



# Executive Committee Meeting

Virginia Board of Medicine  
April 3, 2026  
8:30 a.m.



**UPDATED**  
**Executive Committee**  
**Friday, April 3, 2026 @ 8:30 a.m.**  
**Perimeter Center**  
**9960 Mayland Drive, Suite 201, Board Room 4**  
**Henrico, VA 23233**

**Call to Order and Roll Call**

**Emergency Egress Procedures**..... i

**\*Public Hearing on Proposed Regulations for Removing Physician Names from PA Prescriptions**

**Approval of Minutes from August 1, 2025** ..... 1

**Adoption of Agenda**

**Public Comment on Agenda Items**

**DHP Director’s Report – David Brown, DC** ..... 8

**Reports of President and Executive Director**

- ♦ **President – Peter Apel, MD** ..... 9
- ♦ **Executive Director - William L. Harp, MD**..... 10

**New Business**

- 1. Legislative Report as of March 18, 2026**..... 11
- 2. Regulatory Actions as of March 18, 2026** ..... 17
- 3. Consideration of Petition for Rulemaking – Implanted Medical Devices** ..... 21
- 4. Consideration of amendment to election date, terms of office for officers of the Board**..... 34
- 5. Possible Consideration of Pre-Hearing Consent Order(s)**..... ---
- 6. Announcements/Reminders** ..... 40
- 7. Adjourn**



**PERIMETER CENTER CONFERENCE CENTER  
EMERGENCY EVACUATION OF BOARD AND TRAINING ROOMS**  
(Script to be read at the beginning of each meeting.)

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**Board Room 4**

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**Agenda Item:**    **Approval of Minutes of the August 1, 2025**

**Staff Note:**        Draft minutes that have been posted on Regulatory Townhall and the Board's website are presented.    Review and revise if necessary.

**Action:**             Motion to approve minutes.

**VIRGINIA BOARD OF MEDICINE  
EXECUTIVE COMMITTEE MINUTES**

Friday, August 1, 2025

Department of Health Professions

Henrico, VA

- CALL TO ORDER:** Dr. Apel called the Executive Committee to order at 8:33 a.m.
- ROLL CALL:** Ms. Brown called the roll; a quorum was established.
- MEMBERS PRESENT:** Peter Apel, MD – President  
John R. Clements, DPM  
Deborah DeMoss Fonseca  
L. Blanton Marchese  
Kenneth McDowell, DO – Secretary-Treasurer  
Jennifer Rathmann, DC
- MEMBERS ABSENT:** William Hutchens, MD  
Leroy Vaughan, Jr., MD – Vice President
- STAFF PRESENT:** William L. Harp, MD - Executive Director  
Jennifer Deschenes, JD - Deputy Exec. Director for Discipline  
Michael Sobowale, LLM - Deputy Exec. Director for Licensure  
Colanthia Morton Opher - Deputy Exec. Director for Medical Licensing  
and Administration  
Barbara Matusiak, MD - Medical Review Coordinator  
Arnie Owens - DHP Director  
Erin Barrett - Director for DHP Legislative and Regulatory Affairs  
Matt Novak – DHP Policy and Economic Analyst  
Deirdre Brown - Executive Assistant
- OTHERS PRESENT:** Tamika Hines – Board of Medicine Case Manager  
Roslyn Nickens – Board of Medicine Licensure Supervisor  
David Brown, DC – Immediate Past DHP Director  
Colleen Grady-Koerner – Medical Society of Virginia

**EMERGENCY EGRESS INSTRUCTIONS**

Dr. Apel provided the emergency egress instructions.

**APPROVAL OF MINUTES FROM APRIL 4, 2025**

Dr. Clements moved to approve the meeting minutes from April 4, 2025, as presented. The motion was seconded by Ms. DeMoss Fonseca and carried unanimously.

## ADOPTION OF AGENDA

Ms. DeMoss Fonseca moved to adopt the agenda as presented. The motion was seconded by Dr. Clements and carried unanimously.

## PUBLIC COMMENT

There was no public comment.

## DHP DIRECTOR'S REPORT

Mr. Owens, DHP Director, shared that the final cases for 2025 have been wrapped up and is now working on proposed legislation along with the biennial budget for 2026-2027 for consideration by the 2026 General Assembly.

Mr. Owens stated that DHP is currently focusing on providing support to all boards with Human Resources, Procurement, and IT. The goal is to operate efficiently and to cut costs. He stated that he appreciates the work the Board of Medicine is doing to provide a healthy workforce.

## PRESIDENT'S REPORT

There was no President's report.

## EXECUTIVE DIRECTOR'S REPORT

Dr. Harp gave a brief review of the proposed FY2026 budget. He pointed out that the budget has two sections, direct and allocated expenditures. The allocated expenditures are costs shared with other boards for APD, Enforcement and other departmental services. Direct expenditures are those specifically for Board operations, such as per diem payments for Board members, staff salaries, furniture, etc. Dr. Harp informed the Board that many of the advisory boards did not meet last year, so those costs were not reflected in FY2025. A significant amount of the \$399,000 surplus from FY2025 will most likely be spent on 33 potential advisory board meetings in FY2026.

Dr. Harp reviewed two new policies:

- DHP Policy 76-10.24 Conflict of interest policy acknowledgment for board members.
  - It is the duty of all Board members to notify the Executive Director (or designee) of any conflicts of interest between you and the subject of any investigation or disciplinary action. Such notification must occur as soon as you are aware of the conflict.
  - Dr. Harp stated that all Board members should have received an email from staff requesting the acknowledgement form.
  -
- § DHP Policy 76-10.25 Prior convictions not to abridge rights.
  - Dr. Harp stated that the Board cannot deny a license solely based on a criminal conviction, per SB826.

- Ms. Barrett stated that the Board can deny a license if the conviction is related to the occupation or profession.

## NEW BUSINESS

### 1. Regulatory Actions as of July 17, 2025

Mr. Novak reviewed the Current Regulatory Actions as of July 17, 2025, stating that there have been no changes since July 17<sup>th</sup>.

This report was for informational purposes only and did not require any action.

### 2. Consideration of Notice of Intended Regulatory Action to License Anesthesiology Assistants

Ms. Barrett stated that the Board will need to convene a Regulatory Advisory Panel to develop the regulations for Anesthesiology Assistants.

One concern voiced by a member was that the legislation did not define the scope of practice in the Code.

It was recommended to obtain information from West Virginia and the District of Columbia, as both jurisdictions currently regulate this profession and have not had significant public safety concerns.

**MOTION:** Mr. Marchese moved to issue a Notice of Intended Regulatory Action to license Anesthesiology Assistants. The motion was seconded by Dr. McDowell and carried unanimously.

