any native cervidae discovered between the primary and secondary fences at the Irasburg captive cervidae facility or any cervidae carcass discovered within the Irasburg facility shall be immediately presented to the secretary of agriculture, food and markets for disease surveillance.

(g) The secretary of agriculture, food and markets may enforce a failure to comply with the requirements of this section under chapter 1 or 102 of Title 6.

(h) It shall be a violation of chapter 103 or 113 of Title 10 if a person knowingly or intentionally entraps or allows a person to knowingly or intentionally entrap a native cervidae within the Irasburg captive cervidae facility.

Sec. E.704 Forests, parks and recreation - forestry (Sec. B.704, #6130020000)

(a) This special fund appropriation shall be authorized, notwithstanding <u>3 V.S.A. § 2807(c).</u>

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* * * COMMERCE AND COMMUNITY DEVELOPMENT * * *

Sec. E.800 [DELETED]

Sec. E.800.1 [DELETED]

Sec. E.801 [DELETED]

Sec. E.801.1 REPEAL

(a) 10 V.S.A. § 1 (commission on the future of economic development) is repealed.

Sec. E.801.2 [DELETED]

Sec. E.801.3 [DELETED]

Sec. E.801.4 [DELETED]

Sec. E.803 Community development block grants (Sec. B.803, #7110030000)

(a) Community development block grants shall carry forward until expended.

(b) Community development block grant (CDBG) funds shall be expended in accordance with and in the order of the following priorities.

(1) The greatest priority for the use of CDBG funds will be the creation and retention of the affordable housing and jobs.

(2) The overarching priority and fundamental objective in the use of funds for all affordable housing is to achieve perpetual affordability through the use of mechanisms that produce housing resources that will continue to remain affordable over time. It is the goal of the state to maintain at least 45 to 55 percent of CDBG fund for affordable housing applications.

(3) Among affordable housing applications, the highest priorities are to preserve and increase the supply of affordable family housing, to reduce and strive to eliminate childhood homelessness, to preserve affordable housing developments and extend their useful life, serve families and individuals at or below 30 percent HUD area median income and people with special needs. Housing for seniors should be considered a priority when it meets clear unmet needs in the region for the lowest income seniors.

(4) CDBG and other public funds are intended to create and preserve affordable housing for households for income-eligible families, seniors and those with special needs. Limited public funding must focused on these households. Therefore, funding for projects which intend to serve households which exceed the CDBG income limits shall be consistent with the Vermont housing finance agency's qualified allocation plan. (5) Preference shall be given to projects that maintain the historic settlement patterns for compact village and downtown centers separated by a rural landscape. Funds generally should not be awarded on projects that promote or constitute sprawl, defined as dispersed development outside compact urban and village centers or along highways and in rural areas.

(6) The department of economic, housing and community development may not restrict CDBG applications for housing to projects which have been previously awarded federal low income housing tax credits.

Sec. E.803.1 Sec 10a(a) of S.288 of the 2010 session is amended to read:

(a) The amount of \$100,000.00 shall be transferred to is reserved in the general fund in fiscal year 2011 2010 to cover the fiscal year 2011 costs of allocating \$100,000.00 worth of tax credits in calendar year 2010 under the downtown and village center program pursuant to 32 V.S.A. § 5930ee, which amount is <u>authorized</u> in addition to the statutory cap of \$1,700,000.00.

Sec. E.803.2 Sec. 2(a) of No. 78 of the Acts of 2010 (Vermont Recovery and Reinvestment) is amended to read:

(a) In fiscal year 2010, \$8,665,000.00 from the state fiscal stabilization fund general services fund that remains available to Vermont under the American Recovery and Reinvestment Act of 2009 (ARRA), Pub.L. No. 111-5, shall be appropriated to the secretary of administration, who is directed to transfer the funds to the department of public safety for the costs of the state police. The secretary of administration is further directed to reduce the general fund appropriation for the state police by \$8,665,000.00. From the general fund, the amount of \$8,665,000.00 §8,565,000.00 is hereby appropriated as prescribed in Secs. 3–10d of this act. The Vermont office of economic stimulus and recovery is directed to track these general fund appropriations as if they were ARRA funds.

Sec. E.805 Tourism and Marketing (Sec. B.805, #7130000000)

(a) Of the funds appropriated for tourism and marketing, \$100,000 shall be used to support the Vermont convention bureau, division of Lake Champlain Regional Chamber of Commerce.

(b) The Vermont convention bureau shall submit a report with the fiscal year 2012 budget materials that describes the outcomes established for this grant and the method of evaluating these outcomes that includes the impact of the convention bureau on the economies of the regions or counties of Vermont.

Sec. E.806 [DELETED]

Sec. E.810 10 V.S.A. § 321(c) is amended to read:

(c) On behalf of the state of Vermont, the board shall be the exclusive designated entity to seek and administer federal affordable housing funds available from the Department of Housing and Urban Development under the national Housing Trust Fund which was enacted under HR 3221, <u>Division A</u>, Title 1, Subtitle B, Section 1228 1131 of the Federal Housing Finance Regulatory and Economic Reform Act of 2008 (P.L. 110-289) to increase perpetually affordable rental housing and home ownership for low and very low income families. The board is also authorized to receive and administer federal funds or enter into cooperative agreements for a shared appreciation and/or community land trust demonstration program that increases perpetually affordable homeownership options for lower income Vermonters and promotes such options both within and outside Vermont.

Sec. E.810.1 10 V.S.A. § 311(b)(5) is amended to read:

(5) Three public members appointed by the governor with the advice and consent of the senate, who shall be residents of the state and who shall be experienced in creating affordable housing or conserving and protecting Vermont's agricultural land, historic properties, important natural areas or recreational lands, one of whom shall be a representative of lower income Vermonters and one of whom shall be a farmer as defined in subdivision 3752(7) of Title 32.

Sec. E.810.2 10 V.S.A. § 311(c) is amended to read:

(c) The public members shall serve terms of three years beginning July <u>February</u> 1 of the year of appointment. However, two of the public members first appointed by the governor shall serve initial terms of one year; and the public members first appointed by the speaker and committee on committees shall serve initial terms of two years. A vacancy occurring among the public members shall be filled by the respective appointing authority for the balance of the unexpired term. A member may be reappointed.

Sec. E.810.3 VERMONT HOUSING AND CONSERVATION BOARD-PRIVATE USE BOND CAP

(a) Sec. 22 of H.790 of 2010, An Act Relating to Capital Construction and State Bonding, appropriates funds to the Vermont housing and conservation board (VHCB) and establishes a percentage allocation between affordable housing and conservation investments it may make with such funds. However, if less than \$4,000,000 of the state's private use bond cap is made available to the VHCB for eligible affordable housing investments, VHCB may increase the amount it allocates to conservation grant awards from its capital appropriation notwithstanding Sec. 22 of H.790, provided that VHCB

increases its affordable housing investments in the same amount from the funds appropriated in Sec.B.810 as result of the allocation in Sec. D.100(a)(2) of this act.

Sec. E.810.4 COMMISSION ON FINANCING AND DELIVERY OF AFFORDABLE HOUSING AND CONSERVATION

(a) An eight-person commission is created, consisting of the following members: one member of the house of representatives appointed by the speaker of the house; one member of the senate appointed by the senate committee on committees; three citizen members who are not members of the general assembly, appointed by the speaker of the house; and three citizen members who are not members of the general assembly, appointed by the senate committee on committees. Citizen members shall be experienced in developing or financing affordable housing or conserving Vermont's working landscape and historic properties. The speaker of the house and the senate committee on committees shall appoint one citizen member as chair of the commission.

(b) The commission shall:

(1) identify the state requirements for housing and conservation programs and services administered by the Vermont state housing authority, the Vermont housing finance agency, the Vermont housing and conservation board and the Vermont department of economic development, housing and community development ("statewide entities");

(2) determine whether the statewide entities are taking the following steps to meet their respective state requirements:

(A) assembling multiple funding sources to address a full range of housing needs, including emergency, transitional, assisted living, multi-family rental, and homeownership;

(B) leveraging federal, state, private, and philanthropic resources;

(C) serving Vermonters with the lowest incomes and special needs;

(D) promoting housing and economic development in downtowns and village centers;

(3) review the report required by Executive Order Number 02-10 (March 18, 2010) that addresses the potential merger or consolidation of the statewide entities;

(4) determine the impact of a merger or consolidation of the statewide entities on the production of permanently affordable housing, land conservation, and historic preservation; and

(5) with respect to the Vermont housing and conservation board, determine whether it is fulfilling its statutory mission to develop permanently affordable housing and protect at-risk housing; to conserve Vermont's working landscape, important natural areas, and historic properties; and to build effective community-based nonprofit capacity to advance these goals.

(c) The commission may meet up to six times while the general assembly is not in session and shall hold at least one public hearing. The legislative council shall provide legal and administrative support to the commission. Commission members who are not state employees are entitled to compensation and reimbursement of expenses as provided under 32 V.S.A. § 1010 to be paid for equally by the statewide entities. By January 15, 2011, the commission shall submit a report of its findings and recommendations to the house committees on appropriations, on government operations, and on general, military affairs and housing; and the senate committees on appropriations, on government operations, and on economic development, housing and general affairs.

* * * TRANSPORTATION * * *

Sec. E.909 Transportation – central garage (Sec. B.909, #8110000200)

(a) Of this appropriation, \$6,316,751 is appropriated from the transportation equipment replacement account within the central garage fund for the purchase of equipment as authorized in 19 V.S.A. § 13(b).

Sec. E.915 Transportation – town highway aid program (Sec. B.915, #810003000)

(a) This appropriation is authorized, notwithstanding 19 V.S.A. § 306(a).

Sec. F.1 Sec. C5(b) of H.792 of the 2010, as enacted, is amended to read:

(b) The agency shall not expand the list of available <u>Medicaid</u> providers of home and community based <u>nonmedical personal</u> care services, <u>not including</u> case management or self directed services, <u>and respite care</u> to include providers other than home care agencies certified by the Centers for Medicare and Medicaid Services.

Sec. F.3 Sec. C24 of H.792 of 2010, as enacted, is amended to read:

Sec. C24. INITIATIVES; INDIVIDUALS WITH DISABILITIES, MENTAL HEALTH NEEDS, OR SUBSTANCE ABUSE ISSUES

The general assembly is supportive of the following new proposals and the proposals relating to individuals with disabilities, mental health needs, or substance abuse issues in the agency of human services addendum to the

Challenges for Change Progress Report dated March 30, 2010, and urges the agency to implement them, subject to other legislation enacted by the general assembly:

* * *

(13) <u>allowing developing</u> new residential options for individuals with developmental disabilities <u>as described in the state system of care plan;</u>

* * *

(18) redesigning service delivery to individuals <u>with developmental</u> <u>disabilities</u> in the custody of programs funded by the commissioner of disabilities, aging, and independent living under the who pose a risk to public safety criteria.

Sec. F.4 Sec. C25(b)(2) of H.792 of 2010, as enacted, is amended to read:

(2) No later than July 1, 2011, every individual in the custody of the commissioner with developmental disabilities in programs funded by the department of disabilities, aging, and independent living under the who poses a risk to public safety criteria who has not been assessed for a developmental disability within the past two years shall have his or her competency risk to public safety evaluated by a psychologist skilled in assessing developmental disabilities. The commissioner shall develop protocols for evaluating the appropriateness of less restrictive residential placements based on the results of the evaluation.

Sec. F.5 Sec. C25(c) of H.792 of 2010, as enacted, is amended to read:

(c) Individuals may appeal to the human services board as provided for in 3 V.S.A. § 3091, except that the agency shall provide an expedited hearing as described in this subsection in lieu of the hearing provided for in 3 V.S.A. § 3091(b).

(1) An individual may appeal modifications to his or her individualized service plan and budget <u>and receive continuing benefits if requested</u> within the time frames specified in existing law. If the appeal is made within the time frame provided for in existing law, the individual may receive continuing benefits upon request until a decision has been rendered.

(2) An expedited hearing shall be held no later than 11 calendar days following the date of the request for an appeal. A special, independent hearing officer shall be appointed by the agency and assigned to hear the appeals provided for under this subdivision. The agency department may contract with an attorney for its representation at these expedited hearings.

(3) <u>Hearings Expedited hearings</u> shall be conducted according to the human services board fair hearing rules, except to the extent that the rules conflict with the process provided for in this subsection.

