



Advisory on Behavior Analysis

Virginia Board of Medicine
January 31, 2022
10:00 a.m.

Advisory Board on Behavior Analysis

Board of Medicine

Monday, January 31, 2022 @ 10:00 a.m.

9960 Mayland Drive, Suite 201

Henrico, VA

Agenda

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Call to Order – Christina Giuliano, BA, Chair	
Emergency Egress Procedures – William Harp, MD	i
Roll Call – Pamela Smith	
Introduction of Members – Christina Giuliano	
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2. Behavior Analysis Licensure Requirements ----- Michael Sobowale	34 - 36
3. Approval of 2022 Meeting Calendar Christina Giuliano, BA	37
4. Election of Officers Christina Giuliano, BA	

Announcements:

Next Scheduled Meeting: May 23, 2022 @ 10:00 a.m.

Adjournment

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

PLEASE LISTEN TO THE FOLLOWING INSTRUCTIONS ABOUT EXITING THESE PREMISES IN THE EVENT OF AN EMERGENCY.

Training Room 2

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When the alarms sound, leave the room immediately. Follow any instructions given by Security staff

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Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

---DRAFT UNAPPROVED---

ADVISORY BOARD ON BEHAVIOR ANALYSIS

Minutes

October 5, 2020

Electronic Meeting

The Advisory Board on Behavior Analysis held a virtual meeting on Monday, October 5, 2020 hosted at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Henrico, Virginia.

MEMBERS PRESENT: Amanda Kusterer, LABA Vice-Chair
Mark Llobell, Citizen Member
Christina Giuliano, LBA
Autumn Kaufman, LBA

MEMBERS ABSENT: Asha Patton Smith, MD

STAFF PRESENT: William L. Harp, M.D., Executive Director
Elaine Yeatts, DHP Senior Policy Analyst
Michael Sobowale, LLM, Deputy Director, Licensure
Colanthia Morton Opher, Deputy Director, Administration
Jennifer Deschenes, JD, Deputy Director, Discipline
Pamela Smith, Licensing Specialist

GUESTS PRESENT: Christy Evanko, BCBA, VABA
Julianne Condrey
Sara Zeinert

Call to Order

Amanda Kusterer called the meeting to order at 10:06 a.m.

Emergency Egress Procedures

Dr. Harp announced the emergency egress instructions.

Roll Call

Ms. Smith called the roll, and a quorum was declared.

Introduction of Members

Amanda Kusterer asked the members to individually introduce themselves.

---DRAFT UNAPPROVED---

Approval of Minutes of May 20, 2019

Mark Llobell moved to approve the minutes of the May 20, 2019 meeting with a minor edit to correct the pronoun beside Ms. Opher's name on page 2. Christina Giuliano seconded. By roll call vote, the minutes were approved with the amendment.

Adoption of Agenda

Mark Llobell moved to adopt the agenda. The motion was seconded by Ms. Giuliano. By roll call vote, the agenda was adopted as presented.

Public Comment on Agenda Items (15 minutes)

Christy Evanko, BCBA, had a question on the requirement for a National Practitioners' Data Bank (NPDB) query report for behavior analyst and assistant behavior analyst license applicants. She was seeking to clarify what she thought to be a discrepancy between the instructions provided in the online application form and requirements for licensure in the regulation. Ms. Evanko also inquired whether there was a way for certified behavior analysts and assistant behavior analysts to continue working while waiting for their license in Virginia. She inquired that, perhaps, license reciprocity through the Board joining a licensure compact might be one way that this could be achieved.

Dr. Harp responded to her concerns. He explained that a NPDB self-query report is required for those working in the field of behavioral analysis prior to applying for licensure in the state. This would depend on the chronology of employment history and practice experience listed by the applicant on the application.

In response to Ms. Evanko's request to hear about how the Board of Medicine decided not to join the Interstate Medical Licensure Compact (Compact), Dr. Harp said that joining the Compact would lead to an increase in fees for the applicants and require the Board to hire additional personnel to process letters of qualification. There were also statutory issues of concern. The Board reasoned that it could offer a less costly, equally expeditious alternative with licensure by endorsement, for which the foundation was already in the law. Since December 2018, licensure by endorsement has been a successful and popular pathway to licensure for physicians..

Amanda Kusterer requested to add further discussion on this topic to the Advisory Board agenda for the next meeting.

New Business

1. Regulatory Update and Report of the 2020 General Assembly

Mrs. Yeatts provided a regulatory update and report of the 2020 General Assembly. She discussed bills of interest to members, including HB 65 which creates the Virginia Missing Child with Autism Alert Program and SB 177 which continues the Autism Advisory Council until 2022.

---DRAFT UNAPPROVED---

2. Approval of 2021 Meeting Calendar

Mark Llobell moved to approve the proposed 2021 meeting dates for the Advisory Board as presented. Autumn Kauffman seconded the motion. By roll call vote, members voted approval of the 2021 schedule of meetings.

3. Election of Officers

Ms. Christina Giuliano nominated herself for Chair. Amanda Kusterer nominated Autumn Kaufman as Vice-Chair. Both motions were seconded by Mark Llobell. By roll call vote, Christina Giuliano was elected Chair, and Autumn Kaufman was elected Vice-Chair.

Announcements

Ms. Opher informed the Advisory Board that there are currently 1,516 Behavior Analysts and 191 Assistant Behavior Analysts licensed by the Board.

Next Meeting Date

Next scheduled meeting: January 25, 2021 at 10:00 am.

Adjournment

With no other business to conduct, Ms. Kusterer adjourned the meeting at 12:13 p.m.

Christina Giuliano, BCBA, LBA
Chair

William L. Harp, M.D.
Executive Director

Pamela Y. Smith, Licensing Specialist

**List of Legislation
2022 General Assembly**

HB 27 COVID-19 vaccination status; mandatory COVID-19 vaccination prohibited, discrimination prohibited.

Chief patron: Anderson

Summary as introduced:

COVID-19 vaccination status; mandatory COVID-19 vaccination prohibited; discrimination prohibited. Prohibits the State Health Commissioner and the Board of Health, the Board of Behavioral Health and Developmental Services, the Department of Health Professions and any regulatory board therein, and the Department of Social Services from requiring any person to undergo vaccination for COVID-19 and prohibits discrimination based on a person's COVID-19 vaccination status with regard to education or public employment and in numerous other contexts.

HB 45 Health carriers; licensed athletic trainers.

Chief patron: Ware

Summary as introduced:

Health carriers; licensed athletic trainers. Requires health insurers and health service plan providers whose policies or contracts cover services that may be legally performed by a licensed athletic trainer to provide equal coverage for such services when rendered by a licensed athletic trainer. This bill is a recommendation of the Health Insurance Reform Commission.

HB 80 Healthcare Regulatory Sandbox Program; established, report, sunset date.