### 3. Consideration of Proposed Action for Reduction of Requirements for Consultation and Collaboration

Mr. Novak reviewed the new language that included a slight reduction of requirements for consultation and collaboration.

**MOTION:** Dr. McDowell moved to adopt proposed stage regulations for the reduction of requirements for consultation and collaboration. The motion was seconded by Mr. Marchese. A roll call vote was taken and with a vote of 3-3 the motion did not pass.

Ms. Barrett asked the Board if they would like to withdraw the action. None replied.

**BREAK:** Dr. Apel called for a break at 9:03 a.m. and the meeting resumed at 9:13 a.m.

Dr. Apel opened the floor to the Board for comment:

- Dr. Apel expressed his opposition to the motion, arguing that the previous language was stronger, while the new language was too vague and could potentially be

misused. Dr. Clements, Dr. Rathmann, and Ms. DeMoss Fonseca agreed.

- Dr. McDowell stated that the current language sets up a barrier to care, and the proposed changes should not impact practice. Dr. Rathmann and Mr. Marchese agreed.

After the suggestion to add years of experience to the proposed language to make the revised language more acceptable, the following motion was made:

**MOTION:** Mr. Marchese motioned to return the proposed action for the Reduction of Requirements to the Physician Assistant Advisory Board for review of the Committee's concerns. The Executive Committee will revisit the Advisory Board's input at their next meeting in December. The motion was seconded by Dr. Rathmann and carried unanimously.

4. Consideration of Proposed Action for Removal of Patient Care Team Physician or Podiatrist from Prescriptions

Mr. Novak reviewed the proposed removals requested by the Physician Assistant advisory board.

**MOTION:** Mr. Marchese moved to adopt proposed stage regulations for removal of patient care team physician or podiatrist from prescriptions. The motion was seconded by Dr. McDowell and carried unanimously.

5. Consideration of Petition for Rulemaking – Buprenorphine Prescriptions

Ms. Barrett reviewed the Petition for Rulemaking from Dr. Lauren H. Grawert on behalf of the Virginia Society of Addiction Medicine (VASAM). The petitioner requested for 18VAC85-21-150 be amended by removing the requirement for documentation of prescribed doses exceeding 24 mg of buprenorphine per day. Additionally, the petitioner requested for 18VAC85-21-160 to remove the restriction on prescribing buprenorphine for addiction to patients under the age of 16, unless approved by the FDA.

Board members reviewed the petition and concluded that the current regulations protected patients, and the use of buprenorphine in patients under the age of 16 is not currently approved by the FDA.

**MOTION:** Mr. Marchese moved to deny the petition based on the lack of justification to remove the requirement for documentation of higher doses and on prescribing buprenorphine to patients under the age of 16. The motion was seconded by Dr. McDowell and carried unanimously.

6. Consideration of Exempt Endorsement Regulatory Action for Behavior Analysts

Mr. Novak reviewed the General Assembly's and the Governor's requirement for all professions at the Board of Medicine to develop licensure by endorsement pathways.

**MOTION:** Mr. Marchese moved to amend 18VAC85-150 by exempt action with a correction in 18VAC85-150-50(3) of “on” to “in”. The motion was seconded by Dr. Rathmann and carried unanimously.

7. Consideration of Exempt Endorsement Regulatory Action for Genetic Counselors

Mr. Novak reviewed the draft changes to 18VAC85-170 as recommended by the Advisory Board for Genetic Counseling.

**MOTION:** Mr. Marchese to amend 18VAC85-170 by exempt action. The motion was seconded by Dr. Rathmann and carried unanimously.

8. Consideration of Exempt Endorsement Regulatory Action for Occupational Therapists

Mr. Novak reviewed the draft changes to 18VAC85-80 as recommended by the Advisory Board on Occupational Therapists. He suggested removing the strikethrough from 18VAC85-80-35(4).

**MOTION:** Mr. Marchese moved to amend 18VAC85-80 by exempt action with amendment to include 18VAC85-80-35(4). The motion was seconded by Dr. Mc Dowell and carried unanimously.

9. Consideration of Exempt Endorsement Regulatory Action for Polysomnographic Technology

Mr. Novak reviewed the draft changes to 18VAC85-140 as presented to the Advisory Board on Polysomnographic Technologists. He suggested removing the strike through 18VAC85-140-50 (4) and adding a number (5) with the language from 18VAC85-140-60(B) and add “and current NPDB”.

**MOTION:** Mr. Marchese moved to amend 18VAC85-140 by exempt action with amendment to include 18VAC85-140-50(4) and add requirement from 18VAC85-140-60(B) as 18VAC85-140-50(5) with adding a current NPDB. The motion was seconded by Dr. Mc Dowell and carried unanimously.

## **ANNOUNCEMENTS**

Dr. Apel informed the Board of the updated guideline for travel reimbursement. Effective immediately, Board members need to submit their request for reimbursement within 30 days for approval. After 30 days, no exceptions will be granted.

The next meeting of the Executive Committee will be December 5, 2025, at 8:30 a.m.

## **ADJOURNMENT**

With no additional business, the meeting adjourned at 10:01 a.m.

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William L. Harp, MD  
Executive Director

**Agenda Item:**     **DHP Agency Director's Report**

**Staff Note:**     All items for information only

**Action:**         None.

**Agenda Item:**     **Board President's Report**

**Staff Note:**     All items for information only.

**Action:**         None.

**Agenda Item:** Executive Director's Report

**Staff Note:** All items for information only.

**Action:** None.

**Agenda Item:** Regulatory Report as of March 18, 2026

**Staff Note:** Ms. Barrett will speak to legislation of interest to the Board of Medicine.

**Action:** If any action is required, guidance will be provided.

**Board of Medicine  
Legislative Report  
As of March 18, 2026**

*Companion bills have not been included.*

[HB 156](#) - Electronic death reg. system; requiring certain applicants for licensure to complete training.

**Chief Patron: Krizek**

**Companion: SB194 (Williams Graves)**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Board of Medicine and Board of Nursing; licensure renewal; electronic death registration system; death certificates.** Requires the Board of Medicine and Board of Nursing to amend their applications for licensure and licensure renewal to require doctors of medicine and osteopathic medicine, advanced practice registered nurses, and physician assistants to indicate if they expect their scope of practice to include signing death certificates and, if so, to indicate that they have completed the online tutorial for the Electronic Death Registration System on the Department of Health website. This bill is identical to SB 194.

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[HB 452](#) - Practice of radiologic technology; licensure exceptions, sunset.

