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*Kristin L. Clouser, Secretary*

Interagency Committee On Administrative Rules (ICAR) Agenda  
Friday, February 23, 2024, 1:00 p.m.

To attend virtually via Microsoft Teams, please [click here to join the meeting](#) for full meeting audio and visual. Meeting ID: 258 213 386 215#, Passcode: krX4KR. If you require a call-in option to participate (e.g., the computer does not have a microphone), dial 802-828-7667 and enter Phone Conference ID: 829 388 718#.

Physical meeting location suspended until July 1, 2024 due to [Open Meeting Law temporary provisions](#).

- Welcome and introduction of newest ICAR member appointed by Governor Scott, Natalie Weill from the Agency of Human Services
- Review and approval of the [minutes](#) from the January 8, 2024 meeting
- Note any additions or deletions from the agenda
- Note the following emergency rules were supported by ICAR Chair Brown on 01/24/24:
  1. Rules Governing Medication-Assisted Treatment for Opioid Use Disorder, Department of Health
    - a. This emergency rule eliminates the X Waiver requirements, which can no longer be met due to federal changes. This update will ensure Vermont's MAT regulations do not inhibit access to MAT providers by those in need.
    - b. On December 29, 2022, Congress eliminated the federal requirement for healthcare providers who dispense medication for opioid use disorder to obtain an "X Waiver" prior to dispensing buprenorphine and ended the program that issued those waivers. However, the legislation does not impact current state regulations; the current (non-emergency) Vermont MAT regulations still require providers to obtain this X Waiver (which is no longer obtainable) in order to dispense buprenorphine to treat substance use disorder. This emergency rule eliminates the X Waiver requirements. Doing so will ensure Vermont's MAT regulations do not inhibit access to MAT providers by those in need. The regular rulemaking is currently in process and will be completed before this e-rule expires.
  2. Reportable and Communicable Diseases Rule, Department of Health
    - a. This rule adds Mpox to the list of reportable diseases, due to the virus' increased public health threat. This also reduces the administrative burden for reporters by eliminating the need to report negative COVID results.
    - b. This rulemaking does the following: 1) Removes the requirement to report negative and indeterminate SARS-CoV-2 results to the Department of Health, the lab test to determine if someone has COVID-19; 2) Changes the required reporting period for positive SARS-CoV-2 results from "immediately" to "within 24 hours"; 3) Adds the virus Mpox to the list of reportable



diseases and the associated laboratory finding, Non-variola Orthopoxvirus, to the list of reportable laboratory findings; 4) Clarifies that immediate reporting for identified diseases and laboratory findings means they must be reported by telephone to the Department; and 5) Clarifies the difference between the laboratory finding that causes the virus SARS and the laboratory finding that causes the virus COVID-19.

- Public comment
- Presentation of the following proposed rules:
  1. Aboveground Storage Tank Rules, Agency of Natural Resources, Department of Environmental Conservation
    - a. This rule is required in 10 V.S.A. section 1929a(c). The existing rule enables the Agency to regulate the design and installation of new aboveground storage tank systems and substantial alterations of existing tank systems that store petroleum fuel oil. The rule also requires periodic tank system inspections, establishes criteria for inspection, and includes a formal requirement to report certain noncompliance and designate noncompliant tank systems as unfillable. The proposed amended rule makes certain technical changes and clarifications and allows more flexibility when noncompliant tanks are identified, allowing for temporary limited deliveries of fuel to certain noncompliant tanks. Although continued operation of noncompliant tanks is potentially problematic, immediate prohibition of deliveries of fuel oil to a residence with only that single source of heat creates other serious problems for health and safety of Vermont residents.
  2. Unused Drug Repository Rule, Agency of Human Services, Department of Health
    - a. This rulemaking establishes the requirements for the administration of, and participation in, the Unused Drug Repository program. The purpose of this program is to get medicine to those who need it and who may have difficulty affording it. This Program will collect, inspect, and dispense medicine to patients, with priority given to those who meet the statutory criteria. This rulemaking outlines the program requirements for the Program Administrator, Collection Sites, Dispensing Sites, donors, and recipients.
  3. Improved Tracking of Workplace Injuries and Illnesses, Vermont Department of Labor
    - a. OSHA is amending its occupational injury and illness recordkeeping regulation to require certain employers to electronically submit injury and illness information to OSHA that employers are already required to keep under the recordkeeping regulation. Specifically, OSHA is amending its regulation to require establishments with 100 or more employees in certain designated industries to electronically submit information from their OSHA Forms 300 and 301 to OSHA once a year. OSHA will not collect employee names or addresses, names of health care professionals, or names and addresses of facilities where treatment was provided if treatment was provided away from the worksite from the Forms 300 and 301. OSHA intends to post this information - after redacting appropriate personal and medically protected information - on its website accessible by the public.
  4. Reportable and Communicable Diseases Rule, Agency of Human Services, Department of Health
    - a. This rulemaking does the following: 1) Modifies the content contained in reports to include additional information if requested; 2) Removes the requirement to report negative and indeterminate SARS-CoV-2, the lab test for COVID-19, results to the Department of Health (Department); 3) Changes the required reporting period for positive SARS-CoV-2 results and COVID-19 from "immediately" to "within 24 hours"; 4) Adds Mpox to the list of reportable diseases and the associated laboratory finding, Non-variola Orthopoxvirus, to the list of reportable laboratory findings; 5) Clarifies that immediate reporting for identified diseases and laboratory findings means they must be reported by telephone to the Department; 6) Requires



additional organisms to be sent to the Department Laboratory; 7) Updates and clarifies various other human and animal diseases, syndromes, and laboratory findings required to be reported to the Department; and 8) Reorganizes the rule for clarity.

5. Rule 3.300 Disconnection of Residential Gas, Electric and Water Service, Vermont Public Utility Commission
    - a. The proposed amendments bring the Public Utility Commission's disconnection rules into alignment with Act 47 to allow for remote disconnections and require utilities to contact owners of rental properties when conducting a disconnection. The rule amendments also modernize the disconnection notification process by allowing utilities to contact affected customers with SMS text messages and emails instead of only telephone calls.
  6. Rule 3.400 Disconnection of Cable Television Service and Non-Residential Electric, Gas and Water Service, Vermont Public Utility Commission
    - a. The proposed amendments bring the Public Utility Commission's disconnection rules into alignment with Act 47 to allow for remote disconnections and require utilities to contact owners of rental properties when conducting a disconnection. The rule amendments also modernize the disconnection notification process by allowing utilities to contact affected customers with SMS text messages and emails instead of only telephone calls.
- Other business
  - Next meeting date: Monday, March 11, 2024 at 2:00 p.m.
  - Adjournment

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