Chief patron: Davis

Summary as introduced:

Healthcare Regulatory Sandbox Program; established. Requires the Department of Health to establish the Healthcare Regulatory Sandbox Program to enable a person to obtain limited access to the market in the Commonwealth to temporarily test an innovative healthcare product or service on a limited basis without otherwise being licensed or authorized to act under the

laws of the Commonwealth. Under the Program, an applicant requests the waiver of certain laws, regulations, or other requirements for a 24-month testing period, with an option to request an additional six-month testing period. The bill provides application requirements, consumer protections, procedures for exiting the Program or requesting an extension, and recordkeeping and reporting requirements. The bill requires the Department to provide an annual report to the Chairmen of the House Committee on Health, Welfare and Institutions and the Senate Committee on Education and Health that provides information regarding each Program participant and that provides recommendations regarding the effectiveness of the Program. The bill has an expiration date of July 1, 2027.

HB 84 Out-of-state audiologists; providing free health care to an underserved area in the Commonwealth.

Chief patron: Kilgore

Summary as introduced:

Volunteer audiologists. Permits out-of-state audiologists to volunteer to provide free health care to an underserved area of the Commonwealth under the auspices of a publicly supporting nonprofit organization that sponsors the provision of health care to populations of underserved people if they do so for a period not exceeding three consecutive days and if the nonprofit organization verifies that the practitioner has a valid, unrestricted license in another state.

HB 99 Continuing education; approved courses for funeral service licensees, funeral directors, etc.

Chief patron: Head

Summary as introduced:

Continuing education; funeral service licensees, funeral directors, and embalmers.

Provides that approved continuing education courses for funeral service licensees, funeral directors, and embalmers shall include either one hour of compliance with laws and regulations governing the profession or one hour of preneed funeral arrangements per year. Current law requires at least one hour of compliance with laws and regulations governing the profession and at least one hour of preneed funeral arrangements per year. The bill also contains technical changes.

HB 102 Prescriptions; off-label use.

Chief patron: Greenhalgh

Summary as introduced:

Prescriptions; off-label use. Provides that a licensed health care provider with prescriptive authority may prescribe, administer, or dispense a drug that has been approved for a specific use by the U.S. Food and Drug Administration for an off-label use when the health care provider determines, in his professional judgement, that such off-label use is appropriate for the care and treatment of the patient, and prohibits a pharmacist from refusing to dispense a drug for off-label use if a valid prescription is presented. The bill also requires the Board of Health to include in regulations governing hospitals a provision that no hospital shall deny, revoke, terminate, diminish, or curtail in any way any professional or clinical privilege to a health care provider with prescriptive authority solely on the grounds that such health care provider prescribes, administers, or dispenses a drug that has been approved for a specific use by the U.S. Food and Drug Administration for an off-label use.

HB 145 Physician assistants; practice.

Chief patron: Head

Summary as introduced:

Practice of physician assistants. Removes the requirement that physician assistants appointed as medical examiners practice as part of a patient care team. For hospice program licensing, the bill adds physician assistants to the list of hospice personnel who may be part of a medically directed interdisciplinary team. The bill removes a reference to physician assistants in the definition of patient care team podiatrist. Finally, the bill permits physician assistants working in the field of orthopedics as part of a patient care team to utilize fluoroscopy for guidance of diagnostic and therapeutic procedures, provided other requirements are met.

HB 150 Virginia Freedom of Information Act; local public bodies to post meeting minutes on its website.

Chief patron: March

Summary as introduced:

Virginia Freedom of Information Act; posting of minutes; local public bodies. Requires, with certain exceptions outlined in the bill, any local public body subject to the provisions of the Freedom of Information Act to post meeting minutes on its official public government website, if any, within seven working days of final approval of the minutes. The bill provides that if a local

public body does not own or maintain an official public government website, it shall make copies of all meeting minutes available no later than seven working days after the conclusion of a meeting at a prominent public location in which meeting notices are regularly posted, at the office of the clerk of the public body, or, in the case of a public body that has no clerk, at the office of the chief administrator.

HB 154 Virginia Freedom of Information Act; public records database.

Chief patron: March

Summary as introduced:

Virginia Freedom of Information Act; public records database. Requires the establishment of a publicly available, centralized database for all public records. All public bodies will be required to transfer any public records in its possession to the database. The bill directs VITA, in consultation with the FOIA Council, to (i) convene a workgroup consisting of representatives from state and local public bodies in every region of the Commonwealth to conduct research, evaluate data, and determine a plan for implementation of the database and (ii) report its recommendations to the Governor and the Chairmen of the House Committee on General Laws and the Senate Committee on General Laws and Technology on or before December 1, 2022. The provisions of the bill that establish the central public records database shall become effective on July 1, 2023, and the provisions of the bill requiring every public body to submit its public records to VITA for inclusion in the central public records database shall become effective on January 1, 2024.

HB 191 Health Workforce Development; creates position of Special Advisor to the Governor.

Chief patron: Hodges

Summary as introduced:

Health workforce development; Special Advisor to the Governor for Health Workforce Development; Virginia Health Workforce Development Fund. Creates the position of Special Advisor to the Governor for Health Workforce Development (the Special Advisor) in the Office of the Governor; directs the Virginia Health Workforce Development Authority to collaborate with the Special Advisor, employers of health and health science professionals, and institutions that provide education and training for health and health science professionals to better align education and training initiatives with evolving workforce needs; directs the Authority to coordinate with and seek opportunities to expand existing workforce development initiatives in

the Commonwealth and partner with an institution of higher education in the Commonwealth to facilitate the sharing of information and resources and strengthen efforts to develop the health workforce in the Commonwealth; creates the Virginia Health Workforce Development Fund to support the work of the Authority and provide grants to regional health and health science workforce development initiatives; and directs the Authority to establish a process for the issuance of grants to regional health and health science workforce development initiatives.

HB 192 Opioids; repeals sunset provisions relating to prescriber requesting information about a patient.

Chief patron: Hodges

Summary as introduced:

Prescription of opioids; sunset. Repeals sunset provisions for the requirement that a prescriber registered with the Prescription Monitoring Program request information about a patient from the Program upon initiating a new course of treatment that includes the prescribing of opioids anticipated, at the onset of treatment, to last more than seven consecutive days.

HB 193 Drug Control Act; adds certain chemicals to Schedule I of Act.

Chief patron: Hodges

Summary as introduced:

Drug Control Act; Schedule I. Adds certain chemicals to Schedule I of the Drug Control Act. The Board of Pharmacy has added these substances to Schedule I in an expedited regulatory process. A substance added via this process is removed from the schedule after 18 months unless a general law is enacted adding the substance to the schedule.

HB 208 Regulatory Innovation, Department of and Virginia Regulatory Sandbox Program; created, report.

Chief patron: Webert

Summary as introduced:

Department of Regulatory Innovation; Virginia Regulatory Sandbox Program; created. Creates the Department of Regulatory Innovation to oversee the Virginia Regulatory Sandbox Program, also created by the bill, which allows an individual or business to demonstrate a product, production method, or service under a waiver or suspension of one or more state laws or regulations. The bill sets out the process by which an individual or business may apply for

participation in the Program, the role of the Department in reviewing such applications for approval or denial, and the requirements for participation in the Program, including provisions related to consumer protection.

HB 211 Cannabis products; retail sale by certain pharmaceutical processors.