**Chief Patron: Willett**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Practice of radiologic technology; licensure exceptions.** Permits a person employed or engaged by a hospital, health system, or urgent care center that is affiliated with a hospital or health care system to practice within the scope of his employment as a radiologic technologist, radiologic assistant, or radiologic technologist, limited without obtaining a license. Under current law, such exception only applies to radiologic technologists who are employees of a hospital. The bill exempts the initial promulgation of regulations pursuant to the bill by the Board of Medicine from the requirements of the Administrative Process Act. The bill has an expiration date of July 1, 2029.

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[HB 465](#) - Behavior Analysis, Advisory Board on; amends composition.

**Chief Patron: Cohen**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Advisory Board on Behavior Analysis; composition.** Amends the composition of the Advisory Board on Behavior Analysis to require that three members shall be licensed behavior analysts or licensed assistant behavior analysts who have practiced for at least three years. Under current law, the composition of the Advisory Board requires two licensed behavior analysts who have practiced for at least three years and one licensed assistant behavior analyst who has practiced for at least three years.

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[HB 548](#) - Uniform Health Care Decisions Act; civil penalty.

**Chief Patron: Hope**

**Status: Continued**

03/06/2026: Senate – Continued to next session in Finance and Appropriations (15-Y 0-N)

02/17/2026: House – Passed House (62-Y 34-N 0-A)

**Uniform Health Care Decisions Act; civil penalty.** Repeals most provisions of the Health Care Decisions Act and enacts the Uniform Health Care Decisions Act. The bill creates a process for the execution of advance health care directives, as defined in the bill; establishes criteria for determining the capacity of an individual to make health care decisions; provides for the establishment of a default surrogate in the absence of an appointed agent for health care decisions; establishes powers and duties of agents appointed by powers of attorney for health care; and establishes duties of health care professionals.

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[HB 574](#) - Athletic Trainer Compact; authorizes Virginia to become a signatory to Compact.

**Chief Patron: Glass**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Athletic Trainer Compact.** Authorizes Virginia to become a signatory to the Athletic Trainer Compact. The Compact permits qualified licensed athletic trainers to practice in other states that are also members of the Compact. The Compact has not yet been passed in any state and will take effect when the Compact is enacted by a seventh participating state.

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[HB 575](#) - Respiratory Care Interstate Compact; authorizes Virginia to become a signatory to Compact.

**Chief Patron: Glass**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Respiratory Care Interstate Compact.** Authorizes Virginia to become a signatory to the Respiratory Care Interstate Compact. The Compact allows respiratory therapists who have or are eligible for an active, unencumbered license in the Compact member state where they reside to apply for a multistate license. The Compact has been passed in five states and takes effect when it is enacted by a seventh participating state.

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[HB 712](#) - Office-based buprenorphine treatment; Board of Medicine to amend regulations.

**Chief Patron: Wachsmann**

**Companion: SB641 (Pillion)**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Board of Medicine; office-based buprenorphine treatment; counseling.** Directs the Board of Medicine to amend its regulations regarding office-based buprenorphine treatment to require providers to offer counseling or referral to counseling to each patient as clinically necessary and mutually agreed-upon. The bill specifies that a patient's refusal of counseling does not preclude the patient from receiving office-based buprenorphine treatment for opioid use disorder. This bill is a recommendation of the Joint Commission on Health Care and is identical to SB 641.

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[HB 746](#) - Physician assistants; authorization to practice without a practice agreement.

**Chief Patron: Henson**

**Status: Passed**

03/09/2026: Senate – Passed Senate with amendment (38-Y 2-N 0-A)

02/17/2026: House – Passed House (97-Y 0-N 0-A)

**Physician assistants; authorization to practice without a practice agreement.** Authorizes a physician assistant with at least three years of full-time clinical experience to practice without a practice agreement upon receipt of an attestation from a patient care team physician or patient care team podiatrist who provided collaboration and consultation to such physician assistant verifying the length and nature of the physician assistant's practice. The bill establishes methods for a physician assistant who is unable to obtain the required attestation to submit other evidence that the physician assistant meets the requirements to practice without a practice agreement and establishes a method for physician assistants who obtain licensure by endorsement to practice without a practice agreement if they meet the applicable requirements. The bill also establishes a scope of practice for physician assistants who practice without a practice agreement.

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[HB 841](#) - Practice of athletic training; adds dry needling to definition.

**Chief Patron: Downey**

**Status: Continued**

03/05/2026: Senate – Continued to next session in Education and Health (11-Y 0-N)

02/16/2026: House – Passed House (56-Y 39-N 0-A)

**Professions and occupations; definition of "practice of athletic training"; dry needling.** Adds dry needling to the definition of "practice of athletic training," as such term relates to the practice of medicine and other healing arts, and directs the Board of Medicine to adopt regulations requiring training and certification for the practice of dry needling by athletic trainers.

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[HB 1139](#) - Medicine, Board of; membership, removal of residence requirements.

**Chief Patron: Downey**

**Status: Passed**

03/02/2026: Senate – Passed Senate (24-Y 16-N 0-A)

02/09/2026: House – Passed House (63-Y 35-N 0-A)

**Board of Medicine; membership; removal of residence requirements.** Removes the requirement that the Board of Medicine have one physician from each congressional district and instead requires that 11 physicians are on the Board. The bill removes references to change of residence provisions for physician Board members.

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[HB 1147](#) - Medicine and Nursing, Boards of; continuing education, bias reduction training.

**Chief Patron: Hayes**

**Companion: SB22 (Locke)**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 10, 2026

**Board of Medicine and Board of Nursing; continuing education; bias reduction training.** Directs the Board of Medicine and Board of Nursing to require certain licensees to complete continuing learning activities on bias reduction in health care as part of their continuing education and continuing competency requirements for licensure and authorizes the Board of Nursing to require certain continuing learning activities or courses in a specific subject area. Under current law, the Board of Medicine has such authority. This bill is identical to SB 22.

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[HB 796](#) - Regulatory boards; adjustment of fees, recovery of disciplinary and monitoring costs, report.