Sec. F.6 13 V.S.A. § 4816(c) as amended by Sec. C25a of H.792 of 2010, as enacted, is amended to read:

(c) As soon as practicable after the examination has been completed, the examining psychiatrist <u>or psychologist</u>, <u>if applicable</u>, shall prepare a report containing findings in regard to each of the matters listed in subsection (a) <u>of this section</u>. The report shall be transmitted to the court issuing the order for examination, and copies of the report sent to the state's attorney, and to the respondent's attorney if the respondent is represented by counsel.

Sec. F.7 33 V.S.A. § 2031 as added by Sec. C34 of H.792 of 2010, as enacted, is amended to read:

§ 2031. CREATION OF CLINICAL UTILIZATION REVIEW BOARD

(a) No later than May 15, 2010 June 15, 2010, the department of Vermont health access shall create a 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.

* * *

Sec. F.8 Sec. D10 of H.792 of 2010, as enacted, is amended to read:

Sec. D10. DEPARTMENT OF CORRECTIONS; FACILITIES CLOSING

(a) In Except as provided in subsection (b) of this section, in fiscal year 2011, the department of corrections shall not close or substantially reduce services at a correctional facility or field office.

(b) The department of corrections may close or substantially reduce services at a correctional facility or field office between January 31, 2011, and May 1, 2011, provided that 60 days prior to the closure of a facility or a reduction in services, the secretary of administration provides such a proposal to the house committee on corrections and institutions and the senate committees on judiciary and on institutions, if the general assembly is in session, or to the joint committee on corrections oversight and the joint fiscal committee, if the general assembly has adjourned for the year.

Sec. F.9 Sec. D12 of H.792 of 2010, as enacted, is amended to read:

Sec. D12. COMMISSIONER OF CORRECTIONS; AID TO COMMUNITIES WITH A HIGH NUMBER PERCENTAGE PER CAPITA OF PEOPLE UNDER THE CUSTODY OF THE COMMISSIONER

The commissioner of corrections shall work with communities, in which a high number of people are under his or her custody, including those living in the community and those who are incarcerated residents of the community, to help the community to reduce the number of people entering into custody. For expenditures from funds reinvested pursuant to Sec. D9 of this act and Sec. 338 of H.789 of 2010 (Appropriations Act), in community level services, the commissioner shall give priority to projects located in the four communities which have the highest number percentage per capita of people under his or her custody, including those living in the community and residents who are incarcerated.

Sec. F.10 Sec. G2(b) of H.792 of 2010, as enacted, is amended to read:

(b) Pursuant to the directive contained in Act 68 No. 68 of the Acts of the 2009 Adj. Sess. (2010), it is the intent of the general assembly to improve the outcomes for economic development by:

(1) Identifying measurable results of improvement.

(2) Designing evidence-based economic development strategies to achieve these improvements and the four goals of economic development identified in 10 V.S.A. § 3.

(3) Directing available state funds to these strategies.

(4) Using objective data-based indicators to measure performance of these strategies.

Sec. F.11 24 V.S.A. § 4341(c), as enacted by Sec. G5 of H.792 of 2010, is amended to read:

(c) A municipality may withdraw <u>move</u> from a <u>one</u> regional planning commission <u>to another regional planning commission</u> on terms and conditions approved by the secretary of the agency of commerce and community development.

Sec. F.12 Sec. G6(a)(1)(D) of H.792 of 2010, as enacted, is amended to read:

(D) Two members, appointed jointly by the governor, the speaker of the house, and the president pro tempore of the senate, who have a background in municipal planning and do not currently serve on the board of a regional development corporation or a regional planning commission. The governor,

the speaker of the house, and the president pro tempore of the senate shall jointly designate one of these two members as the chair of the oversight panel and one member as the vice chair of the oversight panel.

Sec. F.13 Sec. G24(4) of H.792 of 2010, as enacted, is amended to read:

(4) From the Challenges for Change reinvestment funds that are appropriated to the secretary to implement the economic development components of this act, the secretary of administration shall reimburse the joint fiscal office <u>and the appropriate executive agency or department</u> for costs incurred to implement Sec. G10 (economic performance measures) of this act.

Sec. F.14 ECONOMIC DEVELOPMENT TARGET AND INVESTMENT

(a) Notwithstanding No. 68 of the Acts of 2009 Adj. Sess. (2010), in fiscal year 2011, the secretary of administration shall reduce total state fund appropriations related to economic development by \$965,600, and to achieve this reduction, the secretary may reduce total appropriations related to economic development by up to \$1,065,600 and may reinvest up to \$100,000 to accomplish this challenge, so long as the general fund reductions under this subsection, by the end of fiscal year 2011, equal or exceed \$965,600.

(b) Subject to the limitations on reductions contained in No. 68 of the Acts of the 2009 Adj. Sess. (2010) and H.792 of 2010 and in order to meet the overall savings of \$37,872,375, the secretary of administration shall seek \$2,064,400 of state fund reductions from Challenges for Change, other than economic development, or from new, additional Challenges for Change initiatives.

Sec. F.15 Sec. H4(d) of H.792 of 2010, as enacted, is amended to read:

(d) The governor, in achieving the outcomes and associated savings under this act and the Challenges for Change Act, may not reduce government benefits or limit benefit eligibility; and may not reduce personnel unless the personnel reduction is a direct consequence of achieving the required outcomes under the Challenges plan. The administration shall engage the direct participation of service recipients, their families, service providers, and other stakeholders to develop additional Challenges that will meet in full the outcomes and fiscal goals of the Challenges for Change Act and this act, and include a report of these additional Challenges in its July 2010 quarterly report.

Sec. F.15a Sec. H4a of H.792 of 2010, as enacted, is amended to read:

Sec. H4a. REVIEW BY JOINT FISCAL COMMITTEE

(a) The general assembly recognizes that acts of appropriations and their sources of funding reflect the priorities for expenditures of public funds enacted by the general assembly, and that reductions in expenditures.

<u>government benefits, personnel</u>, and programs which are considered as a means of accomplishing the goals of No. 68 of the Acts of the 2009 Adj. Sess. (2010), and this act ought to reflect these legislated priorities. Therefore, if the general assembly is not in session, the secretary of administration shall report to the joint fiscal committee:

(1) any proposal for a reduction in excess of five percent of the gross expenditure of the appropriated funding for any single function, program, <u>benefit</u> or service as a part of its plan of implementation of Challenges for Change, and will;

(2) any reduction in government benefits or any limit in benefit eligibility as a part of its plan of implementation of Challenges for Change; or

(3) any reduction in personnel as part of its plan of implementation of Challenges for Change, that is not a direct consequence of achieving the required outcomes under the Challenges for Change provisions in this act.

(b) The secretary of administration shall include in the report provided for under subsection (a) of this section an analysis of how the any reduction is designed to achieve the outcomes expressed in the Challenges for Change, and how the any reduction is designed to achieve legislated policy priorities.

(c) The joint fiscal committee may within 21 days after receipt of the secretary's report consider the proposed reduction in expenditures and report its approval or disapproval, and the reasons in support of its decision, to the secretary and to the general assembly. If the report is disapproved, the secretary may submit a revised plan to the joint fiscal committee for its review and approval or disapproval, or may proceed as originally proposed.

Sec. F.16 LONG-TERM MONITORING OF WASTEWATER DISCHARGE

(a) Pursuant to 3 V.S.A. § 2822(j)(2)(B)(i), the agency of natural resources charges an annual fee for the monitoring of certain wastewater discharges. Notwithstanding 3 V.S.A. § 2809, it is the intent of the general assembly to create a special fund that will be used to cover the continuing costs of monitoring in the event that the facilities monitored cease discharging wastewater. The general assembly anticipates that the special fund will be financed by a fee assessment on the facilities that are monitored prior to any cessation of their business.

Sec. G.100 EFFECTIVE DATES

(a) This section and Secs. C.100, C.100.1, C.100.2, C.101, C.102, C.103, E.100.4, E.127.2, E.220.1, E.230, E.230.1, E.309.11 (Medicare One-Time Payment), E.309.14 (Emergency Rules for DVHA), E.309.15-E.309.17 (Rx Rebates), E.309.18 (Palliative Care), E.321.4 (Emergency Rules for DCF),

E.323 (Repeal Reach Ahead sunset), E.401.1-E.401.4, E.500.1, E.501.1, E.800, E.800.1, E.801.1, E.803.1, E.803.2, E.810, E.810.3, F.7, F.10-F.13, and F.15 of this act shall take effect upon passage.

(b) Sec. E.309.5 (Catamount Health deductible, co-payment, and out-of-pocket maximum increases) shall take effect on October 1, 2010, and shall apply to all Catamount Health insurance plans on and after October 1, 2010, on such date as a health insurer offers, issues, or renews the Catamount Health insurance plan, but in no event later than October 1, 2011.

(c) Sec. E.318.1-E.318.3 shall be effective upon the enactment of S.268 of 2010.

(d) Secs. E.319.1 (OCS medical support) and E.319.2 (OCS definitions) of this act shall apply to child support cases filed on or after July 1, 2010.

(e) Sec. E.323.1 (Reach Up Sanctions) shall be implemented no earlier than October 1, 2010, in order to maximize the TANF emergency contingency funds reimbursable under the American Recovery and Reinvestment Act.

(f) Secs. E.701(a) (repeal of electronic waste collection program implementation costs) and E.701(b) (repeal of use of solid waste management account for implementation of electronic waste collection program); and E.701.1 (ANR appropriations for electronic waste collection program) of this act shall take effect as of the date of enactment of S.77 of 2010.

(g) Sec. E.127.1 (nuclear energy analysis) shall be in effect from July 1, 2008 to July 1, 2012.

(h) Sec E.810.1 is effective upon passage; however, senate consent shall be required for members appointed by the governor on February 1, 2011 and thereafter.

(i) Sec. E.810.2 is effective on passage and the terms of all public members currently appointed to the Vermont Housing and Conservation Trust Fund by the governor or general assembly under 10 V.S.A. § 311 shall be extended from June 30 to January 31.

* * * BUDGETED TAX EXPENDITURES * * *

Sec. H.1 32 V.S.A. chapter 151, subchapter 11M is added to read:

Subchapter 11M. Machinery and Equipment Investment Tax Credit

§ 593011. MACHINERY AND EQUIPMENT TAX CREDIT

(a) Definitions.

(1) "Full-time job" has the same meaning as defined in subdivision 5930b(a)(9) of this title.

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(2) "Investment period" means the period commencing January 1, 2010, and ending December 31, 2014.

(3) "Qualified capital expenditures" means expenditures properly chargeable to a capital account by a qualified taxpayer during the investment period, totaling at least \$20 million for machinery and equipment to be located and used in Vermont for creating, producing, or processing tangible personal property for sale.

(4) "Qualified taxpayer" means a taxpayer that:

(A) is an existing business on January 1, 2010 with an aggregate average annual employment, including all employees of its related business units with which it files a combined or consolidated return for Vermont income tax purposes, during the investment period of no fewer than 200 full-time jobs in Vermont;

(B) is a taxable corporation under Subchapter C of the Internal Revenue Code;

(C) is a business whose operations at the time of application to the Vermont economic progress council are located in a Rural Economic Area Partnership (REAP) zone designated by the United States Department of Agriculture Rural Development Authority, engaged primarily in the creation, production, or processing of tangible personal property for sale; and

(D) proposes to make qualified capital expenditures in a Vermont REAP zone and such expenditures will contribute substantially to the REAP zone's economy.

(5) "Qualified taxpayer's Vermont income tax liability" means the corporate income tax otherwise due on the qualified taxpayer's Vermont net income after reduction for any Vermont net operating loss as provided for under section 5832 of this title. For a qualified taxpayer that is a member of an affiliated group and that is engaged in a unitary business with one or more other members of that affiliated group, its Vermont net income includes the allocable share of the combined net income of the group.

(b) Certification.

(1) A qualified taxpayer may apply to the Vermont economic progress council for a machinery and equipment investment tax credit certification for all qualified capital expenditures in the investment period on a form prescribed by the council for this purpose.

(2) The council shall issue a certification upon determining that the applicant meets the requirements set forth in subsection (a) of this section.

(c) Amount of credit. Except as limited by subsections (e) and (f) of this section, a qualified taxpayer shall be entitled to claim against its Vermont income tax a credit in an amount equal to ten percent of the total qualified capital expenditures.