Chief patron: Hodges

Summary as introduced:

Retail sale of cannabis products by certain pharmaceutical processors; sunset. Allows certain pharmaceutical processors to, under the oversight of the Board of Pharmacy, sell cannabis products at retail to unregistered persons who are 21 years of age or older without the need for a written certification. The bill provides that such sales will be subject to existing Board of Pharmacy regulations and other requirements set forth in the bill. The bill requires pharmaceutical processors engaging in such sales to pay a \$1 million fee and collect a 21 percent excise tax, both of which shall ultimately be allocated to the Virginia Cannabis Control Authority to be used to assist independent cannabis retailers located in designated rural and urban opportunity zones. The bill also requires such pharmaceutical processors to submit and comply with a plan describing how the pharmaceutical processor will, in its health service area, educate consumers about responsible consumption of cannabis products and incubate independent cannabis retailers or support and educate persons that wish to participate in the cannabis market. The bill directs the Board of Directors of the Virginia Cannabis Control Authority to promulgate regulations governing sales, cultivation, extraction, processing, manufacturing, wholesaling, and other related activities conducted pursuant to the provisions of the bill and provides that, upon the adoption of such regulations, oversight of such activities shall transfer from the Board of Pharmacy to the Board of Directors of the Virginia Cannabis Control Authority. The bill expires when pharmaceutical processors engaging in the sale of cannabis products pursuant to the provisions of the bill are authorized by the Virginia Cannabis Control Authority to apply for and be granted licenses to cultivate, manufacture, wholesale, and sell at retail to consumers 21 years of age or older retail marijuana and retail marijuana products.

HB 212 Abortion; right to informed consent.

Chief patron: Greenhalgh

Summary as introduced:

Provision of abortion; right to informed consent. Requires physicians and authorized nurse practitioners to follow certain procedures and processes to effect a pregnant woman's informed written consent prior to the performance of an abortion.

HB 213 Optometrists; allowed to perform laser surgery if certified by Board of Optometry.

Chief patron: Robinson

Summary as introduced:

Optometrists; laser surgery. Allows an optometrist who has received a certification to perform laser surgery from the Board of Optometry (the Board) to perform certain types of laser surgery of the eye and directs the Board to issue a certification to perform laser surgery to any optometrist who submits evidence satisfactory to the Board that he (i) is certified by the Board to prescribe for and treat diseases or abnormal conditions of the human eye and its adnexa with therapeutic pharmaceutical agents pursuant to Code requirements and (ii) has satisfactorily completed such didactic and clinical training programs provided by an accredited school or college of optometry that includes training in the use of lasers for the medically appropriate and recognized treatment of the human eye as the Board may require.

HB 234 Nursing homes, assisted living facilities, etc.; SHHR to study consolidating oversight/regulation.

Chief patron: Orrock

Summary as introduced:

Secretary of Health and Human Resources; study consolidating oversight and regulation of nursing homes, assisted living facilities, and other congregate living settings under a single state agency; report. Directs the Secretary of Health and Human Resources to study the feasibility of consolidating oversight and regulation of nursing homes, assisted living facilities, and other congregate living settings under a single state agency to improve efficiency and effectiveness of regulation and oversight, provide better transparency for members of the public navigating the process of receiving services from such facilities, and better protect the health and safety of the public and to develop recommendations for consolidation of such oversight and regulation and to report his findings and recommendations to the Governor and the Chairmen of the Senate Committees on Education and Health and Finance and

Appropriations and the House Committees on Appropriations and Health, Welfare and Institutions by October 1, 2022.

HB 242 Professional counselors, licensed; added to list of providers who can disclose or recommend records.

Chief patron: Adams, D.M.

Summary as introduced:

Practice of licensed professional counselors. Adds licensed professional counselors to the list of eligible providers who can disclose or recommend the withholding of patient records, face a malpractice review panel, and provide recommendations on involuntary temporary detention orders.

HB 243 Medicine, osteopathy, chiropractic, and podiatric medicine; requirements for practitioners.

Chief patron: Adams, D.M.

Summary as introduced:

Practitioners of medicine, osteopathy, chiropractic, and podiatric medicine; requirements. Increases the duration of postgraduate training required issuance of a license to practice medicine, osteopathy, chiropractic, or podiatric medicine from 12 months to 36 months requires every practitioner licensed to practice medicine, osteopathy, chiropractic, and podiatric medicine to obtain and maintain coverage by or to be named insured on a professional liability insurance policy with limits equal to the current limitation on damages set forth in the Code of Virginia.

HB 264 Public health emergency; out-of-state licensees, deemed licensure.

Chief patron: Head

Summary as introduced:

Public health emergency; out-of-state licensees; deemed licensure. Provides that when the Board of Health has entered an emergency order for the purpose of suppressing nuisances dangerous to the public health or communicable, contagious or infectious diseases or other dangers to the public life and health, a practitioner of a profession regulated by the Board of Medicine who is licensed in another state, the District of Columbia, or a United States territory or possession and who is in good standing with the applicable regulatory agency in that state, the

District of Columbia, or that United States territory or possession shall not be prevented or prohibited from engaging in the practice of that profession in the Commonwealth with a patient located in the Commonwealth when (i) such practice is for the purpose of providing continuity of care through the use of telemedicine services and (ii) the patient is a current patient of the practitioner with whom the practitioner has previously established a practitioner-patient relationship.

The bill also provides that when the Board of Health has entered an emergency order for the purpose of suppressing nuisances dangerous to the public health or communicable, contagious or infectious diseases or other dangers to the public life and health, individuals licensed or certified to practice medicine, osteopathic medicine, or podiatry or as a physician assistant, respiratory therapist, advanced practice registered nurse, registered nurse, licensed practical nurse, or nurse aide by another state, the District of Columbia, or a United States territory or possession shall be deemed to be licensed or certified to practice in the Commonwealth for a period of 30 days when certain criteria are met.

HB 282 Criminal records; effect of criminal convictions on licensure, data to be included in report.

Chief patron: Coyner

Summary as introduced:

Department of Professional and Occupational Regulation; effect of criminal convictions on licensure; data to be included in biennial report. Provides for consideration of certain factors to be made by any regulatory board prior to denying an application for licensure, certification, or registration where such denial was made in whole or in part upon the existence of the applicant's criminal record. The bill requires, beginning July 1, 2025, the Board of Bar Examiners, the Department of Health Professions, and the Department of Professional and Occupational Regulation to include certain data related to the criminal history of applicants to each agency's boards in its biennial report. The bill contains technical amendments.

HB 285 Clinical nurse specialist; practice agreements.

Chief patron: Adams, D.M.

Summary as introduced:

Clinical nurse specialist; practice agreements. Provides that a nurse practitioner licensed by the Boards of Medicine and Nursing in the category of clinical nurse specialist who does not

prescribe controlled substances or devices may practice in the practice category in which he is certified and licensed without a written or electronic practice agreement, provided that he (i) only practice within the scope of his clinical and professional training and limits of his knowledge and experience and consistent with the applicable standards of care, (ii) consult and collaborate with other health care providers based on the clinical condition of the patient to whom health care is provided, and (iii) establish a plan for referral of complex medical cases and emergencies to physicians or other appropriate health care providers. The bill also provides that a nurse practitioner licensed by the Boards in the category of clinical nurse specialist who prescribes controlled substances or devices shall practice in consultation with a licensed physician in accordance with a practice agreement between the nurse practitioner and the licensed physician.