**Chief Patron: Hayes**

**Companion: SB680 (Head)**

**Status: Passed**

Governor's Action Deadline 11:59 p.m., April 13, 2026

Enrolled Bill communicated to Governor on March 14, 2026

**Professions and occupations; adjustment of fees by regulatory boards; recovery of disciplinary and monitoring costs.** Repeals the provision of law that requires, following the close of any biennium, when the account for any regulatory board within the Department of Professional and Occupational Regulation (DPOR) shows revenue to be a certain percentage greater than expenses, such regulatory board to distribute excess revenue to current regulants and reduce its licensure or certification fees so that fees are sufficient but not excessive to cover expenses. The bill also repeals the provision with respect to the Department of Health Professions (DHP) that requires, following the close of any biennium, when the account for any regulatory board shows expenses allocated to it for the past biennium to be a certain percentage greater than moneys collected by the board, the board to revise its fees so that such fees are sufficient but not excessive to cover expenses. The bill makes it permissive for the regulatory boards within DPOR and DHP to annually revise the fees levied by it for certification, licensure, registration, or permit and renewal so that the fees are sufficient but not excessive to cover expenses. Regulatory boards are also permitted to recover reasonable administrative costs associated with investigation, disciplinary proceedings, monitoring, and confirming compliance with any terms and conditions imposed from any person who is (i) licensed, registered, certified, or issued a multistate licensure privilege by any regulatory or health regulatory board and (ii) issued a finding of a violation of law or regulation from such regulatory or health regulatory board. Such administrative costs shall not exceed \$500 for regulatory boards within DPOR and \$1,500 for health regulatory boards within DHP.

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[HB 1223](#) - Health professionals; mandatory suicide training required.

**Chief Patron: Delaney**

**Status: Continued**

02/12/2026: House – Continued to next session in Health and Human Services (Voice Vote)

**Health professionals; mandatory suicide training required.** Requires health care professionals to complete training in suicide assessment, treatment, and management. The bill requires counselors, licensed substance abuse treatment practitioners, marriage and family therapists, behavioral health technicians, qualified mental health professionals, occupational therapists, psychologists, and social workers to complete such training at least once every six years and requires other health professionals to complete such training once. The bill requires the Commissioner of Health and the Department of Health Professions to develop a model list of training programs in suicide assessment, treatment, and management and update such list at least once every two years.

**Agenda Item: Current Regulatory Actions**

**Staff Note:** Ms. Barrett will speak to the Board of Medicine actions underway.

**Action:** If any action is required, guidance will be provided.

**Board of Medicine**  
**Regulatory Actions**  
**As of March 16, 2026**

**In the Governor's Office**

None.

**In the Secretary's Office**

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC85-50	NOIRA	Implementation of the PA Compact	4/14/2025	329 days	Facilitates entry into the PA Compact
18VAC85-180	NOIRA	Licensure of Anesthesiologist Assistants	8/18/2025	200 days	Begins the process to license Anesthesiologist Assistants as required by legislation
18VAC85-40	Proposed	Implementation of 2022 Periodic Review for Chapter 40	4/8/2025	4 days	Implements changes following 2022 periodic review. Fast-track received an objection from a legislator pursuant to Va. Code § 2.2-4012.1., which converted the fast-track into a NOIRA. This action will now undergo the full regulatory process.

**At DPB**

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC85-20	Proposed	Licensure of foreign physicians	11/14/2025	0 days	Creates a provisional and restricted license pathway for foreign

		through provisional and restricted licenses			physicians as required by HB995 of the 2024 General Assembly.
18VAC85-20	Fast-Track	Clean up of continuing education requirement references following regulatory reduction	4/8/2025	0 days	Removes references to CE requirements that were removed in a previous regulatory action

**At OAG**

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC85-50	Exempt/Final	Licensure by endorsement for physician assistants	2/25/2026	19 days	Pursuant to 2025 legislation, creates a licensure by endorsement pathway
18VAC85-101	Exempt/Final	Licensure by endorsement for radiologic technologists et al.	2/25/2026	19 days	Pursuant to 2025 legislation, creates a licensure by endorsement pathway
18VAC85-110	Exempt/Final	Licensure by endorsement for acupuncturists	2/25/2026	19 days	Pursuant to 2025 legislation, creates a licensure by endorsement pathway
18VAC85-120	Exempt/Final	Licensure by endorsement for athletic trainers	2/25/2026	19 days	Pursuant to 2025 legislation, creates a licensure by endorsement pathway
18VAC85-50	Proposed	Amendment to requirements for patient care team physician or podiatrist consultation and collaboration	2/25/2026	19 days	Regulatory change pursuant to a petition for rulemaking received by the Board.

**Recently effective/awaiting publication**

VAC	Stage	Subject Matter	Submitted for publication	Publication Date	Effective Date and Notes
18VAC85-50	Fast-Track	Creation of reinstatement process for physician assistants with lapsed licenses	2/23/2026	2/23/2026	Effective 4/9/2026
18VAC85-20	Fast-Track	Removal of requirement to provide documentation of continuing competency for reactivation of a license	2/17/2026	3/9/2026	Effective 4/23/2026
18VAC85-50	Proposed	Removal of patient care team physician or podiatrist name from prescriptions issued by physician assistants	2/17/2026	3/9/2026	Public comment period lasts 3/9/2026 – 5/8/2026. Public hearing on 4/3. Final stage will be before the June Board for action.

**Agenda Item: Consideration of petition for rulemaking**

**Included in your agenda package:**

- Petition for rulemaking received by the Board;
- PDF of Town Hall summary page, showing no online comments received;
- Email from Ms. Lozano, which is the only public comment received during the comment period;
- Applicable agenda portion from the January 2026 Legislative Committee meeting, at which the topic of the petition for rulemaking was discussed (prior to the filing of the petition for rulemaking); and
- Minutes of the January 2026 Legislative Committee, which reflect the discussion of the Committee on this topic.

**Staff note:** The petitioner requests that the Board amend its regulations to impose requirements on physicians regarding implanted medical devices and the communication of information related to those implants. The petitioner's form requesting the regulatory change is not clear; the Executive Committee should review the letter received by Arne Owens from Senator Favola for a description of the petitioner's issue.

The Legislative Committee, as noted in the minutes, declined to recommend that the full Board initiate a regulatory action regarding this issue.

**Action needed:**

- Motion to either:
  - Recommend that the full Board adopt the petition and initiate rulemaking; or
  - Recommend that the full Board take no action on the petition, stating why.