(d) Availability of credit.

(1) The credit earned under this section with respect to qualified capital expenditures shall be available to reduce the qualified taxpayer's Vermont income tax liability for its tax year beginning on or after January 1, 2012, or, if later, the first tax year within which the qualified taxpayer's aggregate qualified capital expenditures exceed \$20,000,000.00. A taxpayer claiming a credit under this subchapter shall submit with the first return on which a credit is claimed a copy of the qualified taxpayer's certification from the Vermont economic progress council.

(2) The credit may be used in the year earned or carried forward to reduce the qualified taxpayer's Vermont income tax liability in succeeding tax years ending on or before December 31, 2026.

(e) Limitations.

(1) The credit earned under this section, either alone or in combination with any other credit allowed by this chapter, may not be applied to reduce the qualified taxpayer's Vermont income tax liability in any one year by more than 80 percent, and in no event shall the credit reduce the taxpayer's income tax liability below any minimum tax imposed by this chapter.

(2) The total amount of credit authorized under this section shall be \$8,000,000.00 and in no event shall the credit in any one tax year exceed \$1,000,000.00. The credit shall be available on a first-come first-served basis by certification of the Vermont economic progress council pursuant to subsection (b) of this section.

(f) Recapture.

(1) A qualified taxpayer who has earned credit under this section with respect to its qualified capital expenditures shall notify the Vermont economic progress council in writing within 60 days if the taxpayer's trade or business is substantially curtailed in any calendar year prior to December 31, 2023.

(2) A qualified taxpayer's business shall be considered to be substantially curtailed when the average number of the taxpayer's full-time jobs in Vermont for any calendar year prior to December 31, 2023, is less than 60 percent of the highest average number of its full-time jobs in Vermont for any calendar year in the investment period. For purposes of the preceding calculation, the qualified taxpayer's full-time jobs in Vermont shall include all <u>full-time jobs in Vermont of its related business units with which it files a</u> <u>combined or consolidated return for Vermont income tax purposes. A business</u> <u>shall not be considered to be substantially curtailed when the assets of the</u> <u>business have been sold but the business continues to be located in Vermont</u> <u>provided that the employment test of this subdivision is met.</u>

(3) In the event that a qualified taxpayer has substantially curtailed its trade or business, then:

(A) the credit certification for such tax year and all succeeding tax years of the taxpayer shall be terminated;

(B) any credit previously earned and carried forward shall be disallowed; and

(C) any credit which has been previously used by the taxpayer to reduce its Vermont income tax liability shall be subject to recapture in accordance with the following table:

Years between the close of the tax yearPercent of credits to be whencredit was earned and year whenrepaid (%):

business was substantially curtailed:

<u>2 or less</u>	100
More than 2, up to 4	<u>80</u>
More than 4, up to 6	<u>60</u>
More than 6, up to 8	<u>40</u>
More than 8, up to 10	<u>20</u>
More than 10	0

(4) The recapture shall be reported on the income tax return of the taxpayer who claimed the credit for the tax year in which the taxpayer's trade or business was substantially curtailed, or the commissioner may assess the recapture in accordance with the assessment and appeal provisions provided for in subchapter 8 of this chapter.

(5) Within 60 days of the close of the qualified taxpayer's tax year in which the taxpayer's trade or business was substantially curtailed, the taxpayer may petition the commissioner for a reduction in the amount of the credit subject to recapture and the disallowance of credit previously earned and carried forward. The commissioner shall hold a hearing within 45 days of the receipt of the taxpayer's petition. The commissioner shall have the discretion to reduce the amount of the credit subject to recapture and disallowance upon a showing of circumstances that contributed to the substantial curtailment of the

taxpayer's trade or business. The decision of the commissioner shall be final and shall not be subject to judicial review.

(g) Reporting.

(1) Any qualified taxpayer who has been certified under subsection (b) of this section shall file a report with the Vermont economic progress council on a form prescribed by the council for this purpose and provide a copy of the report to the commissioner of the department of taxes.

(2) The report shall be filed for each year following the certification until the year following the last year the taxpayer claims the credit to reduce its Vermont income tax liability, or 2027, whichever occurs first.

(3) The report shall be filed by February 28 each year for activity the previous calendar year and include, at a minimum:

(A) The number of full-time jobs in each quarter and the average number of hours worked per week.

(B) The level of qualifying capital investments made if reporting on a year within an investment period; and

(C) The amount of tax credit earned and applied during the previous calendar year.

Sec. H.2 REPEAL

(a) Subchapter 11M of chapter 151 of Title 32 is repealed July 1, 2026, and no credit under that section shall be available for any taxable year beginning after June 30, 2026; provided, however, that if no qualified capital expenditures are made during the investment period, both terms as defined in 32 V.S.A. § 5930ll(a) of this act, the subchapter shall be repealed effective January 1, 2015.

Sec. H.3 EFFECTIVE DATE

(a) Sec. H.1 (machinery and equipment investment tax credit) shall apply to taxable years beginning on and after January 1, 2012.

* * * DESIGNATING OVHA AS A DEPARTMENT * * *

Sec. I.1 2 V.S.A. § 852(b)(3) is amended to read:

(3) The office department of Vermont health access.

Sec. I.2 2 V.S.A. 902(c)(1) is amended to read:

(c)(1) The commission may request analysis from the <u>office department</u> of Vermont health access, the department of banking, insurance, securities, and health care administration, and other appropriate agencies. The agencies shall

report to the commission at such times and with such information as the commission determines is necessary to fulfill its oversight responsibilities.

Sec. I.3 2 V.S.A. § 903(b)(1)(B)(ii) is amended to read:

(ii) recommend a method and format for reporting employer costs in the monthly financial reports submitted to the general assembly by the office <u>department</u> of Vermont health access;

Sec. I.4 2 V.S.A. § 903(b)(1)(C) is amended to read:

(C) The <u>office department</u> of Vermont health access shall provide the commission with access to any information requested in order to conduct the activities specified in subdivision (B) of this subdivision (1), except the following:

(i) Names, addresses, and Social Security numbers of recipients of and applicants for services administered by the office <u>department</u>.

(ii) Medical services provided to recipients.

(iii) Social and economic conditions or circumstances, except such de-identified information as the office <u>department</u> may compile in the aggregate.

(iv) Agency evaluation of personal information.

(v) Medical data, including diagnosis and past history of disease or disability.

(vi) Information received for verifying income eligibility and amount of medical assistance payments, except such de-identified information as the office department may compile in the aggregate.

(vii) Any additional types of information the office department has identified for safeguarding pursuant to the requirements of 42 C.F.R. § 431.305.

Sec. I.5 3 V.S.A. § 3002(a)(6) is amended to read:

(6) The office department of Vermont health access.

Sec. I.6 3 V.S.A. § 3004 is amended to read:

§ 3004. PERSONNEL DESIGNATION

The secretary, deputy secretary, commissioners, deputy commissioners, attorneys, directors of the offices of state economic opportunity, alcohol and drug abuse programs, Vermont health access, and child support, and all members of boards, committees, commissions, or councils attached to the agency for support are exempt from the classified state service. Except as

authorized by section 311 of this title or otherwise by law, all other positions shall be within the classified service.

Sec. I.7 3 V.S.A. § 3084(a) is amended to read:

(a) The department for children and families is created within the agency of human services as the successor to and the continuation of the department of social and rehabilitation services, the department of prevention, assistance, transition, and health access, excluding the office department of Vermont health access, the office of economic opportunity, and the office of child support. The department shall also include a division of child development programs.

Sec. I.8 3 V.S.A. § 3088 is amended to read:

§ 3088. OFFICE DEPARTMENT OF VERMONT HEALTH ACCESS

The office <u>department</u> of Vermont health access is created within the agency of human services.

Sec. I.9 3 V.S.A. § 3091(a) is amended to read:

(a) An applicant for or a recipient of assistance, benefits, or social services from the department for children and families, the office department of Vermont health access, and the department of disabilities, aging, and independent living, or the department of mental health, or an applicant for a license from one of those departments or offices, or a licensee, may file a request for a fair hearing with the human services board. An opportunity for a fair hearing will be granted to any individual requesting a hearing because his or her claim for assistance, benefits, or services is denied, or is not acted upon with reasonable promptness; or because the individual is aggrieved by any other agency action affecting his or her receipt of assistance, benefits, or services, or license or license application; or because the individual is aggrieved by agency policy as it affects his or her situation.

Sec. I.10 8 V.S.A. § 4080a(h)(2)(B) is amended to read:

(B) The commissioner's rules shall permit a carrier, including a hospital or medical service corporation and a health maintenance organization, to establish rewards, premium discounts, split benefit designs, rebates, or otherwise waive or modify applicable co-payments, deductibles, or other cost-sharing amounts in return for adherence by a member or subscriber to programs of health promotion and disease prevention. The commissioner shall consult with the commissioner of health, the director of the Blueprint for Health, and the director commissioner of the office of Vermont health access in the development of health promotion and disease prevention rules that are consistent with the Blueprint for Health. Such rules shall:

* * *

Sec. I.11 8 V.S.A. § 4080b(h)(2)(B) is amended to read:

(B) The commissioner's rules shall permit a carrier, including a hospital or medical service corporation and a health maintenance organization, to establish rewards, premium discounts, rebates, or otherwise waive or modify applicable co-payments, deductibles, or other cost-sharing amounts in return for adherence by a member or subscriber to programs of health promotion and disease prevention. The commissioner shall consult with the commissioner of health and the director commissioner of the office of Vermont health access in the development of health promotion and disease prevention rules. Such rules shall:

* * *

Sec. I.12 8 V.S.A. § 4080f(a)(9)(A)(i)(II)(aa) is amended to read:

(II)(aa) A self-employed individual who was insured through the nongroup market whose insurance coverage ended as the direct result of either the termination of a business entity owned by the individual or the individual's inability to continue in his or her line of work, if the individual produces satisfactory evidence to the <u>office department</u> of Vermont health access of the business termination or certifies by affidavit to the <u>office</u> <u>department</u> of Vermont health access that he or she is not employed and is no longer seeking employment in the same line of work;

Sec. I.13 8 V.S.A. § 4089b(h)(2) is amended to read:

(2) the director commissioner of the office of Vermont health access or a designee;

Sec. I.14 8 V.S.A. § 4185(c)(2)(B) is amended to read:

(B) the amounts provided by contract between a hospital provider and the office department of Vermont health access for similar services to recipients of Medicaid; or

Sec. I.15 9 V.S.A. § 2480h(1)(5) is amended to read:

(5) The economic services division of the department for children and families or the office department of Vermont health access or its agents or assignee acting to investigate welfare or Medicaid fraud.

Sec. I.16 12 V.S.A. § 3169(a)(3) is amended to read:

(3) whether the judgment debtor has been a recipient of assistance from the Vermont department for children and families or the office department of

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Vermont health access within the two months preceding the date of the hearing; and

Sec. I.17 12 V.S.A. § 3170(a) is amended to read:

(a) No order approving the issuance of trustee process against earnings shall be entered against a judgment debtor who was, within the two-month period preceding the hearing provided in section 3169 of this title, a recipient of assistance from the Vermont department for children and families or the office department of Vermont health access. The judgment debtor must establish this exemption at the time of hearing.

Sec. I.18 15 V.S.A. § 658(b) is amended to read:

(b) A request for support may be made by either parent, a guardian, or the department for children and families or the office <u>department</u> of Vermont health access, if a party in interest. A court may also raise the issue of support on its own motion.

Sec. I.19 18 V.S.A. § 702(c)(1) is amended to read:

(c)(1) The secretary shall establish an executive committee to advise the director of the Blueprint on creating and implementing a strategic plan for the development of the statewide system of chronic care and prevention as described under this section. The executive committee shall consist of no fewer than 10 individuals, including the commissioner of health; a representative from the department of banking, insurance, securities, and health care administration; a representative from the office department of Vermont health access; a representative from the Vermont medical society; a representative from a statewide quality assurance organization; a representative from the Vermont association of hospitals and health systems; two representatives of private health insurers; a consumer; a representative of the complementary and alternative medicine profession; a primary care professional serving low income or uninsured Vermonters; and a representative of the state employees' health plan, who shall be designated by the director of human resources and who may be an employee of the third-party administrator contracting to provide services to the state employees' health plan. In addition, the director of the commission on health care reform shall be a nonvoting member of the executive committee.