HB 286 Nurse practitioners; declaration of death and cause of death.

Chief patron: Adams, D.M.

Summary as introduced:

Nurse practitioners; declaration of death and cause of death. Authorizes autonomous nurse practitioners, defined in the bill, to declare death and determine cause of death; allows nurse practitioners who are not autonomous nurse practitioners to pronounce the death of a patient in certain circumstances; and eliminates the requirement for a valid Do Not Resuscitate Order for the deceased patient for declaration of death by a registered nurse, physician assistant, or nurse practitioner who is not an autonomous nurse practitioner.

HB 287 Cannabis; replaces the term "marijuana" throughout the Cannabis Control Act.

Chief patron: Adams, D.M.

Summary as introduced:

Cannabis. Replaces the term "marijuana" with the term "cannabis" throughout the Cannabis Control Act. The bill also replaces the terms "botanical cannabis" and "cannabis" with the term "medical cannabis" throughout the sections of the Code of Virginia that govern pharmaceutical processors and the issuance of written certifications for the use of cannabis products and oil.

HB 304 Abortion; born alive human infant, treatment and care, penalty.

Chief patron: Freitas

Summary as introduced:

Abortion; born alive human infant; treatment and care; penalty. Requires every physician licensed by the Board of Medicine who attempts to terminate a pregnancy to (i) exercise the same degree of professional skill, care, and diligence to preserve the life and health of a human infant who has been born alive following such attempt as a reasonably diligent and conscientious health care practitioner would render to any other child born alive at the same gestational age and (ii) take all reasonable steps to ensure the immediate transfer of the human infant who has been born alive to a hospital for further medical care. A physician who fails to comply with the requirements of this act is guilty of a Class 4 felony and may be subject to disciplinary action by the Board of Medicine. The bill also requires every hospital licensed by the Department of Health to establish a protocol for the treatment and care of a human infant who has been born alive following performance of an abortion and for the immediate reporting to law enforcement of any failure to provide such required treatment and care.

HB 329 Administrative Process Act; public notice and economic impact, prohibition on certain regulations.

Chief patron: Freitas

Summary as introduced:

Administrative Process Act; regulations; public notice and economic impact; prohibition on certain regulations. Requires that an agency prepare a detailed notice of intended regulatory action for any regulation that it plans to promulgate. The bill requires that prior to publication by the Registrar of Regulations, the notice of intended regulatory action be submitted to the Attorney General for a determination as to whether the agency has the explicit authority to promulgate the regulation as proposed in the notice of intended regulatory action. The bill requires the Attorney General to report the notice of intended regulatory action and its determination to the Governor for approval. Within 10 days after publication by the Registrar of a notice of intended regulatory action for a proposed regulation, either the chairman or vice-chairman of the Joint Commission on Administrative Rules may submit a written directive to the agency that prepared the notice for the agency to hold a preliminary public hearing and comment period on the notice of intended regulatory action. The bill prescribes requirements for the conduct of such public hearings on regulatory matters. The bill requires the Department of Planning and Budget to prepare an economic impact analysis of the proposed regulation that includes a qualitative analysis of the regulation and a detailed quantitative analysis of the impact of the regulation, which must include analysis of the implementation and compliance costs that

are reasonably expected to be incurred by or passed along to the businesses, localities, and individuals that may be affected by the proposed regulation. The bill requires the Department of Planning and Budget to determine whether \$10 million or more in implementation and compliance costs are reasonably expected to be incurred by or passed along to businesses, localities, and individuals over any two-year period as a result of the proposed regulation. After the Department of Planning and Budget submits an economic impact analysis for a proposed regulation to the legislature but before the agency submits the proposed regulation for final approval by the Governor, the chairman or vice-chairman of the Joint Commission on Administrative Rules may request an independent economic impact analysis to be prepared by the Joint Legislative Audit and Review Commission for the proposed regulation. The Department of Planning and Budget is required to provide a detailed explanation of any variance between estimates in the two economic impact analyses. If either economic impact analysis indicates \$10 million or more in implementation and compliance costs, the bill requires the agency proposing the regulation to stop work on the proposed regulation until the regulation is modified to reduce its costs to below the \$10 million threshold or a bill is enacted explicitly allowing the regulation to proceed.

HB 353 Unaccompanied homeless youth; consent to medical care.

Chief patron: Willett

Summary as introduced:

Unaccompanied homeless youth; consent to medical care. Provides that except for the purposes of sterilization or abortion, a minor who is 14 years of age or older and who is an unaccompanied homeless youth shall be deemed an adult for the purpose of consenting to surgical or medical examination or treatment, including dental examination and treatment, for himself or his minor child. The bill describes evidence sufficient to determine that a minor is an unaccompanied homeless youth and provides that no health care provider shall be liable for any civil or criminal action for providing surgical or medical treatment to an unaccompanied homeless youth or his minor child without first obtaining the consent of his parent or guardian provided in accordance with the law, with the exception of liability for negligence in the diagnosis or treatment of such unaccompanied homeless youth.

HB 444 Virginia Freedom of Information Act; meetings conducted through electronic meetings.

Chief patron: Bennett-Parker

Summary as introduced:

Virginia Freedom of Information Act; meetings conducted through electronic meetings.

Amends existing provisions concerning electronic meetings by keeping the provisions for electronic meetings held in response to declared states of emergency, repealing the provisions that are specific to regional and state public bodies, and allowing public bodies to conduct all-virtual public meetings where all of the members who participate do so remotely and that the public may access through electronic communications means. Definitions, procedural requirements, and limitations for all-virtual public meetings are set forth in the bill, along with technical amendments.

HB 478 Wholesale prescription drug importation program; Sec. of Health and Human Resources to establish.

Chief patron: Subramanyam

Summary as introduced:

Secretary of Health and Human Resources; wholesale prescription drug importation program. Directs the Secretary of Health and Human Resources (the Secretary) to establish a wholesale prescription drug importation program that complies with the requirements of federal law and to report annually by October 1 to the Governor and the Chairmen of the House Committees on Appropriations and Health, Welfare and Institutions and the Senate Committees on Finance and Appropriations and Education and Health on the wholesale prescription drug importation program. The bill also requires the Secretary to (i) convene a workgroup composed of relevant stakeholders to develop a plan for implementation of the wholesale prescription drug importation program and report the plan to the Governor and the Chairmen of the House Committees on Appropriations and Health, Welfare and Institutions and the Senate Committees on Finance and Appropriations and Education and Health by December 1, 2022, and (ii) seek such federal approvals, waivers, exemptions, or agreements as may be necessary to enable all covered entities enrolled in or eligible for the federal 340B Drug Pricing Program to participate in the wholesale prescription drug importation program to the greatest extent possible without jeopardizing their eligibility for the 340B Drug Pricing Program by July 1, 2023.