# COMMONWEALTH OF VIRGINIA

## Board of Medicine

9960 Mayland Drive, Suite 300  
Richmond, Virginia 23233-1463

(804) 367-4600 (Tel)  
(804) 527-4426 (Fax)

[Coco.Morton@dhp.virginia.gov](mailto:Coco.Morton@dhp.virginia.gov)

### Petition for Rule-making

*The Code of Virginia (§ 2.2-4007) and the Public Participation Guidelines of this board require a person who wishes to petition the board to develop a new regulation or amend an existing regulation to provide certain information. Within 14 days of receiving a valid petition, the board will notify the petitioner and send a notice to the Register of Regulations identifying the petitioner, the nature of the request and the plan for responding to the petition. Following publication of the petition in the Register, a 21-day comment period will begin to allow written comment on the petition. Within 90 days after the comment period, the board will issue a written decision on the petition. If the board has not met within that 90-day period, the decision will be issued no later than 14 days after it next meets.*

<b>Please provide the information requested below. (Print or Type)</b>		
Petitioner's full name (Last, First, Middle initial, Suffix,)		
LOZANO, BERNADETTE, D. <span style="float: right;">✓</span>		
Street Address	Area Code and Telephone Number	
1200 SOUTH COURTHOUSE, APT. 138	(703)-901-9349	
City	State	Zip Code
ARLINGTON	VA	22204
Email Address (optional)	Fax (optional)	
bvdlozano01@gmail.com	n/a	

**Respond to the following questions:**

- What regulation are you petitioning the board to amend? Please state the title of the regulation and the section/sections you want the board to consider amending.  
There is no VA State Regulation on the following: Serial#, Manufactured or Expiration date information about a Medical Implant Device is never provided to a patient upon discharge from a Hospital or Surgery Center in Virginia. A Legislative Meeting on this topic for possible consideration as a NOIRA was discussed on 01/09/2026, but not enough support from those in attendance was obtained.
- Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule.  
I bring this Medical Item to the attention of the VA State Medical Board, because four years ago, my first Right Hip Medical Implant Device prematurely collapsed and exploded within 1 1/2 years of its first installation while I was taking a leisurely stroll with a neighbor. It was only at the time of this incident, that I decided to ask this Surgeon about identifying Serial# and other specifics about the entire Implant. It was a struggle for me to acquire the information from this Surgeon when I needed it most badly; especially, after the Surgeon had initially told me that the Implant Device would last 'forever'.
- State the legal authority of the board to take the action requested. In general, the legal authority for the adoption of regulations by the board is found in § 54.1-2400 of the Code of Virginia. If there is other legal authority for promulgation of a regulation, please provide that Code reference.  
During the week of 01/23/2026, the Director of the VA State Board of Medicine telephonically advised me of the results of mentioned Legislative meeting of 01/09/2026; the support for such a measure was lukewarmly accepted, but would not be further supported.

Signature:	Date:
Bernadette D. Lozano, dated January 26, 2026	



**Secretariat** Health and Human Resources

**Agency** Department of Health Professions

**Board** Board of Medicine

[Edit Petition](#)

Petition 450

Petition Information	
<b>Petition Title</b>	Addition of requirement for practitioners to provide patient certain information relating to medical implant devices
<b>Date Filed</b>	2/2/2026 <a href="#">[Transmittal Sheet]</a>
<b>Petitioner</b>	Bernadette Lozano
<b>Petitioner's Request</b>	The petitioner requests that the board amend 18VAC85-20 to insert a requirement that a practitioner must disclose the serial number, manufactured date, and expiration date information of a medical implant device upon discharge from a hospital or surgery center when one has been inserted.
<b>Agency's Plan</b>	The petition for rulemaking will be published in the Virginia Register of Regulations on February 23, 2026. The petition will also be published on the Virginia Regulatory Town Hall to receive public comment, which will open on February 23, 2026 and will close on March 16, 2026. The Board will consider the petition and all comments in support or opposition at the next meeting after the close of public comment, currently scheduled for April 3, 2026. The petitioner will be notified of the Board's decision after that meeting.
<b>Comment Period</b>	Began 2/23/2026 Ended 3/16/2026 0 comments
<b>Virginia Register Announcement</b>	Submitted on 2/2/2026 <b><u><a href="#">The Virginia Register of Regulations</a></u></b> Published on: 2/23/2026 Volume: 42 Issue: 14
<b>Agency Decision</b>	Pending

Contact Information	
<b>Name / Title:</b>	Erin Barrett / <i>Director of Legislative and Regulatory Affairs</i>
<b>Address:</b>	Perimeter Center 9960 Mayland Drive, Suite 300 Henrico, 23233
<b>Email Address:</b>	<a href="mailto:erin.barrett@dhp.virginia.gov">erin.barrett@dhp.virginia.gov</a>
<b>Telephone:</b>	(804)750-3912 FAX: (804)915-0382 TDD: (-)

**==24==**

*This petition was created by Matthew Novak on 02/02/2026 at 8:36am*

**From:** [b.lozano](mailto:b.lozano)  
**To:** [Barrett, Erin \(DHP\); matthew.novak@dhp.virgi](mailto:Barrett_Erin(DHP); matthew.novak@dhp.virgi)  
**Subject:** Note from VA Resident/Petitioner to Amend VA Statute 18VAC85-20  
**Date:** Wednesday, February 25, 2026 9:30:36 AM

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Dear Erin Barrett & Matt Novak,

Re Dept. of Health Professions letter dated Feb. 2, 2026, outlining the approval of a Petition for Rulemaking for noted VA State Medical Regulation.

Captioned letter listed both your names as being copied on captioned letter. There is a noted period for Public Comment from 2/23/2026 to 3/16/2026.

I am the Petitioner who submitted captioned Petition.

For the past four (4) years, it seems as if I have been the only Advocate to change noted regulation.

The disastrous results of a Medical Device Implant Surgery that took place 4 years ago on my Right Hip, all because of one part of the device being too small and subsequently, this was verified by a second surgery done by a Revision Surgeon to correct the noted first surgery. What bothered me the most, was that each Surgeon told me there is NO Mandate by State or Federal Law to give device implant identifiers to a patient about their Medical Device Implant. To me, this was NOT correct.

No matter what type of Medical Device Implant Surgery there is, there should be a medical regulation MANDATE for Surgeons across the board in Virginia to provide specific identifiers of the Implant, to a patient upon discharge from any Hospital or Surgery Center. The patient shouldn't be the one to BEG a Surgeon for this data.

As a constituent and for the past four (4) years, I contacted both of my elected VA State Legislators from Arlington, VA, about this medical issue and the LACK OF A MANDATE, but there was minimal interest by both of them to pursue all avenues to Amend noted regulation. To conclude, neither one of these Legislators advised me of a 'Petition For RuleMaking' pathway.

Nonetheless, it is my hope that our newly elected Governor would be interested in this type of Advocacy, most especially, wherein, some Surgeons can use the 'lack of mandates' to MINIMIZE their interest or level of commitment to ensuring concrete Medical Transparency with all patients.

In closing, I hope your offices will monitor the progress of this Petition and, that a final outcome to AMEND noted regulation will be realized after 4/3/2026.

Cordially,  
Bernadette Lozano  
Arlington, VA

**Agenda Item: Consideration of potential regulatory action regarding medical device implant identifying information**

**Included in your agenda package:**

- Letter from Senator Favola regarding a constituent's concern;
- Letter in response from Director Owens; and
- 18VAC85-20-26.

**Staff notes:** The Committee to discuss whether this issue should be regulated. If this issue is not appropriate for regulation, specific information regarding the reasons why regulation is inappropriate should be identified by the Committee.