Sec. I.20 18 V.S.A. § 1130(g)(2) is amended to read:

(2) The advisory committee shall include representatives from the three largest health insurers licensed to do business in Vermont and the office <u>department</u> of Vermont health access and shall be chaired by the chief of the immunization program for the department of health.

Sec. I.21 18 V.S.A. § 4621 is amended to read:

§ 4621. DEFINITIONS

For Except as otherwise specified, for the purposes of this subchapter:

* * *

Sec. I.22 18 V.S.A. § 4622 is amended to read:

§ 4622. EVIDENCE-BASED EDUCATION PROGRAM

(a)(1) The department <u>of health</u>, in collaboration with the attorney general, the University of Vermont area health education centers program, and the <u>office department</u> of Vermont health access, shall establish an evidence-based prescription drug education program for health care professionals designed to provide information and education on the therapeutic and cost-effective utilization of prescription drugs to physicians, pharmacists, and other health care professionals authorized to prescribe and dispense prescription drugs. To the extent practicable, the program shall use the evidence-based standards developed by the blueprint for health. The department <u>of health</u> may collaborate with other states in establishing this program.

(2) The program shall notify prescribers about commonly used brandname drugs for which the patent has expired within the last 12 months or will expire within the next 12 months. The department departments of health and the office of Vermont health access shall collaborate in issuing the notices.

(3) To the extent permitted by funding, the program may include the distribution to prescribers of vouchers for samples of generic medicines used for health conditions common in Vermont.

(b) The department <u>of health</u> shall request information and collaboration from physicians, pharmacists, private insurers, hospitals, pharmacy benefit managers, the drug utilization review board, medical schools, the attorney general, and any other programs providing an evidence-based education to prescribers on prescription drugs in developing and maintaining the program.

(c) The department <u>of health</u> may contract for technical and clinical support in the development and the administration of the program from entities conducting independent research into the effectiveness of prescription drugs.

(d) The department <u>of health</u> and the attorney general shall collaborate in reviewing the marketing activities of pharmaceutical manufacturing companies in Vermont and determining appropriate funding sources for the program, including awards from suits brought by the attorney general against pharmaceutical manufacturers.

Sec. I.23 18 V.S.A. § 4632(a)(6) is amended to read:

(6) The office department of Vermont health access shall examine the data available from the office of the attorney general for relevant expenditures and determine whether and to what extent prescribing patterns by health care providers of prescribed products reimbursed by Medicaid, VHAP, Dr. Dynasaur, VermontRx, and VPharm may reflect manufacturer influence. The office department may select the data most relevant to its analysis. The office department shall report its analysis annually to the general assembly and the governor on or before October 1.

Sec. I.24 18 V.S.A. § 7401(19) is amended to read:

(19) ensure the development of chronic care services, addressing mental health and substance abuse, for children and adults and ensure the coordination of these services with other chronic care initiatives, including the Blueprint for Health, and the care coordination and case management programs of the office department of Vermont health access;

Sec. I.25 18 V.S.A. § 9351(b) and (c) are amended to read:

(b) The health information technology plan shall:

* * *

(7) integrate the information technology components of the Blueprint for Health established in chapter 13 of this title, the agency of human services' enterprise master patient index, and all other Medicaid management information systems being developed by the <u>office department</u> of Vermont health access, information technology components of the quality assurance system, the program to capitalize with loans and grants electronic medical record systems in primary care practices, and any other information technology initiatives coordinated by the secretary of administration pursuant to section <u>3 V.S.A. § 2222a of Title 3</u>; and

* * *

(c) The secretary of administration or designee shall update the plan annually to reflect emerging technologies, the state's changing needs, and such other areas as the secretary or designee deems appropriate. The secretary or designee shall solicit recommendations from Vermont Information Technology Leaders, Inc. (VITL) and other entities in order to update the health information technology plan pursuant to this section, including applicable standards, protocols, and pilot programs, and may enter into a contract or grant agreement with VITL or other entities to update some or all of the plan. Upon approval by the secretary, the updated plan shall be distributed to the commission on health care reform; the commissioner of information and

innovation; the commissioner of banking, insurance, securities, and health care administration; the director commissioner of the office of Vermont health access; the secretary of human services; the commissioner of health; the commissioner of mental health; the commissioner of disabilities, aging, and independent living; the senate committee on health and welfare; the house committee on health care; affected parties; and interested stakeholders.

Sec. I.26 18 V.S.A. § 9352(e) is amended to read:

(e) Report. No later than January 15 of each year, VITL shall file a report with the commission on health care reform; the secretary of administration; the commissioner of information and innovation; the commissioner of banking, insurance, securities, and health care administration; the <u>director commissioner</u> of the office of Vermont health access; the secretary of human services; the commissioner of health; the commissioner of mental health; the commissioner of disabilities, aging, and independent living; the senate committee on health and welfare; and the house committee on health care. The report shall include an assessment of progress in implementing health information technology in Vermont and recommendations for additional funding and legislation required. In addition, VITL shall publish minutes of VITL meetings and any other relevant information on a public website.

Sec. I.27 18 V.S.A. § 9410(a)(2)(B) is amended to read:

(B) The commissioner shall convene a working group composed of the commissioner of mental health, the director commissioner of the office of Vermont health access, health care consumers, the office of the health care ombudsman, employers and other payers, health care providers and facilities, the Vermont program for quality in health care, health insurers, and any other individual or group appointed by the commissioner to advise the commissioner on the development and implementation of the consumer health care price and quality information system.

Sec. I.28 18 V.S.A. § 9418(a) is amended to read:

(a) Except as otherwise specified, as used in this subchapter:

* * *

(3) "Contracting entity" means any entity that contracts directly or indirectly with a health care provider for either the delivery of health care services or the selling, leasing, renting, assigning, or granting of access to a contract or terms of a contract. For purposes of this subchapter, the office department of Vermont health access, health care providers, physician hospital organizations, health care facilities, and stand-alone dental plans are not contracting entities.

(4) "Covered entity" means an organization that enters into a contract with a contracting entity to gain access to a provider network contract. For purposes of this subchapter, the <u>office department</u> of Vermont health access is not a covered entity.

* * *

(14) "Payer" means any person or entity that assumes the financial risk for the payment of claims under a health care contract or the reimbursement for health care services rendered to an insured by a participating provider under the health care contract. The term "payer" does not include:

(A) the office department of Vermont health access; or

* * *

Sec. I.29 18 V.S.A. § 9421(d) is amended to read:

(d) The department's reasonable expenses of the department of banking, insurance, securities, and health care administration in administering the provisions of this section may be charged to pharmacy benefit managers in the manner provided for in section <u>8 V.S.A. §</u> 18 of Title 8. These expenses shall be allocated in proportion to the lives of Vermonters covered by each pharmacy benefit manager as reported annually to the commissioner in a manner and form prescribed by the commissioner. The department of banking, insurance, securities, and health care administration shall not charge its expenses to the pharmacy benefit manager contracting with the office department of Vermont health access if the office department of Vermont health access notifies the department of banking, insurance, securities, and health care administration of the conditions contained in its contract with a pharmacy benefit manager.

Sec. I.30 24 V.S.A. § 1173 is amended to read:

§ 1173. TOWN OR VILLAGE REPORTS

The clerk of a municipality shall supply annually each library in such municipality with two copies of the municipal report, upon its publication. The clerk shall also mail to the state library two copies thereof, and one copy each to the secretary of state, commissioner of taxes, highway board, state board of health, commissioner for children and families, director commissioner of the office of Vermont health access, auditor of accounts, and board of education. Officers making these reports shall supply the clerk of the municipality with the printed copies necessary for him or her to comply with the provisions of this section and section 1174 of this title.

Sec. I.31 32 V.S.A. § 308b(a) is amended to read:

(a) There is created within the general fund a human services caseload management reserve. Expenditures from the reserve shall be subject to an appropriation by the general assembly or approval by the emergency board. Expenditures from the reserve shall be limited to agency of human services caseload related needs primarily in the departments for children and families, of health, of mental health, and of disabilities, aging, and independent living, and in the office of Vermont health access.

Sec. I.32 32 V.S.A. § 9530 is amended to read:

§ 9530. DEFINITIONS

The following definitions shall apply throughout this chapter unless the context requires otherwise:

(1) <u>"Director"</u> <u>"Commissioner"</u> means the <u>director</u> <u>commissioner</u> of the <u>office department</u> of Vermont health access.

(2) "Division" means the division of rate setting.

* * *

Sec. I.33 32 V.S.A. § 9533(b) and (e) are amended to read:

(b) The tax shall be paid by the transferor to the <u>office department</u> of Vermont health access within 10 days after the date of the transfer, accompanied by the nursing home transferor tax form prescribed by the commissioner.

(e) Upon the receipt of the full amount of the tax, the director <u>commissioner</u> shall deposit receipts from the transferor tax in the health care trust resources fund established pursuant to 33 V.S.A. § 1956 and shall send a certificate of payment to the transferor, the transferee, and the division showing the date when the tax was received <u>33</u> V.S.A. § 1901d.

Sec. I.34 32 V.S.A. § 9535 is amended to read:

§ 9535. REVIEW AND APPEALS

(a) At any time before, or within 10 days after the date of a transfer of a nursing home, a transferor may request from the director commissioner a determination of the transferor's liability to pay or the amount of the nursing home transfer tax due. The director commissioner shall render a decision within 30 days of the receipt of all information that the director commissioner deems necessary to make a determination.

(b) Within 30 days of the date of issuance of the director's <u>commissioner's</u> determination, a transferor aggrieved by that determination may request review

by the secretary or the secretary's designee. This review shall not be subject to the provisions of $3 \cdot V.S.A.$ chapter 25 of Title 3.

Sec. I.35 32 V.S.A. § 10301(c)(2) is amended to read:

(2) contributions from the office <u>department</u> of Vermont health access, as appropriated by the general assembly; and

Sec. I.36 33 V.S.A. § 102 is amended to read:

§ 102. DEFINITIONS AND CONSTRUCTION

(a) Unless otherwise expressly provided, the words and phrases in this chapter mean:

* * *

(12) Director: the director of the office of Vermont health access.

(13) Office: the office of Vermont health access.

* * *

Sec. I.37 33 V.S.A. § 114 is amended to read:

§ 114. ALLOCATION OF PAYMENTS WHEN APPROPRIATION INSUFFICIENT

Should the funds available for assistance be insufficient to provide assistance to all those eligible, the amounts of assistance granted in any program or portion thereof shall be reduced equitably, in the discretion of the commissioner <u>for children and families</u> or the <u>director commissioner of</u> <u>Vermont health access</u> by rule.

Sec. I.38 33 V.S.A. § 121 is amended to read:

§ 121. CANCELLATION OF ASSISTANCE OR BENEFITS

If at any time the commissioner <u>for children and families</u> or the director <u>commissioner of Vermont health access</u> has reason to believe that assistance or benefits have been improperly obtained, he or she shall cause an investigation to be made and may suspend assistance or benefits pending the investigation. If on investigation the commissioner <u>for children and families</u> or the director <u>commissioner of Vermont health access</u> is satisfied that the assistance or benefits were illegally obtained, he or she shall immediately cancel them. A person having illegally obtained assistance or benefits shall not be eligible for reinstatement until his or her need has been reestablished.

Sec. I.39 33 V.S.A. § 122 is amended to read:

§ 122. RECOVERY OF PAYMENTS

(a) The amount of assistance or benefits may be changed or cancelled at any time if the commissioner <u>for children and families</u> or director the <u>commissioner of Vermont health access</u> finds that the recipient's circumstances have changed. Upon granting assistance or benefits the department <u>for children and families</u> or office the department of Vermont <u>health access</u> shall inform the recipient that changes in his or her circumstances must be promptly reported to the department.

(b) When on the death of a person receiving assistance it is found that the recipient possessed income or property in excess of that reported to the department for children and families or office the department of Vermont health access, up to double the total amount of assistance in excess of that to which the recipient was lawfully entitled may be recovered by the commissioner for children and families or director the commissioner of Vermont health access as a preferred claim from the estate of the recipient. The commissioner for children and families or director the commissioner of Vermont health access shall calculate the amount of the recovery by applying the legal interest rate to the amount of excess recovery paid, except that the recovery shall be capped at double the excess assistance paid.