HB 527 Interstate Medical Licensure Compact and Commission; created.

Chief patron: Helmer

Summary as introduced:

Interstate Medical Licensure Compact. Creates the Interstate Medical Licensure Compact to

create a process for expedited issuance of a license to practice medicine in the Commonwealth for qualifying physicians to enhance the portability of medical licenses while protecting patient safety. The bill establishes requirements for coordination of information systems among member states and procedures for investigation and discipline of physicians alleged to have engaged in unprofessional conduct. The bill creates the Interstate Medical Licensure Compact Commission to administer the compact.

HB 537 Telemedicine; out of state providers, behavioral health services.

Chief patron: Batten

Summary as introduced:

Telemedicine; out of state providers; behavioral health services. Allows certain practitioners of professions regulated by the Boards of Medicine, Counseling, Psychology, and Social Work who provide behavioral health services and who are licensed in another state, the District of Columbia, or a United States territory or possession and in good standing with such regulatory agency to engage in the practice of that profession in the Commonwealth with a patient located in the Commonwealth when (i) such practice is for the purpose of providing continuity of care through the use of telemedicine services and (ii) the practitioner has previously established a practitioner-patient relationship with the patient. The bill provides that a practitioner who provides behavioral health services to a patient located in the Commonwealth through use of telemedicine services may provide such services for a period of no more than one year from the date on which the practitioner began providing such services to such patient.

HB 555 Health care providers; transfer of patient records in conjunction with closure, etc.

Chief patron: Hayes

Summary as introduced:

Health care providers; transfer of patient records in conjunction with closure, sale, or relocation of practice; electronic notice permitted. Allows health care providers to notify patients either electronically or by mail prior to the transfer of patient records in conjunction with the closure, sale, or relocation of the health care provider's practice. Current law requires health care providers to provide such notice by mail.

HB 580 Covenants not to compete; health care professionals, civil penalty.

Chief patron: VanValkenburg

Summary as introduced:

Covenants not to compete; health care professionals; civil penalty. Adds health care professionals as a category of employee with whom no employer shall enter into, enforce, or threaten to enforce a covenant not to compete. The bill defines health care professional as any physician, nurse, nurse practitioner, physician's assistant, pharmacist, social worker, dietitian, physical and occupational therapist, and medical technologist authorized to provide health care services in the Commonwealth. The bill provides that any employer that violates the prohibition against covenants not to complete with an employee health care professional is subject to a civil penalty of \$10,000 for each violation.

HB 598 Registered surgical technologist; criteria for registration.

Chief patron: Hayes

Summary as introduced:

Registered surgical technologist; criteria for registration. Requires the Board of Medicine to register as a surgical technologist any applicant who has practiced as a surgical technologist or attended a surgical technologist training program at any time prior to October 1, 2022, and registers with the Board by December 31, 2022. Under current law, an applicant who practiced as a surgical technologist at any time in the six months prior to July 1, 2021, and registered by December 31, 2021, is eligible for certification by the Board. The bill also provides that no person shall use the designation "C.S.T." or any variation thereof unless such person (i) is certified by the Board and (ii) has successfully completed an accredited surgical technologist training program and holds a current credential as a certified surgical technologist from the National Board of Surgical Technology and Surgical Assisting or its successor.

HB 604 Nursing, Board of; power and duty to prescribe minimum standards, etc., for educational programs.

Chief patron: Sickles

Summary as introduced:

Board of Nursing; education programs; oversight. Gives the Board of Nursing the power and duty to prescribe minimum standards and approval curricula for educational programs preparing persons for registration as a medication aide and to provide periodic surveys of training programs.

HB 687 Virginia Freedom of Information Act; definitions; meeting.

Chief patron: Kory

Summary as introduced:

Virginia Freedom of Information Act; definitions; meeting. Changes the definition of "meeting" for purposes of the Virginia Freedom of Information Act to mean an assemblage of at least a quorum of the members of a public body. Under current law, a meeting is defined as an assemblage of as many as three members or a quorum, if less than three members, of a public body.

HB 712 Board of Pharmacy; safe sharps disposal.

Chief patron: Keam

Summary as introduced:

Board of Pharmacy; safe sharps disposal. Directs the Board of Pharmacy to amend its regulations to require all pharmacies to provide and maintain a safe sharps disposal container on the premises of the pharmacy for public use.

HB 745 Respiratory therapists; practice pending licensure.

Chief patron: Bell

Summary as introduced:

Respiratory therapists; practice pending licensure. Provides that a person who has graduated from an accredited respiratory therapy education program may practice with the title "Respiratory Therapist, License Applicant" or "RT-Applicant" until he has received a failing score on any examination required by the Board for licensure or six months from the date of graduation, whichever occurs sooner.

HB 772 Administrative Process Act; powers and duties of executive branch agencies; regulatory compliance.

Chief patron: Hodges

Summary as introduced:

Administrative Process Act; powers and duties of executive branch agencies; regulatory compliance officer. Provides that each executive branch agency in the Commonwealth authorized to promulgate regulations shall designate one person to serve as the regulatory

compliance officer for that agency and provides for the powers and duties of such regulatory compliance officer.

HB 850 Lyme disease; signage; instructional resources and materials.

Chief patron: Reid

Summary as introduced:

Lyme disease; signage; instructional resources and materials. Requires the Department of Conservation and Recreation to develop and post in each state park and interstate park signage addressing the appropriate steps a visitor can take to prevent tick bites, how to identify Lyme disease, and where to seek treatment. The bill requires the Department to install such signage first in those areas in the Commonwealth that have been identified as most susceptible to Lyme disease and to complete the installation of such signage in all state parks and interstate parks by January 1, 2028. The bill also requires the Secretary of Education, in collaboration with the Secretary of Health and Human Resources and the Secretary of Natural Resources, to develop instructional resources and materials to assist school boards and local and regional public libraries in establishing an education and awareness program to protect children from Lyme disease and other tick-borne infections. The bill provides that such instructional resources and materials (i) shall be appropriate for individuals of school age; (ii) shall provide information on the identification of ticks, recommended procedures for safe tick removal, and best practices to provide protection from ticks; (iii) may include video productions, pamphlets, and demonstration programs to illustrate the sizes of various ticks, including sizes before and after each variety has become engorged, to assist with the identification of a tick and the reaction on the skin that may result from a tick bite; and (iv) shall be made available to school boards and local and regional public libraries upon request at no charge.

HB 864 Professions and occupations; proof of identity.

Chief patron: Lopez

Summary as introduced:

Professions and occupations; proof of identity. Replaces the requirement for proof of citizenship to obtain a license, certificate, registration, or other authorization issued by the Commonwealth to engage in a business, trade, profession, or occupation with a requirement to provide proof of identity. The bill contains technical amendments.

HB 896 Nurse practitioner; patient care team provider.

Chief patron: Adams, D.M.