**Action needed:**

- If the Committee believes this issue should be regulated, recommendation that the Full Board file a notice of intended regulatory action at the February 2026 meeting.

Not for Action by April 2026 Executive Committee  
From January 2026 Legislative Committee

# SENATE OF VIRGINIA

**BARBARA A. FAVOLA**  
40TH SENATORIAL DISTRICT  
PART OF ARLINGTON COUNTY

P.O. BOX 687  
ARLINGTON, VA 22216



COMMITTEE ASSIGNMENTS:  
REHABILITATION AND SOCIAL  
SERVICES, CHAIR  
COURTS OF JUSTICE  
EDUCATION AND HEALTH  
FINANCE AND APPROPRIATIONS  
RULES

Director Arne Owens  
Virginia Department of Health Professions  
9960 Mayland Drive, Suite 300  
Henrico, VA 23233

Dear Director Owens:

I write to you to urge the Department of Health Professions to amend its regulations to ensure that patients in Virginia receiving medical device implants have access to the necessary identifying information about those devices, including manufacturer, brand, serial number, and expiration date.

One of my constituents, Ms. Bernadette Lozano of Arlington, experienced the failure of her first hip replacement surgery because one part used in her implant was too small. It was only after a revision surgery that she learned the true cause of the surgery's failure. To obtain basic details about the failed implant, Ms. Lozano had to demand documentation from her original surgeon and personally contact the manufacturer.

I understand that many healthcare professionals in the Commonwealth already distribute this information to patients routinely and accurately, and I am grateful for their diligence. However, this instance highlights the gap created by the absence of a regulatory requirement. Despite many physicians following this best practice voluntarily, there remain bad actors who leave patients vulnerable and uninformed. Amending the regulations to require facilities and providers to record identifying information for implanted devices and provide it to patients will close this gap and protect Virginians.

Please provide a written response confirming whether the Department has the ability to address this issue by modifying existing regulations. If this cannot be accomplished through the regulatory process and would instead require legislative action directing the Department to include identifying information in its regulations, please let my office know. Ensuring that every patient has access to this information about devices implanted in their bodies is a commonsense step toward safety, transparency, and trust in our healthcare system.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Barbara Favola".

Senator Barbara A. Favola  
Representing District 40

Not for Action January 2016 Legislative Committee  
April 2016 Executive Committee



# COMMONWEALTH of VIRGINIA

Arne W. Owens  
Director

Department of Health Professions  
Perimeter Center  
9960 Mayland Drive, Suite 300  
Henrico, Virginia 23233-1463

[www.dhp.virginia.gov](http://www.dhp.virginia.gov)  
PHONE (804) 367- 4400

September 8, 2025

The Honorable Barbara Favola  
Senate of Virginia  
P.O. Box 687  
Arlington, Virginia 22216  
[senatorfavola@senate.virginia.gov](mailto:senatorfavola@senate.virginia.gov)

**Re: Requirements for facilities and providers to record identifying information of implanted devices**

Dear Senator Favola,

Thank you for contacting me about your constituent, Ms. Bernadette Lozano, and the issues she faced locating information regarding an implanted device. You asked whether the Department of Health Professions can address the issue Ms. Lozano experienced by modifying existing regulations.

After discussing the matter with the Executive Director of the Board of Medicine and the Executive Director of the Board of Pharmacy, I can share that the Department, through the Board of Medicine, can address this issue through regulation. Any such change would likely be added to the existing regulation governing requirements for patient records, 18VAC85-20-26.

Such a regulatory change would only impact licensed practitioners under the jurisdiction of the Department of Health Professions, however, and would not impact facilities, which you also asked about. The Virginia Department of Health may have jurisdiction over such recording requirements of facilities.

Should you need anything further, please let me know.

Sincerely,

*Arne W. Owens*

Arne W. Owens  
Director

cc: Erin Barrett, Director of Legislative and Regulatory Affairs

Virginia Administrative Code

Title 18. Professional And Occupational Licensing

Agency 85. Board of Medicine

Chapter 20. Regulations Governing the Practice of Medicine, Osteopathic Medicine, Podiatry, and Chiropractic

## Part II. Standards of Professional Conduct

### 18VAC85-20-26. Patient records.

A. Practitioners shall comply with the provisions of § 32.1-127.1:03 of the Code of Virginia related to the confidentiality and disclosure of patient records.

B. Practitioners shall provide patient records to another practitioner or to the patient or the patient's personal representative in a timely manner in accordance with provisions of § 32.1-127.1:03 of the Code of Virginia.

C. Practitioners shall properly manage patient records and shall maintain timely, accurate, legible, and complete patient records.

D. Practitioners shall maintain a patient record for a minimum of six years following the last patient encounter with the following exceptions:

1. Records of a minor child, including immunizations, shall be maintained until the child reaches 18 years of age or becomes emancipated, with a minimum time for record retention of six years from the last patient encounter regardless of the age of the child;
2. Records that have previously been transferred to another practitioner or health care provider or provided to the patient or the patient's personal representative; or
3. Records that are required by contractual obligation or federal law to be maintained for a longer period of time.

E. Practitioners shall post information or in some manner inform all patients concerning the timeframe for record retention and destruction. Patient records shall only be destroyed in a manner that protects patient confidentiality, such as by incineration or shredding.

#### **Statutory Authority**

§54.1-2400 of the Code of Virginia.

#### **Historical Notes**

Derived from Virginia Register Volume 22, Issue 1, eff. October 19, 2005; amended, Virginia Register Volume 35, Issue 24, eff. September 26, 2019; Volume 41, Issue 11, eff. February 27, 2025.

**VIRGINIA BOARD OF MEDICINE**  
**LEGISLATIVE COMMITTEE MINUTES**

FRIDAY, JANUARY 9, 2026

DEPARTMENT OF HEALTH PROFESSIONS

HENRICO, VA

- CALL TO ORDER:** Dr. Vaughan called the meeting of the Legislative Committee to order at 8:31 a.m.
- ROLL CALL:** Ms. Brown called the roll; a quorum was established.
- MEMBERS PRESENT:** Peter Apel, MD, President  
Krishna Madiraju, MD  
Patrick McManus, MD  
Michele Nedelka, MD  
Jennifer Rathmann, DC  
Leroy Vaughan, Jr., MD, Vice-President, Chair
- MEMBERS ABSENT:** Randy Clements, DPM, Past President
- STAFF PRESENT:** William L. Harp, MD - Executive Director  
Jennifer Deschenes, JD - Deputy Director, Discipline  
Colanthia Morton Opher - Deputy Director, Administration  
Michael Sobowale, LLM - Deputy Director, Licensing  
Arne Owens – DHP Director  
Erin Barrett, JD – Director of Legislative and Regulatory Affairs  
Deirdre Brown - Executive Assistant  
Mandy Addison – Team Lead, Customer Service Representative
- COUNCIL PRESENT:** Brent Saunders, JD - Senior Assistant Attorney General
- OTHERS PRESENT:** Tamika Hines - Discipline Case Manager  
Coleen Grady-Koerner – Medical Society of Virginia

**EMERGENCY EGRESS INSTRUCTIONS**

Dr. Vaughan provided the emergency egress instructions for Board Room 4.