(c) When the commissioner <u>for children and families</u> or <u>director the</u> <u>commissioner of Vermont health access</u> finds that a recipient of benefits received assistance in excess of that to which the recipient was lawfully entitled, because the recipient possessed income or property in excess of department standards, the commissioner <u>for children and families</u> or director <u>the commissioner of Vermont health access</u> may take actions to recover the overpayment.

(d) In the event of recovery, an amount may be retained by the commissioner <u>for children and families</u> or director <u>the commissioner of</u> <u>Vermont health access</u> in a special fund for use in offsetting program expenses and an amount equivalent to the pro rata share to which the United States of America is equitably entitled shall be paid promptly to the appropriate federal agency.

Sec. I.40 33 V.S.A. § 141(e) is amended to read:

(e) A person providing service for which compensation is paid under a state or federally-funded assistance program who requests, and receives, either actually or constructively, any payment or contribution through a payment, assessment, gift, devise, bequest, or other means, whether directly or indirectly, from either a recipient of assistance from the assistance program or from the family of the recipient shall notify the commissioner <u>for children and</u> <u>families</u> or director <u>the commissioner of Vermont health access</u>, on a form provided by him or her, of the amount of the payment or contribution and of such other information as specified by the commissioner <u>for children and</u> <u>families</u> or director <u>the commissioner of Vermont health access</u> within 10 days after the receipt of the payment or contribution or, if the payment or contribution is to become effective at some time in the future, within 10 days of the consummation of the agreement to make the payment or contribution. Failure to notify the commissioner <u>for children and families</u> or director <u>the</u> <u>commissioner of Vermont health access</u> within the time prescribed is punishable as provided in section 143 of this title.

Sec. I.41 33 V.S.A. § 143(b) and (c) are amended to read:

(b) If the person convicted is receiving assistance, benefits, or payments, the commissioner <u>for children and families</u> or director <u>the commissioner of</u> <u>Vermont health access</u> may recoup the amount of assistance or benefits wrongfully obtained by reducing the <u>assistance</u>, benefits, or payments periodically paid to the recipient, as limited by federal law, until the amount is fully recovered.

(c) If a provider of services is convicted of a violation of subsection 141(d) or (e) of this title, the director commissioner of Vermont health access shall, within 90 days of the conviction, suspend the provider from further participation in the medical assistance program administered under Title XIX of the Social Security Act for a period of four years. The suspension required by this subsection may be waived by the secretary of human services only upon a finding that the recipients served by the convicted provider would suffer substantial hardship through a denial of medical services that could not reasonably be obtained through another provider.

Sec. I.42 33 V.S.A. § 143b is amended to read:

§ 143b. EDUCATION AND INFORMATION

Within six months of the effective date of section 143a of this title, the office department of Vermont health access shall issue rules establishing a procedure for health care providers enrolled in state and federally funded medical assistance programs to obtain advisory opinions regarding coverage and reimbursement under those programs. Each advisory opinion issued by the office department of Vermont health access shall be binding on the office that department and the party or parties requesting the opinion only with regard to the specific questions posed in the opinion, the facts and information set forth in it, and the statutes and rules specifically noted in the opinion.

Sec. I.43 33 V.S.A. § 1901 is amended to read: § 1901. ADMINISTRATION OF PROGRAM

* * *

(d)(1) To enable the state to manage public resources effectively while preserving and enhancing access to health care services in the state, the office <u>department</u> of Vermont health access is authorized to serve as a publicly operated managed care organization (MCO).

(2) To the extent permitted under federal law, the <u>office department</u> of Vermont health access shall be exempt from any health maintenance organization (HMO) or MCO statutes in Vermont law and shall not be considered to be an HMO or MCO for purposes of state regulatory and reporting requirements. The MCO shall comply with the federal rules governing managed care organizations in Part 438 of Chapter IV of Title 42 of the United States Code. The Vermont rules on the primary care case management in the Medicaid program shall be amended to apply to the MCO except to the extent that the rules conflict with the federal rules.

(3) The agency of human services and <u>office department</u> of Vermont health access shall report to the health access oversight committee about implementation of Global Commitment in a manner and at a frequency to be determined by the committee. Reporting shall, at a minimum, enable the tracking of expenditures by eligibility category, the type of care received, and to the extent possible allow historical comparison with expenditures under the previous Medicaid appropriation model (by department and program) and, if appropriate, with the amounts transferred by <u>the another</u> department to the <u>office department</u> of Vermont health access. Reporting shall include spending in comparison to any applicable budget neutrality standards.

(e)(1) The department for children and families and the <u>office department</u> of Vermont health access shall monitor and evaluate and report quarterly beginning July 1, 2006 on the disenrollment in each of the Medicaid or Medicaid waiver programs subject to premiums, including:

(A) The number of beneficiaries receiving termination notices for failure to pay premiums;

(B) The number of beneficiaries terminated from coverage as a result of failure to pay premiums as of the second business day of the month following the termination notice. The number of beneficiaries terminated from coverage for nonpayment of premiums shall be reported by program and income level within each program; and

(C) The number of beneficiaries terminated from coverage as a result of failure to pay premiums whose coverage is not restored three months after the termination notice.

(2) The department <u>for children and families</u> and the <u>office department</u> <u>of Vermont health access</u> shall submit reports at the end of each quarter required by subdivision (1) of this subsection to the house and senate committees on appropriations, the senate committee on health and welfare, the house committee on human services, the health access oversight committee, and the Medicaid advisory board.

* * *

Sec. I.44 33 V.S.A. § 1901b is amended to read:

§ 1901b. PHARMACY PROGRAM ENROLLMENT

(a) The office <u>department</u> of Vermont health access and the department for children and families shall monitor actual caseloads, revenue and expenditures, anticipated caseloads, revenue and expenditures, and actual and anticipated savings from implementation of the preferred drug list, supplemental rebates, and other cost containment activities in each state pharmaceutical assistance program, including VPharm and VermontRx. The department and the office <u>departments</u> shall allocate supplemental rebate savings to each program proportionate to expenditures in each program. During the second week of each month, the office <u>department of Vermont health access</u> shall report such actual and anticipated caseload, revenue, expenditure and savings information to the joint fiscal committee and to the health access oversight committee.

(b)(1) If at any time expenditures for VPharm and VermontRx are anticipated to exceed the aggregate amount of state funds expressly appropriated for such state pharmaceutical assistance programs during any fiscal year, the office department of Vermont health access shall recommend to the joint fiscal committee and notify the health access oversight committee of a plan to cease new enrollments in VermontRx for individuals with incomes over 225 percent of the federal poverty level.

(2) If at any time expenditures for VPharm and VermontRx are anticipated to exceed the aggregate amount of state funds expressly appropriated for such state pharmaceutical assistance programs during any fiscal year, even with the cessation of new enrollments as provided for in subdivision (1) of this subsection, the office department of Vermont health access shall recommend to the joint fiscal committee and notify the health access oversight committee of a plan to cease new enrollments in the VermontRx for individuals with incomes more than 175 percent and less than 225 percent of the federal poverty level.

(3) The office's determinations of the department of Vermont health <u>access</u> under subdivisions (1) and (2) of this subsection shall be based on the information and projections reported monthly under subsection (a) of this section, and on the official revenue estimates under section <u>32 V.S.A. §</u> 305a of Title 32. An enrollment cessation plan shall be deemed approved unless the joint fiscal committee disapproves the plan after 21 days notice of the office's recommendation and financial analysis of the department of Vermont health access.

(4) Upon the approval of or failure to disapprove an enrollment cessation plan by the joint fiscal committee, the office department of Vermont health access shall cease new enrollment in VermontRx for the individuals with incomes at the appropriate level in accordance with the plan.

(c)(1) If at any time after enrollment ceases under subsection (b) of this section expenditures for VermontRx, including expenditures attributable to renewed enrollment, are anticipated, by reason of increased federal financial participation or any other reason, to be equal to or less than the aggregate amount of state funds expressly appropriated for such state pharmaceutical assistance programs during any fiscal year, the office department of Vermont health access shall recommend to the joint fiscal committee and notify the health access oversight committee of a plan to renew enrollment in VermontRx, with priority given to individuals with incomes more than 175 percent and less than 225 percent, if adequate funds are anticipated to be available for each program for the remainder of the fiscal year.

(2) The office's determination of the department of Vermont health <u>access</u> under subdivision (1) of this subsection shall be based on the information and projections reported monthly under subsection (a) of this section, and on the official revenue estimates under section <u>32 V.S.A. §</u> 305a of Title <u>32</u>. An enrollment renewal plan shall be deemed approved unless the joint fiscal committee disapproves the plan after 21 days notice of the office's recommendation and financial analysis of the department of Vermont health access.

(3) Upon the approval of, or failure to disapprove an enrollment renewal plan by the joint fiscal committee, the office department of Vermont health access shall renew enrollment in VermontRx in accordance with the plan.

(d) As used in this section:

(1) "State pharmaceutical assistance program" means any health assistance programs administered by the agency of human services providing prescription drug coverage, including but not limited to, the Medicaid program, the Vermont health access plan, VPharm, VermontRx, the state children's health insurance program, the state of Vermont AIDS medication assistance VT LEG 259081.1

program, the General Assistance program, the pharmacy discount plan program, and any other health assistance programs administered by the agency providing prescription drug coverage.

* * *

Sec. I.45 33 V.S.A. § 1901c is amended to read:

§ 1901c. MEDICAL CARE ADVISORY COMMITTEE

(a) The <u>director of the office commissioner</u> of Vermont health access shall appoint a medical care advisory committee to advise the <u>office department of</u> <u>Vermont health access</u> about health care and medical services, consistent with the requirements of federal law.

(b) The medical care advisory committee shall be given an opportunity to participate in policy development and program administration for Medicaid, the Vermont health access plan, VPharm, and VermontRx. It shall have an opportunity to review and comment upon agency policy initiatives pertaining to health care benefits and beneficiary eligibility. It also shall have the opportunity to comment on proposed rules prior to commencement of the rulemaking process and on waiver or waiver amendment applications prior to submission to the Centers for Medicare and Medicaid Services. Prior to the annual budget development process, the office department of Vermont health access shall engage the medical care advisory committee in priority setting, including consideration of scope of benefits, beneficiary eligibility, funding outlook, financing options, and possible budget recommendations.

(c) The medical care advisory committee shall make policy recommendations on office proposals of the department of Vermont health access proposals to the office department, the health access oversight committee, and the standing committees senate committee on health and welfare, and the house committee on human services. When the general assembly is not in session, the director commissioner shall respond in writing to these recommendations, a copy of which shall be provided to each of the legislative committees.

(d) During the legislative session, the <u>director commissioner</u> shall provide the committee at regularly scheduled meetings updates on the status of policy and budget proposals.

(e) The director <u>commissioner</u> shall convene the medical care advisory committee at least six times each year.

(f) At least one-third of the members of the medical care advisory committee shall be recipients of Medicaid, VHAP, or VermontRx. Such members shall receive per diem compensation and reimbursement of expenses pursuant to section <u>32 V.S.A. §</u> 1010 of <u>Title 32</u>, including costs of travel, child care, personal assistance services, and any other service necessary for participation on the committee approved by the <u>director commissioner</u>.

(g) The director commissioner shall appoint members of the medical care advisory committee for staggered three-year terms. The director commissioner may remove members of the committee who fail to attend three consecutive meetings and appoint replacements.

(h) For purposes of this section, "program administration" means annual and long-term strategic planning, including priority setting, relative to scope of benefits, beneficiary eligibility, funding outlook, financing options, and possible budget recommendations.

Sec. I.46 33 V.S.A. § 1901e is amended to read:

§ 1901e. GLOBAL COMMITMENT FUND

(a) The Global Commitment fund is created in the treasury as a special fund. The fund shall consist of the revenues received by the treasurer as payment of the actuarially certified premium from the agency of human services to the managed care organization within the <u>office department</u> of Vermont health access for the purpose of providing services under the Global Commitment for Health waiver approved by the Centers for Medicare and Medicaid Services under Section 1115 of the Social Security Act.

(b) The monies in the fund shall be disbursed as allowed by appropriation of the general assembly, and shall be disbursed by the treasurer on warrants issued by the commissioner of finance and management, when authorized by the director commissioner of the office of Vermont health access and approved by the commissioner of finance and management consistent with the interdepartmental agreements between the managed care organization within the office department of Vermont health access and departments delivering eligible services under the waiver. The office department of Vermont health access may not modify an appropriation through an interdepartmental agreement or any other mechanism. A department or agency authorized to spend monies from this fund under an interdepartmental agreement may spend monies appropriated as a base Medicaid expense for an allowable managed care organization investment under Term and Condition 40 57 of the Global Commitment for Health Medicaid Section 1115 waiver only after receiving approval from the agency of human services.