Summary as introduced:

Nurse practitioner; patient care team provider. Replaces the term "patient care team physician" with the term "patient care team provider" in the context of requirements for collaboration and consultation for nurse practitioners and provides that a nurse practitioner who is authorized to practice without a practice agreement may serve as a patient care team provider providing collaboration and consultation for nurse practitioners who are not authorized to practice without a practice agreement. Currently, only a licensed physician may provide collaboration and consultation, as evidenced by a practice agreement, for a nurse practitioner.

The bill also eliminates authority of a physician on a patient care team to require a nurse practitioner practicing as part of a patient care team to be covered by a professional liability insurance policy and the requirement that a nurse practitioner practicing without a practice agreement obtain and maintain coverage by or be named insured on a professional liability insurance policy.

HB 916 Health care providers; health records of minors; available via secure website.

Chief patron: Robinson

Summary as introduced:

Health care providers; health records of minors; available via secure website. Provides that every hospital and health care provider that makes patients' health records available to such patients through a secure website shall make all health records of a patient who is a minor available to such patient's parent through such secure website.

HB 921 Prescribing controlled substances; practitioner-patient relationship; telemedicine.

Chief patron: Orrock

Summary as introduced:

Prescribing controlled substances; practitioner-patient relationship; telemedicine.

Provides that a prescriber may establish a practitioner-patient relationship for the purpose of prescribing Schedule II through V controlled substances via synchronous interaction with a patient and for the purpose of prescribing Schedule VI controlled substances via asynchronous interaction. The terms "synchronous interaction" and "asynchronous interaction" are defined in the bill.

HB 933 Pharmaceutical processors.

Chief patron: Robinson

Summary as introduced:

Pharmaceutical processors. Amends the definition of "cannabis oil" by removing the requirement that only oil from industrial hemp be used in the formulation of cannabis oil. The bill requires the Board of Pharmacy to publish monthly on its website information including the number of practitioners, patients, registered agents, and parents or legal guardians of patients in each health service area who have registered with the Board, the number of written certifications issued, the number of pending applications for registrations, and the pace at which the Board is approving registrations. The bill directs the Board to promulgate numerous regulations related to pharmaceutical processors.

HB 939 Commissioner of Health; administration and dispensing of necessary drugs and devices.

Chief patron: Robinson

Summary as introduced:

Commissioner of Health; administration and dispensing of necessary drugs and devices during public health emergency. Allows the Commissioner of Health to authorize persons who are not authorized by law to administer or dispense drugs or devices to do so in accordance with protocols established by the Commissioner when the Board of Health has made an emergency order for the purpose of suppressing nuisances dangerous to the public health and communicable, contagious, and infectious diseases and other dangers to the public life and health. Current law limits the Commissioner's ability to make such authorizations to circumstances when the Governor has declared a disaster or a state of emergency or the United States Secretary of Health and Human Services has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public health emergency.

HB 976 Prescriptions; unapproved use.

Chief patron: LaRock

Summary as introduced:

Prescriptions; unapproved use. Provides that a licensed health care provider with prescriptive authority may prescribe, administer, or dispense a drug that has been approved for a specific use by the U.S. Food and Drug Administration for an unapproved use when the health care provider determines, in his professional judgement, that such unapproved use is appropriate for the care and treatment of the patient and prohibits a pharmacist from refusing to dispense a drug for unapproved use if a valid prescription is presented.

HB 981 Certain health professions; licensure by endorsement.

Chief patron: Scott, P.A.

Summary as introduced:

Certain health professions; licensure by endorsement. Requires the Boards of Dentistry, Medicine, and Nursing to grant an application by endorsement to any applicant who is licensed, certified, or registered in another state, the District of Columbia, or a United States territory or possession upon submission of evidence satisfactory to such board. Currently, the Boards of Dentistry, Medicine, and Nursing are authorized but not required to grant a license, certification, or registration by endorsement for applicants wishing to practice regulated professions.

HB 983 Provision of abortion; abortion on the basis of genetic disorder, sex, or ethnicity prohibited.

Chief patron: Scott, P.A.

Summary as introduced:

Provision of abortion; abortion on the basis of genetic disorder, sex, or ethnicity prohibited; penalty. Removes from the list of persons who can perform first trimester abortions any person jointly licensed by the Board of Medicine and Nursing as a nurse practitioner acting within such person's scope of practice. The bill adds procedures and processes, including the performance of an ultrasound, required to effect a pregnant person's informed written consent to the performance of an abortion. The bill adds language classifying facilities that perform five or more first trimester abortions per month as hospitals for the purpose of complying with regulations establishing minimum standards for hospitals. The bill also provides that a person who performs an abortion with knowledge that the abortion is sought solely and exclusively on

account of a genetic disorder, the sex, or the ethnicity of the unborn child is guilty of a Class 4 felony.

HB 1095 Health care; decision making; end of life; penalties.

Chief patron: Kory

Summary as introduced:

Health care; decision making; end of life; penalties. Allows an adult diagnosed with a terminal condition to request and an attending health care provider to prescribe a self-administered controlled substance for the purpose of ending the patient's life in a humane and dignified manner. The bill requires that a patient's request for a self-administered controlled substance to end his life must be given orally on two occasions and in writing, signed by the patient and one witness, and that the patient be given an express opportunity to rescind his request at any time. The bill makes it a Class 2 felony (i) to willfully and deliberately alter, forge, conceal, or destroy a patient's request, or rescission of request, for a self-administered controlled substance to end his life with the intent and effect of causing the patient's death; (ii) to coerce, intimidate, or exert undue influence on a patient to request a self-administered controlled substance for the purpose of ending his life or to destroy the patient's rescission of such request with the intent and effect of causing the patient's death; or (iii) to coerce, intimidate, or exert undue influence on a patient to forgo a self-administered controlled substance for the purpose of ending the patient's life. The bill also grants immunity from civil or criminal liability and professional disciplinary action to any person who complies with the provisions of the bill and allows health care providers to refuse to participate in the provision of a self-administered controlled substance to a patient for the purpose of ending the patient's life.

HB 1105 Practitioners, licensed; continuing education related to implicit bias and cultural competency.

Chief patron: McQuinn

Summary as introduced:

Board of Medicine; implicit bias and cultural competency. Requires all practitioners licensed by the Board of Medicine to complete two hours of continuing education in each biennium on topics related to implicit bias and cultural competency.

SB 14 Prescription drug donation program; Bd. of Pharmacy shall convene a work group to evaluate.

Chief patron: Favola

Summary as introduced:

Department of Health; prescription drug donation; awareness and coordination program.

Directs the Department of Health to develop, manage, and maintain a prescription drug donation awareness and coordination program in conjunction with the Board of Pharmacy's prescription drug donation program.

SB 73 COVID-19; prescriptions for hydroxychloroquine and ivermectin for treatment.

Chief patron: Chase

Summary as introduced:

Prescriptions for hydroxychloroquine and ivermectin for treatment of COVID-19. Provides that licensed health care providers with prescriptive authority may prescribe, administer, or dispense hydroxychloroquine and ivermectin to a patient with a clinical diagnosis of COVID-19. The bill prohibits the Board of Medicine from initiating a disciplinary action against a licensed health care provider solely for prescribing, administering, or dispensing hydroxychloroquine or ivermectin to a patient with a clinical diagnosis of COVID-19, provided such clinical diagnosis and treatment has been documented in the patient's medical record by such licensed health care provider.