**APPROVAL OF MINUTES OF SEPTEMBER 5, 2025**

Dr. McManus moved to approve the meeting minutes of September 5, 2025. The motion was seconded by Dr. Nedelka and carried unanimously.

## ADOPTION OF AGENDA

Dr. Rathmann moved to approve the agenda as presented. The motion was seconded by Dr. McManus and carried unanimously.

## PUBLIC COMMENT

There was no public comment.

## DHP AGENCY DIRECTOR'S REPORT

Mr. Owens, DHP Director, announced that the inauguration of Virginia's new governor is scheduled for January 17, 2026. He noted that no official appointment has been made for DHP's new director and said that his last day serving as Agency Director will be January 16, 2026.

Mr. Owens reported that DHP continues to focus on operational efficiency and confirmed that the biennial budget has been submitted to the General Assembly. He also shared that DHP has experienced significant growth, with an increase of more than 33,000 licensees since 2022.

Dr. Harp noted that at its October meeting, the Board voted to include additional continuing education on nutrition for the 2028–2029 cycle. Mr. Owens explained that the Board's vote on nutrition CE was essential to the federal funding awarded to Virginia on December 29, 2025, by the Centers for Medicare and Medicaid Services (CMS). He said that Virginia will receive \$189M through the new federal Rural Health Transformation Program.

In closing, Mr. Owens expressed his gratitude to the members of the Board for their continued public service.

## NEW BUSINESS

### 1. Regulatory Chart

Ms. Barrett reviewed the Regulatory Actions as of December 17, 2025 and indicated that the following regulatory matters have been moved to the Governor's office:

- 18VAC85-20 - Removal of requirement to provide documentation of continuing competency for reactivation of a license and implement attestation.
- 18VAC85-50 - Removal of patient care team physician or podiatrist name from prescriptions issued by physician assistants.

This report was for informational purposes only and did not require any action.

### 2. 2026 Legislative Update

Ms. Barrett said that the Virginia General Assembly will begin its Session on January 14, 2026, and noted that additional information about legislation will be provided at the Full Board meeting in February.

She reviewed the agency bill that proposes a change to how fees are adjusted and for fee increases to become exempt regulatory actions. Further, the legislation will allow the agency to impose disciplinary costs which are a significant expenditure for the boards. Most likely, this would be a flat fee for all respondents. She added that the proposal has received positive feedback from legislators.

### 3. Medical Device Implant Information

Dr. Vaughan provided review of a letter from Senator Barbara Favola asking if the Board of Medicine could amend its regulations to require physicians to record information on medical device implants. He explained that Senator Favola suggested patients should have access to information about the implants they have received, including the brand, manufacturer, serial number, and expiration date.

Dr. Harp noted that a physician's patient records must be retained for 6 years. Patients who wish to retrieve information in the physician's medical record would need to request it in that 6-year timeframe.

Ms. Barrett said that Senator Favola's concern was not related to timing but to the standard of care. She asked the Board to consider whether recording the lot number of a medical device implant in the physician's record should fall under the standard of care.

Dr. Apel responded that it is not currently considered the standard of care to record the lot number of implants, only the type of implant and the manufacturer. He added that information on implants is maintained by the facility to meet federal requirements, noting that hospital operative records at the facility where the procedure was performed contain this information.

Dr. Madiraju shared that children's vaccines are required to be recorded in the child's medical record to include the manufacturer, lot number, and expiration date. He expressed agreement with Senator Favola that similar information should be entered in patient records for medical device implants.

Dr. Vaughan stated that he does seek this information through the facility's operative records and that this information is typically provided to the patient.

Dr. Nedelka expressed that she did not believe that recording the information on medical device implants should be required of the physician.

Ms. Deschenes stated that it should be communicated to patients that this information is readily available through the facility

In conclusion, Dr. Vaughan stated that no regulatory changes are necessary because hospital operative records already document all required information and is available to patients. The Legislative Committee declined to recommend any regulatory action to the Full Board. Ms. Barrett said she appreciated the Committee's discussion.

## **ANNOUNCEMENTS**

Ms. Deschenes said that she had a proposed PHCO to present to the Committee for its approval before offering it to the licensee. After the Committee read the proposed PHCO, Dr. Rathmann moved to accept it without amendment. The motion was duly seconded by Dr. McManus. The vote to approve the document was unanimous.

## **NEXT MEETING**

May 8, 2026

## **ADJOURNMENT**

With no other business to conduct, the meeting adjourned at 9:15 a.m.

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William L. Harp, MD  
Executive Director

**Agenda Item: Consideration of amendment to election date, terms of office for officers of the Board**

**Included in your agenda package:**

- Bylaws of the Board of Medicine, last revised October 6, 2022.

**Staff Note:** At board member request, the Executive Committee will review the terms of office and election timing included in the Board bylaws.

Should the Executive Committee determine that changes should be considered by the full Board, the Executive Committee should provide and vote on **specific language changes** to the bylaws. Those changes must be distributed in writing to all Board members at least seven days prior to a vote on the change, per the bylaws. If the Executive Committee agrees that the timing of elections and terms of office should be changed, those changes will be distributed to the Board members via the selected Board meeting agenda.

The Executive Committee should also consider whether such a change should be placed on the agenda of the June Board Meeting or the October Board Meeting.

**Action needed:**

- Discussion of and vote on whether to recommend alteration of election timing and terms of office to the full Board.
- If such a change is recommended, determination of **specific language changes** to present to the full Board.
- Decision regarding whether any such change should be considered at the June Board Meeting or at a later date.

**VIRGINIA BOARD OF MEDICINE**

**BYLAWS**

**PART I: THE BOARD**

**Article I – Members**

The appointment and limitations of service of the members shall be in accordance with § 54.1-2911 of the Code of Virginia.

**Article II - Officers of the Board**

Section 1. Offices and Titles – Officers of the Board shall consist of a president, vice-president and secretary/treasurer. All shall be elected by the Board for a term of one year. The term of each office shall begin at the conclusion of the June Board meeting and end at the conclusion of the subsequent June Board meeting.