(c) At the close of the fiscal year, the agency shall provide a detailed report to the joint fiscal committee which describes the managed care organization's investments under Term and Condition $40\ 57$ of the Global Commitment for Health Medicaid Section 1115 waiver, including the amount of the investment

and the agency, department, or office <u>or departments</u> authorized to make the investment.

Sec. I.47 33 V.S.A. § 1903 is amended to read:

§ 1903. CONTRACT AUTHORIZED

(a) The <u>director of the office commissioner</u> of Vermont health access may contract with a private organization to operate, under his or her control and supervision, parts of the medical assistance program.

(b) The contract shall provide that either party may cancel it upon reasonable notice to the other party.

(c) In furtherance of the purposes of the contract, the director commissioner of Vermont health access may requisition funds for the purposes of this subchapter, with the approval of the governor, and the commissioner of finance and management shall issue a warrant in favor of the contracting party to permit the contracting party to make payments to vendors under the contract. The director commissioner of Vermont health access shall quarterly, and at other times as the commissioner of finance and management requires, render an account in a form as the commissioner of finance and management prescribes of the expenditures of moneys so advanced.

Sec. I.48 [DELETED]

Sec. I.49 33 V.S.A. § 1904 is amended to read:

§ 1904. DEFINITIONS

When used in this subchapter, unless otherwise indicated:

* * *

(4) "Director" means the director of the office of Vermont health access.

(5) "Insurer" means any insurance company, prepaid health care delivery plan, self-funded employee benefit plan, pension fund, hospital or medical service corporation, managed care organization, pharmacy benefit manager, prescription drug plan, retirement system, or similar entity that is under an obligation to make payments for medical services as a result of an injury, illness, or disease suffered by an individual.

(6)(5) "Legally liable representative" means a parent or person with an obligation of support to a recipient whether by contract, court order or statute.

(7)(6) "Provider" means any person that has entered into an agreement with the state to provide any medical service.

(8)(7) "Recipient" means any person or group of persons who receive Medicaid.

(9)(8) "Secretary" means the secretary of the agency of human services.

(10)(9) "Third party" means a person having an obligation to pay all or any portion of the medical expense incurred by a recipient at the time the medical service was provided. The obligation is not discharged by virtue of being undiscovered or undeveloped at the time a Medicaid claim is paid. Third parties include:

* * *

(11)(10) "Tobacco" means all products listed in 7 V.S.A. § 1001(3).

(12)(11) "Tobacco manufacturer" means any person engaged in the process of designing, fabricating, assembling, producing, constructing or otherwise preparing a product containing tobacco, including packaging or labeling of these products, with the intended purpose of selling the product for gain or profit. "Tobacco manufacturer" does not include persons whose activity is limited to growing natural leaf tobacco or to selling tobacco products at wholesale or retail to customers. "Tobacco manufacturer" also does not include any person who manufactures or produces firearms, dairy products, products containing alcohol or other nontobacco products, unless such person also manufactures or produces.

Sec. I.50 33 V.S.A. § 1908a(c)(1)(F) is amended to read:

(F) information to the purchaser about available consumer information and public education provided by the department of banking, insurance, securities, and health care administration and the <u>office</u> <u>department</u> of Vermont health access; and

Sec. I.51 33 V.S.A. § 1950(b) is amended to read:

(b) The secretary and the <u>director</u> <u>commissioner</u> shall interpret and administer the provisions of this subchapter so as to maximize federal financial participation and avoid disallowances of federal financial participation.

Sec. I.52 33 V.S.A. § 1951 is amended to read:

§ 1951. DEFINITIONS

As used in this subchapter:

* * *

(3) "Director" "Commissioner" means the director commissioner of the office of Vermont health access.

* * *

(12) <u>"Office"</u> <u>"Department"</u> means the <u>office department</u> of Vermont health access.

* * *

Sec. I.53 33 V.S.A. § 1952 is amended to read: § 1952. GENERAL PROVISIONS

* * *

(b) The <u>office department</u> may use not more than one percent of the assessments received under the provisions of this subchapter for necessary administrative expenses associated with this subchapter.

* * *

(f) If a health care provider fails to pay its assessments under this subchapter according to the schedule or a variation thereof adopted by the director commissioner, the director commissioner may, after notice and opportunity for hearing, deduct these assessment arrears and any late-payment penalties from Medicaid payments otherwise due to the provider. The deduction of these assessment arrears may be made in one or more installments on a schedule to be determined by the director commissioner.

Sec. I.54 33 V.S.A. § 1954 is amended to read:

§ 1954. NURSING HOME ASSESSMENT

(a) Beginning July 1, 2007, each nursing home's annual assessment shall be \$4,322.90, and beginning January 1, 2008, \$3,962.66 per bed licensed pursuant to section 7105 of this title on June 30 of the immediately preceding fiscal year. The annual assessment for each bed licensed as of the beginning of the fiscal year shall be prorated for the number of days during which the bed was actually licensed and any over payment shall be refunded to the facility. To receive the refund, a facility shall notify the director commissioner in writing of the size of the decrease in the number of its licensed beds and dates on which the beds ceased to be licensed.

(b) The office <u>department</u> shall provide written notification of the assessment amount to each nursing home. The assessment amount determined shall be considered final unless the home requests a reconsideration. Requests for reconsideration shall be subject to the provisions of section 1958 of this title.

(c) Each nursing home shall submit its assessment to the <u>office department</u> according to a schedule adopted by the <u>director commissioner</u>. The <u>director commissioner</u> may permit variations in the schedule of payment as deemed necessary.

(d) Any nursing home that fails to make a payment to the <u>office department</u> on or before the specified schedule, or under any schedule of delayed payments

established by the <u>director commissioner</u>, shall be assessed not more than \$1,000.00. The <u>director commissioner</u> may waive this late-payment assessment provided for in this subsection for good cause shown by the nursing home.

Sec. I.55 33 V.S.A. § 1955 is amended to read:

§ 1955. ICF/MR ASSESSMENT

* * *

(b) The office <u>department</u> shall provide written notification of the assessment amount to each ICF/MR. The assessment amount determined shall be considered final unless the facility requests a reconsideration. Requests for reconsideration shall be subject to the provisions of section 1958 of this title.

(c) Each ICF/MR shall remit its assessment to the <u>office department</u> according to a schedule adopted by the <u>director commissioner</u>. The <u>director commissioner</u> may permit variations in the schedule of payment as deemed necessary.

(d) Any ICF/MR that fails to make a payment to the <u>office department</u> on or before the specified schedule, or under any schedule of delayed payments established by the <u>director commissioner</u>, shall be assessed not more than \$1,000.00. The <u>director commissioner</u> may waive this late-payment assessment provided for in this subsection for good cause shown by the ICF/MR.

Sec. I.56 33 V.S.A. § 1955a is amended to read:

§ 1955a. HOME HEALTH AGENCY ASSESSMENT

(a) Beginning July 1, 2009, each home health agency's assessment shall be 17.69 percent of its net operating revenues from core home health care services, excluding revenues for services provided under Title XVIII of the federal Social Security Act. The amount of the tax shall be determined by the director commissioner based on the home health agency's most recent audited financial statements at the time of submission, a copy of which shall be provided on or before December 1 of each year to the office department. For providers who begin operations as a home health agency after January 1, 2005, the tax shall be assessed as follows:

(1) Until such time as the home health agency submits audited financial statements for its first full year of operation as a home health agency, the director commissioner, in consultation with the home health agency, shall annually estimate the amount of tax payable and shall prescribe a schedule for interim payments.

(2) At such time as the full-year audited financial statement is filed, the final assessment shall be determined, and the home health agency shall pay any underpayment or the <u>office department</u> shall refund any overpayment. The assessment for the state fiscal year in which a provider commences operations as a home health agency shall be prorated for the proportion of the state fiscal year in which the new home health agency was in operation.

(b) Each home health agency shall be notified in writing by the office <u>department</u> of the assessment made pursuant to this section. If no home health agency submits a request for reconsideration under section 1958 of this title, the assessment shall be considered final.

(c) Each home health agency shall submit its assessment to the office department according to a payment schedule adopted by the director commissioner. Variations in payment schedules shall be permitted as deemed necessary by the director commissioner.

(d) Any home health agency that fails to make a payment to the office <u>department</u> on or before the specified schedule, or under any schedule for delayed payments established by the director <u>commissioner</u>, shall be assessed not more than \$1,000.00. The director <u>commissioner</u> may waive this late payment assessment provided for in this subsection for good cause shown by the home health agency.

Sec. I.57 33 V.S.A. § 1955b is amended to read:

§ 1955b. PHARMACY ASSESSMENT

(a) Beginning July 1, 2005, each pharmacy's monthly assessment shall be \$0.10 for each prescription filled and refilled.

(b) Each pharmacy shall declare and provide supporting documentation to the director commissioner of the total number of prescriptions filled and refilled in the previous month and remit the assessment due for that month. The declaration and payment shall be due by the end of the following month.

(c) Each pharmacy shall submit its assessment payment to the office <u>department</u> monthly. Variations in payment timing shall be permitted as deemed necessary by the <u>director commissioner</u>.

(d) Any pharmacy that fails to pay an assessment to the <u>office department</u> on or before the due date shall be assessed a late payment penalty of two percent of the assessment amount for each month it remains unpaid; but late payment penalties for any one quarter shall not exceed \$500.00. The <u>director commissioner</u> may waive a penalty under this subsection for good cause shown by the pharmacy, as determined by the <u>director commissioner</u> in his or her discretion.

Sec. I.58 33 V.S.A. § 1957 is amended to read:

§ 1957. AUDITS

The director commissioner may require the submission of audited information as needed from health care providers to determine that amounts received from health care providers were correct. If an audit identifies amounts received due to errors by the office department, the director commissioner shall make payments to any health care provider which the audit reveals paid amounts it should not have been required to pay. Payments made under this section shall be made from the fund.

Sec. I.59 33 V.S.A. § 1958 is amended to read:

§ 1958. APPEALS

(a) Any health care provider may submit a written request to the office department for reconsideration of the determination of the assessment within 20 days of notice of the determination. The request shall be accompanied by written materials setting forth the basis for reconsideration. If requested, the office department shall hold a hearing within 20 days from the date on which the reconsideration request was received. The office department shall mail written notice of the date, time, and place of the hearing to the health care provider at least 10 days before the date of the hearing. On the basis of the evidence submitted to the office department or presented at the hearing, the office department shall reconsider and may adjust the assessment. Within 20 days of the hearing, the office department shall provide notice in writing to the health care provider of the final determination of the amount it is required to pay based on any adjustments made by it. Proceedings under this section are not subject to the requirements of 3 V.S.A. chapter 25 of Title 3.

(b) Upon request, the <u>director commissioner</u> shall enter into nonbinding arbitration with any health care provider dissatisfied with the <u>office's</u> <u>department's</u> decision regarding the amount it is required to pay. The arbitrator shall be selected by mutual consent, and compensation shall be provided jointly.

(c) Any health care provider may appeal the decision of the office <u>department</u> as to the amount it is required to pay either before or after arbitration, to the superior court having jurisdiction over the health care provider.

Sec. I.60 33 V.S.A. § 1971 is amended to read:

§ 1971. DEFINITIONS

As used in this subchapter:

* * *

(2) <u>"Office"</u> <u>"Department</u> of Vermont health access" means the <u>office</u> <u>department</u> administering the Medicaid program for the agency of human services and includes the managed care organization established in section 1901 of this title.

* * *

Sec. I.61 33 V.S.A. § 1997 is amended to read:

§ 1997. DEFINITIONS

As used in this subchapter:

* * *

(2) "Director" "Commissioner" means the director commissioner of the office of Vermont health access.

* * *

(4) <u>"Office"</u> <u>"Department"</u> means the <u>office department</u> of Vermont health access.