SB 98 Summons; promise to appear after issuance.

Chief patron: Hanger

Summary as introduced:

Promise to appear after the issuance of a summons. Provides that if any person refuses to give a written promise to appear, the arresting officer shall give such person notice of the time and place of the hearing, note such person's refusal to give his written promise to appear on the summons, and forthwith release him from custody. Under current law, any person refusing to give such written promise to appear is required to be taken immediately by the arresting officer before a magistrate or other issuing officer having jurisdiction.

SB 129 Cremate; expands definition, alkaline hydrolysis.

Chief patron: Morrissey

Summary as introduced:

Definitions; cremate; crematory; alkaline hydrolysis. Expands the definition of "cremate" to include reducing a dead human body to ashes and bone fragments through alkaline hydrolysis, a water-based process of dissolution using alkaline chemicals and agitation known as aquamation. The bill adds "aquamator" as an additional term for the existing definition of "cremator." The bill also adds "aquatorium" as an additional term for the existing definition of "crematory" or "crematorium" and amends the definition to include a facility containing a pressure vessel. Under current law, "cremate" means to reduce a dead human body to ashes and bone fragments by the action of fire, and "crematory" or "crematorium" means a facility containing a furnace for cremation of dead human bodies.

SB 148 Public health emergencies; expands immunity for health care providers.

Chief patron: Norment

Summary as introduced:

Public health emergencies; immunity for health care providers. Expands immunity provided to health care providers responding to a disaster to include actions or omissions taken by the provider as directed by any order of public health in response to such disaster when a local emergency, state of emergency, or public health emergency has been declared.

SB 169 Practical nurses, licensed; authority to pronounce death.

Chief patron: Peake

Summary as introduced:

Licensed practical nurses; authority to pronounce death. Extends to licensed practical nurses the authority to pronounce the death of a patient, provided that certain conditions are met. Current law provides that physicians, registered nurses, and physician assistants may pronounce death.

SB 257 Counseling Compact; licensure of professional counselors.

Chief patron: Hashmi

Summary as introduced:

Licensure of professional counselors; Counseling Compact. Authorizes Virginia to become

a signatory to the Counseling Compact. The Compact permits eligible licensed professional counselors to practice in Compact member states, provided that they are licensed in at least one member state. The bill has a delayed effective date of January 1, 2023, and directs the Board of Counseling to adopt emergency regulations to implement the provisions of the bill. The Compact takes effect when it is enacted by a tenth member state.

SB 313 Retail sale of cannabis products by certain pharmaceutical processors and industrial hemp.

Chief patron: Ebbin

Summary as introduced:

Retail sale of cannabis products by certain pharmaceutical processors and industrial hemp processors; sunset. Allows certain pharmaceutical processors and industrial hemp processors to sell, under the oversight of the Board of Directors of the Virginia Cannabis Control Authority (the Board), cannabis products at retail to unregistered persons who are 21 years of age or older without the need for a written certification. The bill directs the Board to adopt and enforce regulations governing such sales that shall model certain Board of Pharmacy regulations and comply with other requirements set forth in the bill. The bill requires pharmaceutical processors and industrial hemp processors engaging in such sales to pay a \$1 million fee and collect a 21 percent excise tax, both of which shall ultimately be allocated to the Virginia Cannabis Control Authority to be used to assist independent cannabis retailers located in designated rural and urban opportunity zones. The bill also requires such pharmaceutical processors and industrial hemp processors to submit and comply with a plan describing how the processor will educate consumers about responsible consumption of cannabis products and incubate independent cannabis retailers or support and educate persons that wish to participate in the cannabis market. The bill has a delayed effective date of January 1, 2023, and shall expire when pharmaceutical processors and industrial hemp processors engaging in the sale of cannabis products pursuant to the provisions of the bill are authorized by the Virginia Cannabis Control Authority to apply for and be granted licenses to cultivate, manufacture, wholesale, and sell at retail to consumers 21 years of age or older retail marijuana and retail marijuana products.

SB 317 Out-of-state health care practitioners; temporary authorization to practice.

Chief patron: Favola

Summary as introduced:

Out-of-state health care practitioners; temporary authorization to practice; licensure by reciprocity for physicians; emergency. Allows a health care practitioner licensed in another state or the District of Columbia who has submitted an application for licensure to the appropriate health regulatory board to temporarily practice for a period of 90 days pending licensure, provided that certain conditions are met. The bill directs the Department of Health Professions to pursue reciprocity agreements with jurisdictions that surround the Commonwealth to streamline the application process in order to facilitate the practice of medicine. The bill requires the Department of Health Professions to annually report to the Chairmen of the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions the number of out-of-state health care practitioners who have utilized the temporary authorization to practice pending licensure and have not subsequently been issued full licensure. The bill contains an emergency clause.

EMERGENCY

SB 350 Health records; patient's right to disclosure.

Chief patron: Surovell

Summary as introduced:

Health records; patient's right to disclosure. Requires a health care entity to include in its disclosure of an individual's health records any changes made to the health records and an audit trail for such records if the individual requests that such information be included in the health records disclosure.

SB 369 Telemedicine services; practitioners licensed by Board of Medicine.

Chief patron: Stuart

Summary as introduced:

Telemedicine services; practitioners licensed by Board of Medicine. Allows a practitioner of a profession regulated by the Board of Medicine who is licensed in another state, the District of Columbia, or a United States territory or possession and who is in good standing with the applicable regulatory agency in that state, the District of Columbia, or that United States territory or possession to engage in the practice of that profession in the Commonwealth with a patient

located in the Commonwealth when (i) such practice is for the purpose of providing continuity of care through the use of telemedicine services and (ii) the patient is a current patient of the practitioner with whom the practitioner has previously established a practitioner-patient relationship.

SB 375 Optometrists; allowed to perform laser surgery if certified by Board of Optometry.

Chief patron: Petersen

Summary as introduced:

Optometrists; laser surgery. Allows an optometrist who has received a certification to perform laser surgery from the Board of Optometry (the Board) to perform certain types of laser surgery of the eye and directs the Board to issue a certification to perform laser surgery to any optometrist who submits evidence satisfactory to the Board that he (i) is certified by the Board to prescribe for and treat diseases or abnormal conditions of the human eye and its adnexa with therapeutic pharmaceutical agents pursuant to Code requirements and (ii) has satisfactorily completed such didactic and clinical training programs provided by an accredited school or college of optometry that includes training in the use of lasers for the medically appropriate and recognized treatment of the human eye as the Board may require.

SB 391 Cannabis control; retail market; penalties.