- A. President: The president shall preserve order and preside at all meetings according to parliamentary rules, the Virginia Administrative Process Act, and the Virginia Freedom of Information Act. The president shall appoint the members of the Executive Committee, Credentials Committee, Finance Committee, Committee of the Joint Boards of Medicine and Nursing, and ad hoc committees of the Board. He shall sign his name as president to the certificates authorized to be signed by the president.
- B. Vice President: The vice president shall act as president in the absence of the president. The vice president shall preserve order and preside at all meetings of the Legislative Committee according to parliamentary rules, the Virginia Administrative Process Act, and the Virginia Freedom of Information Act. He shall, in consultation with the president, appoint the members of the Legislative Committee and shall sign his name as vice-president to the certificates authorized to be signed by the vice-president.
- C. Secretary/Treasurer: The secretary/treasurer shall be knowledgeable of budgetary and financial matters of the Board. The secretary/treasurer shall preserve order and preside at all meetings of the Finance Committee according to parliamentary rules, the Virginia Administrative Process and the Virginia Freedom of Information Act. He shall sign his name as secretary/treasurer to the certificates authorized to be signed by the secretary/treasurer.
- D. The officers of the Board shall faithfully perform the duties of their offices and shall coordinate with staff regularly on matters pertaining to their offices.
- E. Order of succession: In the event of a vacancy in the office of president, the vice president shall assume the office of president for the remainder of the term. In the event of a vacancy in the office of vice president, the secretary/treasurer shall assume the

office of vice president for the remainder of the term. In the event of a vacancy of the office of secretary/treasurer, the president shall appoint a Board member to fill the vacancy for the remainder of the term.

- F. The Executive Director shall keep true records of all general and special acts of the Board and all documents of value. When a committee is appointed for any purpose, he shall notify each member of his appointment and furnish any essential document or information at his command. He shall conduct the correspondence of the Board when requested and shall sign certificates authorized to be issued by the Board and perform all such other duties as naturally pertain to his position.

### **Article III - Meetings**

Section 1. Frequency of meetings: The Board shall meet at least three times a year.

Section 2. Order of Business Meetings - The order of business shall be as follows:

Call to order

Roll call

Approval of minutes of preceding regular Board meeting and any called meeting since the last regular meeting of the Board

Adoption of Agenda

Public Comment Period

Report of Officers and Executive Director:

- President
- Vice President
- Secretary/Treasurer
- Executive Director

Report of Committees:

- Executive Committee
- Legislative Committee
- Credentials Committee
- Finance Committee
- Other Standing Committees
- Ad Hoc Committees

Report of Advisory Boards

- Acupuncture
- Athletic Training
- Midwifery

Occupational Therapy  
Physician Assistant  
Radiological Technology  
Respiratory Care  
Behavior Analysis  
Polysomnographic Technology  
Genetic Counseling

Old Business

New Business

Election of Officers

#### **Article IV – Committees**

Section 1. Standing committees. The standing committees of the Board shall consist of the following:

Executive Committee  
Legislative Committee  
Credentials Committee  
Finance Committee  
Committee of the Joint Boards of Medicine and Nursing  
Other Standing Committees

- A. **Executive Committee.** The Executive Committee shall consist of the president, vice-president, the secretary-treasurer and five other members of the board appointed by the president. The Executive Committee shall include at least two citizen members. The president shall serve as chairman of the Executive Committee. In the absence of the Board, the executive committee shall have full powers to take any action and conduct any business as authorized by § 54.1-2911 of the Code of Virginia. Five members of the executive committee shall constitute a quorum.
- B. **Legislative Committee.** The Legislative Committee shall consist of seven Board members appointed by the vice-president of the Board in consultation with the President. The vice president of the Board or his designee will serve as chair. The committee shall consider all questions bearing upon state and federal legislation, and regulations. The Legislative Committee shall recommend changes in the law and regulations as it may deem advisable and, at the direction of the Board, shall take such steps as may further the desire of the Board in matters of legislation and regulations. The committee shall submit proposed changes in the rules and regulations of the Board in writing to all Board members prior to any scheduled meeting of the Board.
- C. **Credentials Committee.** The Credentials Committee shall consist of nine members of the Board appointed by the President and shall satisfy itself that applicants for licensure

by endorsement or by examination fulfill the requirements of the Board. The Committee shall review the credentials of the applicants who may fail to meet the requirements of the Board as specified in statute or regulation. The Committee may hear credentialing issues in accordance with §2.2-4019 and §2.2-4021 of the Code of Virginia and guidelines adopted by the Board.

- D. **Finance Committee**. The Finance Committee shall consist of the secretary/treasurer, two other members appointed by the president and the Executive Director shall act ex officio to the committee. This committee shall be responsible for making recommendations to the Board regarding all financial matters. The committee shall meet as necessary.
- E. **Committee of the Joint Boards of Medicine and Nursing**. The Committee shall be appointed in accordance with § 54.1-2957 of the Code of Virginia and shall function as provided in 18VAC90-30-30 of the Regulations Governing the Licensure of Nurse Practitioners.
- F. Members appointed to a committee shall faithfully perform the duties assigned to the committee. Committee chairs shall regularly communicate with staff on matters pertaining to the committee.

## Section 2. Ad Hoc Committees.

- A. The Board or any of its standing committees may establish such ad hoc committees as are deemed necessary to assist the Board or committee in its work.
- B. The members of an ad hoc committee shall be appointed by the president of the Board or the chair of the committee creating the ad hoc committee. The chair may appoint members to an ad hoc committee who are not members of the Board when it serves the purpose of the committee.
- C. All members of an ad hoc committee shall have full and equal voting rights.
- D. Members appointed to a committee shall faithfully perform the duties assigned to the committee. Committee chairs shall regularly communicate with staff on matters pertaining to the committee.

## Article V – Elections

The Board shall appoint a Nominating Committee at its February meeting. The Nominating Committee shall present the names of candidates for office to the Board for election at its June meeting. In the event that the offices are vacated and succession is not possible, the Board shall appoint a Nominating Committee which will develop a slate of candidates for the Board's consideration at its next meeting.

**Amendments to Bylaws**

Amendments to these bylaws may be proposed by presenting the amendments in writing to all Board members seven calendar days prior to any scheduled Board meeting.

Next Meeting Date of the Executive Committee is

August 7, 2026



Please check your calendars and advise staff of any known conflicts that may affect your attendance.



The travel regulations require that “travelers must submit the Travel Expense Reimbursement Voucher **within 30 days after completion of their trip**”. (CAPP Topic 20335, State Travel Regulations, p.7). Vouchers submitted after the 30-day deadline can not be approved.

In order for the agency to be in compliance with the travel regulations, please submit your request for today’s meeting on or before

**May 3, 2026**