* * *

Sec. I.62 33 V.S.A. § 1998 is amended to read:

§ 1998. PHARMACY BEST PRACTICES AND COST CONTROL PROGRAM ESTABLISHED

(a) The director commissioner of the office of Vermont health access shall establish and maintain a pharmacy best practices and cost control program designed to reduce the cost of providing prescription drugs, while maintaining high quality in prescription drug therapies. The program shall include:

* * *

(8) Any other cost containment activity adopted, by rule, by the director <u>commissioner</u> that is designed to reduce the cost of providing prescription drugs while maintaining high quality in prescription drug therapies.

(b) The <u>director commissioner</u> shall implement the pharmacy best practices and cost control program for Medicaid and all other state public assistance program health benefit plans to the extent permitted by federal law.

(c)(1) The director commissioner may implement the pharmacy best practices and cost control program for any other health benefit plan within or outside this state that agrees to participate in the program. For entities in Vermont, the director commissioner shall directly or by contract implement the program through a joint pharmaceuticals purchasing consortium. The joint VT LEG 259081.1 pharmaceuticals purchasing consortium shall be offered on a voluntary basis no later than January 1, 2008, with mandatory participation by state or publicly funded, administered, or subsidized purchasers to the extent practicable and consistent with the purposes of this chapter, by January 1, 2010. If necessary, the <u>office department</u> of Vermont health access shall seek authorization from the Centers for Medicare and Medicaid to include purchases funded by Medicaid. "State or publicly funded purchasers" shall include the department of corrections, the division department of mental health, Medicaid, the Vermont Health Access Program (VHAP), Dr. Dynasaur, Vermont Rx, VPharm, Healthy Vermonters, workers' compensation, and any other state or publicly funded purchaser of prescription drugs.

(2) The director commissioner of the office of Vermont health access, and the secretary of administration shall take all steps necessary to enable Vermont's participation in joint prescription drug purchasing agreements with any other health benefit plan or organization within or outside this state that agrees to participate with Vermont in such joint purchasing agreements.

(3) The commissioner of human resources shall take all steps necessary to enable the state of Vermont to participate in joint prescription drug purchasing agreements with any other health benefit plan or organization within or outside this state that agrees to participate in such joint purchasing agreements, as may be agreed to through the bargaining process between the state of Vermont and the authorized representatives of the employees of the state of Vermont.

(4) The actions of the commissioners, the director, and the secretary shall include:

(A) active collaboration with the National Legislative Association on Prescription Drug Prices;

(B) active collaboration with the Pharmacy RFP Issuing States initiative organized by the West Virginia Public Employees Insurance Agency;

(C) the execution of any joint purchasing agreements or other contracts with any participating health benefit plan or organization within or outside the state which the <u>director</u> <u>commissioner of Vermont health access</u> determines will lower the cost of prescription drugs for Vermonters while maintaining high quality in prescription drug therapies; and

(D) with regard to participation by the state employees health benefit plan, the execution of any joint purchasing agreements or other contracts with any health benefit plan or organization within or outside the state which the director commissioner of Vermont health access determines will lower the cost of prescription drugs and provide overall quality of integrated health care services to the state employees health benefit plan and the beneficiaries of the plan, and which is negotiated through the bargaining process between the state of Vermont and the authorized representatives of the employees of the state of Vermont.

(5) The director and the commissioner commissioners of human resources and of Vermont health access may renegotiate and amend existing contracts to which the office departments of Vermont health access and the department of human resources are parties if such renegotiation and amendment will be of economic benefit to the health benefit plans subject to such contracts, and to the beneficiaries of such plans. Any renegotiated or substituted contract shall be designed to improve the overall quality of integrated health care services provided to beneficiaries of such plans.

(6) The director, the commissioners, and the secretary shall report quarterly to the health access oversight committee and the joint fiscal committee on their progress in securing Vermont's participation in such joint purchasing agreements.

(7) The director commissioner of Vermont health access, the commissioner of human resources, the commissioner of banking, insurance, securities, and health care administration, and the secretary of human services shall establish a collaborative process with the Vermont medical society, pharmacists, health insurers, consumers, employer organizations and other health benefit plan sponsors, the National Legislative Association on Prescription Drug Prices, pharmaceutical manufacturer organizations, and other interested parties designed to consider and make recommendations to reduce the cost of prescription drugs for all Vermonters.

(d) A participating health benefit plan other than a state public assistance program may agree with the director commissioner to limit the plan's participation to one or more program components. The director commissioner shall supervise the implementation and operation of the pharmacy best practices and cost control program, including developing and maintaining the preferred drug list, to carry out the provisions of the subchapter. The director commissioner may include such insured or self-insured health benefit plans as agree to use the preferred drug list or otherwise participate in the provisions of this subchapter. The purpose of this subchapter is to reduce the cost of providing prescription drugs while maintaining high quality in prescription drug therapies.

(e) The director <u>commissioner</u> of the office of Vermont health access shall develop procedures for the coordination of state public assistance program health benefit plan benefits with pharmaceutical manufacturer patient assistance programs offering free or low cost prescription drugs, including the

development of a proposed single application form for such programs. The director commissioner may contract with a nongovernmental organization to develop the single application form.

(f)(1) The drug utilization review board shall make recommendations to the director commissioner for the adoption of the preferred drug list. The board's recommendations shall be based upon evidence-based considerations of clinical efficacy, adverse side effects, safety, appropriate clinical trials, and cost-effectiveness. "Evidence-based" shall have the same meaning as in section 18 V.S.A. § 4622 of Title 18. The director commissioner shall provide the board with evidence-based information about clinical efficacy, adverse side effects, safety, and appropriate clinical trials, and shall provide information about cost-effectiveness of available drugs in the same therapeutic class.

* * *

(3) To the extent feasible, the board shall review all drug classes included in the preferred drug list at least every 12 months, and may recommend that the <u>director commissioner</u> make additions to or deletions from the preferred drug list.

* * *

(6) The director commissioner shall encourage participation in the joint purchasing consortium by inviting representatives of the programs and entities specified in subdivision (c)(1) of this section to participate as observers or nonvoting members in the drug utilization review board, and by inviting the representatives to use the preferred drug list in connection with the plans' prescription drug coverage.

(g) The office <u>department</u> shall seek assistance from entities conducting independent research into the effectiveness of prescription drugs to provide technical and clinical support in the development and the administration of the preferred drug list and the evidence-based education program established in subchapter 2 of chapter 91 of Title 18.

Sec. I.63 33 V.S.A. § 2000 is amended to read:

§ 2000. PHARMACY BENEFIT MANAGEMENT

The director <u>commissioner</u> may implement all or a portion of the pharmacy best practices and cost control program through a contract with a third party with expertise in the management of pharmacy benefits.

Sec. I.64 33 V.S.A. § 2001 is amended to read:

§ 2001. LEGISLATIVE OVERSIGHT

(a) In connection with the pharmacy best practices and cost control program, the director commissioner of the office of Vermont health access shall report for review by the health access oversight committee, prior to initial implementation, and prior to any subsequent modifications:

* * *

(c) The director commissioner of the office of Vermont health access shall report quarterly to the health access oversight committee concerning the following aspects of the pharmacy best practices and cost control program:

* * *

(e)(1) [Repealed.]

(2) The director commissioner shall not enter into a contract with a pharmacy benefit manager unless the pharmacy benefit manager has agreed to disclose to the director commissioner the terms and the financial impact on Vermont and on Vermont beneficiaries of:

* * *

(3) The director commissioner shall not enter into a contract with a pharmacy benefit manager who has entered into an agreement or engaged in a practice described in subdivision (2) of this subsection, unless the director commissioner determines, and certifies in the fiscal report required by subdivision (d)(4) of this section, that such agreement or practice furthers the financial interests of Vermont, and does not adversely affect the medical interests of Vermont beneficiaries.

Sec. I.65 33 V.S.A. § 2002 is amended to read:

§ 2002. SUPPLEMENTAL REBATES

(a) The director commissioner of the office of Vermont health access, separately or in concert with the authorized representatives of any participating health benefit plan, shall use the preferred drug list authorized by the pharmacy best practices and cost control program to negotiate with pharmaceutical companies for the payment to the director commissioner of supplemental rebates or price discounts for Medicaid and for any other state public assistance health benefit plans designated by the director commissioner, in addition to those required by Title XIX of the Social Security Act. The director commissioner may also use the preferred drug list to negotiate for the payment of rebates or price discounts in connection with drugs covered under any other participating health benefit plan within or outside this state, provided

that such negotiations and any subsequent agreement shall comply with the provisions of 42 U.S.C. § 1396r-8. The program, or such portions of the program as the director commissioner shall designate, shall constitute a state pharmaceutical assistance program under 42 U.S.C. § 1396r-8(c)(1)(C).

(b) The director commissioner shall negotiate supplemental rebates, price discounts, and other mechanisms to reduce net prescription drug costs by means of any negotiation strategy which the director commissioner determines will result in the maximum economic benefit to the program and to consumers in this state, while maintaining access to high quality prescription drug therapies. The director commissioner may negotiate through a purchasing pool or directly with manufacturers. The provisions of this subsection do not authorize agreements with pharmaceutical manufacturers whereby financial support for medical services covered by the Medicaid program is accepted as consideration for placement of one or more prescription drugs on the preferred drug list.

(c) The <u>office department</u> of Vermont health access shall prohibit the public disclosure of information revealing company-identifiable trade secrets (including rebate and supplemental rebate amounts, and manufacturer's pricing) obtained by the <u>office department</u>, and by any officer, employee, or contractor of the department in the course of negotiations conducted pursuant to this section. Such confidential information shall be exempt from public disclosure under subchapter 3 of chapter 5 of Title 1 (open records law).

Sec. I.66 33 V.S.A. § 2003 is amended to read:

§ 2003. PHARMACY DISCOUNT PLANS

(a) The director commissioner of the office of Vermont health access shall implement pharmacy discount plans, to be known as the "Healthy Vermonters" program, for Vermonters without adequate coverage for prescription drugs. The provisions of subchapter 8 of this chapter shall apply to the director's commissioner's authority to administer the pharmacy discount plans established by this section.

* * *

(c) As used in this section:

* * *

(7) "Rebate amount" means the rebate negotiated by the director <u>commissioner</u> and required from a drug manufacturer or labeler under this section. In determining the appropriate rebate, the director <u>commissioner</u> shall:

* * *

(8) "Secondary discounted cost" means, under the Healthy Vermonters program, the price of the drug based on the Medicaid fee schedule, less payment by the state of at least two percent of the Medicaid rate, less any rebate amount negotiated by the director commissioner and paid for out of the Healthy Vermonters dedicated fund established under subsection (j) of this section and, under the Healthy Vermonters Plus program, the average wholesale price of the drug, less payment by the state of at least two percent of the Medicaid rate, less any rebate amount negotiated by the director commissioner and paid for out of the Healthy Vermonters dedicated fund established under subsection (j) of the state of at least two percent of the Medicaid rate, less any rebate amount negotiated by the director commissioner and paid for out of the Healthy Vermonters dedicated fund established under subsection (j).

* * *

(e) The Vermont board of pharmacy shall adopt standards of practice requiring disclosure by participating retail pharmacies to beneficiaries of the amount of savings provided as a result of the pharmacy discount plans. The standards must consider and protect information that is proprietary in nature. The office department of Vermont health access may not impose transaction charges under this program on pharmacies that submit claims or receive payments under the plans. Pharmacies shall submit claims to the department to verify the amount charged to beneficiaries under the plans. On a weekly or biweekly basis, the office department must reimburse pharmacies for the difference between the initial discounted price or the average wholesale price and the secondary discounted price provided to beneficiaries.

(f) The names of drug manufacturers and labelers who do and do not enter into rebate agreements under pharmacy discount plans are public information. The <u>office department</u> of Vermont health access shall release this information to health care providers and the public on a regular basis and shall publicize participation by manufacturers and labelers. The <u>office department</u> shall impose prior authorization requirements in the Medicaid program, as permitted by law, to the extent the <u>office department</u> determines it is appropriate to do so in order to encourage manufacturer and labeler participation in the pharmacy discount plans and so long as the additional prior authorization requirements remain consistent with the goals of the Medicaid program and the requirements of Title XIX of the federal Social Security Act.

(g) The director commissioner of the office of Vermont health access shall establish, by rule, a process to resolve discrepancies in rebate amounts claimed by manufacturers, labelers, pharmacies, and the office department.

(h) The Healthy Vermonters dedicated fund is established to receive revenue from manufacturers and labelers who pay rebates as provided in this section and any appropriations or allocations designated for the fund. The purposes of the fund are to reimburse retail pharmacies for discounted prices

provided to individuals enrolled in the pharmacy discount plans; and to reimburse the office department of Vermont health access for contracted services, including pharmacy claims processing fees, administrative and associated computer costs, and other reasonable program costs. The fund is a nonlapsing dedicated fund. Interest on fund balances accrues to the fund. Surplus funds in the fund must be used for the benefit of the program.

(i) Annually, the <u>office department</u> of Vermont health access shall report the enrollment and financial status of the pharmacy discount plans to the health access oversight committee by September 1, and to the general assembly by January 1.

(j) The office department of Vermont health access shall undertake outreach efforts to build public awareness of the pharmacy discount plans and maximize enrollment. Outreach efforts shall include steps to educate retail pharmacists on the purposes of the Healthy Vermonters dedicated fund, in particular as it relates to pharmacy reimbursements for discounted prices provided to program enrollees. The office department may adjust the requirements and terms of the pharmacy discount plans to accommodate any new federally funded prescription drug programs.

(k) The <u>office department</u> of Vermont health access may contract with a third party or third parties to administer any or all components of the pharmacy discount plans, including outreach, eligibility, claims, administration, and rebate recovery and redistribution.

(1) The <u>office department</u> of Vermont health access shall administer the pharmacy discount plans and other medical and pharmaceutical assistance programs under this title in a manner advantageous to the programs and enrollees. In implementing this section, the <u>office department</u> may coordinate the other programs and the pharmacy discount plans and may take actions to enhance efficiency, reduce the cost of prescription drugs, and maximize benefits to the programs and enrollees, including providing the benefits of pharmacy discount plans to enrollees in other programs.

(m) The office department of Vermont health access may adopt rules to implement the provisions of this section.

(n) The office department of Vermont health access shall seek a waiver from the Centers for Medicare and Medicaid Services (CMS) requesting authorization necessary to implement the provisions of this section, including application of manufacturer and labeler rebates to the pharmacy discount plans. The secondary discounted cost shall not be available to beneficiaries of the pharmacy discount plans until the office department receives written notification from CMS that the waiver requested under this section has been approved and until the general assembly subsequently approves all aspects of VT LEG 259081.1

the pharmacy discount plans, including funding for positions and related operating costs associated with eligibility determinations.

Sec. I.67 33 V.S.A. § 2004(a) is amended to read:

(a) Annually, each pharmaceutical manufacturer or labeler of prescription drugs that are paid for by the office department of Vermont health access for individuals participating in Medicaid, the Vermont Health Access Program, Dr. Dynasaur, VPharm, or Vermont Rx shall pay a fee to the agency of human services. The fee shall be 0.5 percent of the previous calendar year's prescription drug spending by the office department and shall be assessed based on manufacturer labeler codes as used in the Medicaid rebate program.

Sec. I.68 33 V.S.A. § 2007 is amended to read:

§ 2007. CANADIAN PRESCRIPTION DRUG INFORMATION PROGRAM

The office <u>department</u> of Vermont health access shall establish a website and prepare written information to offer guidance to Vermont residents seeking information about ordering prescription drugs through the mail or otherwise from a participating Canadian pharmacy.

Sec. I.69 33 V.S.A. § 2010 is amended to read:

§ 2010. ACTUAL PRICE DISCLOSURE AND CERTIFICATION

(a) A manufacturer of prescription drugs dispensed in this state under a health program directed or administered by the state shall, on a quarterly basis, report by National Drug Code the following pharmaceutical pricing criteria to the director commissioner of the office of Vermont health access for each of its drugs:

* * *

(b) When reporting the prices as provided for in subsection (a) of this section, the manufacturer shall include a summary of its methodology in determining the price. The office department may accept the standards of the National Drug Rebate agreement entered into by the U.S. Department of Health and Human Services and Section 1927 of the Social Security Act for reporting pricing methodology.

(c) The pricing information required under this section is for drugs defined under the Medicaid drug rebate program and must be submitted to the director <u>commissioner</u> following its submission to the federal government in accordance with 42 U.S.C. § 1396r-8(b)(3).

(d) When a manufacturer of prescription drugs dispensed in this state reports the information required under subsection (a) of this section, the president, chief executive officer, or a designated employee of the

manufacturer shall certify to the office department, on a form provided by the director commissioner of the office of Vermont health access, that the reported prices are the same as those reported to the federal government as required by 42 U.S.C. § 1396r-8(b)(3) for the applicable rebate period. A designated employee shall be an employee who reports directly to the chief executive officer or president and who has been delegated to make the certification under this section.

(e) Notwithstanding any provision of law to the contrary, information submitted to the office department under this section is confidential and is not a public record as defined in subsection <u>1 V.S.A. §</u> 317(b) of Title <u>1</u>. Disclosure may be made by the office department to an entity providing services to the office department under this section; however, that disclosure does not change the confidential status of the information. The information may be used by the entity only for the purpose specified by the office department in its contract with the entity. Data compiled in aggregate form by the office department for the purposes of reporting required by this section are public records as defined in subsection <u>1 V.S.A. §</u> 317(b) of Title <u>1</u>, provided they do not reveal trade information protected by state or federal law.

* * *

Sec. I.70 33 V.S.A. § 2071 is amended to read:

§ 2071. DEFINITIONS

For purposes of this subchapter:

* * *

(4) <u>"OVHA"</u> <u>"DVHA"</u> means the <u>office department</u> of Vermont health access.

* * *

Sec. I.71 33 V.S.A. § 2073 is amended to read:

§ 2073. VPHARM ASSISTANCE PROGRAM

* * *

(c) VPharm shall provide supplemental benefits by paying or subsidizing:

* * *

(4) pharmaceuticals that are not covered after the individual has exhausted the Medicare part D prescription drug plan's appeal process or the prescription drug plan's transition plan approved by the Centers for Medicare and Medicaid Services, and that are deemed medically necessary by the individual's prescriber in a manner established by the <u>director commissioner</u> of

the office of Vermont health access. The coverage decision under this subdivision shall not be subject to the exceptions process established under Medicaid. An individual may appeal to the human services board or pursue any other remedies provided by law.

* * *

(e) In order to ensure the appropriate payment of claims, OVHA DVHA may expand the Medicare advocacy program established under chapter 67 of this title to individuals receiving benefits from the VPharm program.

* * *

Sec. I.72 33 V.S.A. § 2074 is amended to read:

§ 2074. VERMONTRX PROGRAM

(a) Effective January 1, 2006, VermontRx is established within the office department of Vermont health access (DVHA) and shall be the continuation of the state pharmaceutical programs in existence upon passage of this subchapter for those individuals not eligible for Medicare part D. VermontRx is a pharmaceutical assistance program for individuals age 65 or older who are not eligible for Medicare and for individuals with disabilities who are receiving Social Security disability benefits and who are not eligible for Medicare. VermontRx may retain the current program names of VHAP-Pharmacy, VScript, and VScript Expanded if it is cost-effective to retain the current names in lieu of combining the current programs into one program.

(1) The program shall be administered by OVHA DVHA which, to the extent funding permits, shall establish application, eligibility, coverage, and payment standards. In addition to the general eligibility requirements established in section 2072 of this title, an individual must not be eligible for Medicare in order to be eligible for benefits under VermontRx.

(2) To the extent necessary under federal law, OVHA DVHA shall administer VermontRx in such a manner as to ensure that any permissible federal funding may be received to support the program. OVHA DVHA may establish a division of the VermontRx program to administer federal Medicaid funds separately in accordance with a federal waiver pursuant to Section 1115 of the Social Security Act.

(3) If permissible under federal law, OVHA <u>DVHA</u> shall use the same forms and application process for individuals to enroll in VermontRx, regardless of the funding source for the program.

* * *

(e) Under VermontRx, a pharmaceutical may be dispensed to an eligible recipient provided such dispensing is pursuant to and in accordance with any contractual arrangement that OVHA DVHA may enter into or approve for the group discount purchase of pharmaceuticals. When a person or business located in Vermont and employing citizens of this state has submitted a bid for the group discount purchase of pharmaceuticals and has not been selected, the director commissioner of OVHA DVHA shall record the reason for nonselection. The director's commissioner's report shall be a public record available to any interested person. All bids or quotations shall be kept on file in the director's commissioner's office and open to public inspection.

Sec. I.73 33 V.S.A. § 2076(c) is amended to read:

(c) OVHA DVHA shall seek any waivers of federal law, rule, or regulation necessary to implement the provisions of this section.

Sec. I.74 33 V.S.A. § 2077 is amended to read:

§ 2077. ADMINISTRATION

(a) The programs established under this subchapter shall be designed to provide maximum access to program participants, to incorporate mechanisms that are easily understood and require minimum effort for applicants and health care providers, and to promote quality, efficiency, and effectiveness through cost controls and utilization review. Applications may be filed at any time and shall be reviewed annually. OVHA DVHA may contract with a fiscal agent for the purpose of processing claims and performing related functions required in the administration of the pharmaceutical programs established under this subchapter.

(b) Upon determining that an applicant is eligible under this subchapter, OVHA DVHA shall issue an identification card to the applicant.

(c) A pharmacy which dispenses a pharmaceutical to an individual eligible for a pharmaceutical program established under this subchapter shall collect payment for the pharmaceutical from OVHA DVHA.

Sec. I.75 33 V.S.A. § 2081(b) is amended to read:

(b) OVHA DVHA shall report on the status of the pharmaceutical assistance programs established by this subchapter to the health access oversight committee.

Sec. I.76 33 V.S.A. § 6501 is amended to read:

§ 6501. DEFINITIONS

For purposes of this chapter:

(1) "Balance bill" means to charge to or collect from a Medicare or general assistance beneficiary any amount in excess of the reasonable charge for that service as determined by the United States Secretary of Health and Human Services, or the director commissioner of the office of Vermont health access, as the case may be.

* * *

Sec. I.77 33 V.S.A. § 6703 is amended to read:

§ 6703. CONTRACT FOR SERVICES

(a) Subject to the provisions of subsection (b) of this section, the director <u>commissioner</u> of the office of Vermont health access shall contract on an annual basis with individuals or private organizations to provide services authorized by this chapter to dual eligible individuals including pursuit of subrogation claims under section 6705 of this chapter.

(b) The <u>director commissioner</u> shall not be required to enter into contracts under this section if:

(1) the amount of the state's share of recoveries to the Medicaid program from awards obtained under this chapter during the preceding year did not exceed the payments to the contractors during that year; and

(2) the <u>director commissioner</u> determines that the program is not accomplishing its goal of protecting dual eligible individuals from improper denials of Medicare coverage. The <u>director commissioner</u> shall base his or her determination under this subdivision on information obtained from the contractors, providers of health care, area agencies on aging, and other individuals and organizations affected by the program.

Sec. I.78 33 V.S.A. § 6705 is amended to read:

§ 6705. SUBROGATION

(a) Upon furnishing medical assistance under chapter 19 of this title to any individual, the office department of Vermont health access shall be subrogated, to the extent of the expenditure for medical care furnished, to any rights such individual may have to third party reimbursement for such care.

(b) The office <u>department</u> of Vermont health access or its designee shall be entitled to obtain from any medical service provider any records of the treatment of any individual covered by subsection (a) of this section which are in any way relevant to the treatment paid for through medical assistance without regard to any other privilege or right of confidentiality or privacy which may exist. The <u>office department</u> shall ensure that any records obtained

are not released to any other individual, agency or other entity except insofar as is necessary to pursue the office's department's rights of subrogation.

(c) The <u>office department</u> of Vermont health access may contract with a private attorney or attorneys, or other private persons, for the purpose of obtaining third party reimbursement for Medicaid expenditures under this section. In awarding contracts under this section, the <u>office department</u> shall give preference to bidders who maintain a place of business in this state.

Sec. I.79 33 V.S.A. chapter 4 is added to read:

CHAPTER 4. DEPARTMENT OF VERMONT HEALTH ACCESS

<u>§ 401. COMPOSITION OF DEPARTMENT</u>

<u>The department of Vermont health access, created under 3 V.S.A. § 3088,</u> <u>shall consist of the commissioner of Vermont health access, the medical</u> <u>director, and all divisions within the department, including the divisions of</u> <u>managed care; health care reform; and Medicaid policy, fiscal, and support</u> <u>services.</u>

Approved: June 3, 2010