Chief patron: Ebbin

Summary as introduced:

Cannabis control; retail market; penalties. Establishes a framework for the creation of a retail marijuana market in the Commonwealth. The bill creates a regulatory and licensing structure for such retail market and for the cultivation, manufacture, and wholesale of marijuana and marijuana products to be administered by the Virginia Cannabis Control Authority. The bill also relocates and modifies numerous criminal provisions regarding marijuana offenses. The bill has staggered effective dates. The bill satisfies the reenactment requirement of Chapters 550 and 551 of the Acts of Assembly of 2021, Special Session I, but makes numerous modifications to the provisions of the 2021 legislation related to licensure, criminal penalties, expungement, regulation of certain hemp products, local regulation, and diversity, equity, and inclusion.

SB 408 Transmission of sentencing documents to the Department of Health Professions.

Chief patron: Dunnavant

Summary as introduced:

Transmission of sentencing documents to the Department of Health Professions and Department of Behavioral Health and Developmental Services. Provides that the attorney for the Commonwealth or his designee shall request the clerk of the court to transmit certified copies of sentencing documents to the Director of the Department of Health Professions or to the Director of the Department of Behavioral Health and Developmental Services when a practitioner or person who is licensed by a health regulatory board or the Department of Behavioral Health and Developmental Services has been convicted of a felony, crime involving moral turpitude, or crime that occurred during the course of practice for which such practitioner or person is licensed. The bill also provides that no clerk shall charge for copying or making for or furnishing to the Department of Health Professions or Department of Behavioral Health and Developmental Services a certified copy of a criminal judgment order or criminal sentencing order.

SB 414 Nurse practitioners; patient care team physician supervision capacity increased.

Chief patron: Kiggans

Summary as introduced:

Nurse practitioners; patient care team physician supervision capacity increased. Increases from six to 10 the number of nurse practitioners a patient care team physician may supervise at any one time in accordance with a written or electronic practice agreement.

SB 456 Practitioners, licensed; continuing education related to implicit bias and cultural competency.

Chief patron: Locke

Summary as introduced:

Board of Medicine; implicit bias and cultural competency. Requires all practitioners licensed by the Board of Medicine to complete two hours of continuing education in each biennium on topics related to implicit bias and cultural competency.

SB 480 Administrative Process Act; final orders; electronic retention.

Chief patron: McClellan

Summary as introduced:

Administrative Process Act; final orders; electronic retention. Clarifies that signed originals of final agency case decisions may be retained in an electronic medium. This bill is a recommendation of the Administrative Law Advisory Committee and the Virginia Code Commission.

SB 511 Opioid treatment program pharmacy; medication dispensing; registered nurses.

Chief patron: Suetterlein

Summary as introduced:

Opioid treatment program pharmacy; medication dispensing; registered nurses. Allows a registered nurse practicing at an opioid treatment program pharmacy to perform the duties of a pharmacy technician, provided that all take-home medication doses are verified for accuracy by a pharmacist prior to dispensing.

SB 542 Board of Pharmacy; written certification for the use of cannabis products.

Chief patron: Marsden

Summary as introduced:

Board of Pharmacy; written certification for the use of cannabis products. Requires the Board of Pharmacy to provide a form for practitioners to issue as written certification for the use of cannabis products. Current law requires the Office of the Executive Secretary of the Supreme Court to provide the form.

SB 590 License to teach dentistry; foreign dental program graduates.

Chief patron: Pillion

Summary as introduced:

License to teach dentistry; foreign dental program graduates. Allows the Board of Dentistry to grant, without examination, a faculty license to teach dentistry in an accredited dental program to a graduate of a dental school or college or the dental department of an institution of higher education in a foreign country that has been granted a certification letter from the dean or program director of an accredited dental program confirming that the applicant has clinical competency and clinical experience that meet the credentialing standards of the dental school with which the applicant is to be affiliated. The provisions of the bill expire on July 1, 2025.

SB 601 COVID-19 immunization; prohibition on requirement; discrimination prohibited.

Chief patron: Chase

Summary as introduced:

COVID-19 immunization; prohibition on requirement; discrimination prohibited. Prohibits the State Health Commissioner and the Board of Health, the Board of Behavioral Health and Developmental Services, the Department of Health Professions and any regulatory board therein, and the Department of Social Services from requiring any person, including any child, to undergo vaccination for COVID-19 and prohibits discrimination based on a person's COVID-19 vaccination status (i) with regard to education, employment, or issuance of a driver's license or other state identification or (ii) in numerous other contexts.

SB 621 Cannabis products; retail sales by certain pharmaceutical processors.

Chief patron: Dunnavant

Summary as introduced:

Retail sale of cannabis products by certain pharmaceutical processors; sunset. Allows certain pharmaceutical processors to, under the oversight of the Board of Pharmacy, sell cannabis products at retail to unregistered persons who are 21 years of age or older without the need for a written certification. The bill provides that such sales will be subject to existing Board of Pharmacy regulations and other requirements set forth in the bill. The bill requires pharmaceutical processors engaging in such sales to collect a 21 percent excise tax, to be deposited into the general fund, and pay a \$1 million fee, to be deposited into the account of the Virginia Cannabis Control Authority and used to assist independent cannabis retailers located in designated rural and urban opportunity zones. The bill also requires such pharmaceutical processors to submit and comply with a plan describing how the pharmaceutical processor will, in its health service area, educate consumers about responsible consumption of cannabis products and incubate independent cannabis retailers or support and educate persons that wish to participate in the cannabis market. The bill directs the Board of Directors of the Virginia Cannabis Control Authority to promulgate regulations governing sales, cultivation, extraction, processing, manufacturing, wholesaling, and other related activities conducted pursuant to the provisions of the bill and provides that, upon the effective date of such regulations, oversight of such activities shall transfer from the Board of Pharmacy to the Board of Directors of the Virginia

Cannabis Control Authority. The bill expires when pharmaceutical processors engaging in the sale of cannabis products pursuant to the provisions of the bill are authorized by the Virginia Cannabis Control Authority to apply for and be granted licenses to cultivate, manufacture, wholesale, and sell at retail to consumers 21 years of age or older retail marijuana and retail marijuana products.

SB 638 Board of Medicine; unconscious implicit bias and cultural competency.

Chief patron: Locke

Summary as introduced:

Board of Medicine; unconscious implicit bias and cultural competency. Requires all practitioners licensed by the Board of Medicine to complete two hours of continuing education in each biennium on topics related to unconscious implicit bias and cultural competency.

Counts: HB: 51 SB: 23

Agenda Item: Behavior Analysis Licensure Requirements

Staff Note: At the onset of the Covid-19 pandemic, the Board of Medicine implemented certain waivers and accommodations in its licensing process to streamline the licensure process for five professions so as to expedite licensure in those professions: MD, DO, DPM, PA, and RC. On September 20, 2021, the Credentials Committee of the Board asked Board staff to gather recommendations from the other professions licensed by the Board at their respective Advisory Board meetings on their licensure requirements with a view to streamlining their licensing process. The Behavior Analysis Advisory Board did not meet as scheduled on October 4, 2021 but below is an excerpt of the minutes of the Credentials Committee meeting on November 8, 2021 where appropriate recommendations on licensure requirements for the behavior analysis board were made:

EXCERPTS OF NOVEMBER 8, 2021 CREDENTIALS BUSINESS COMMITTEE MINUTES

“Behavior Analyst and Assistant Behavior Analyst

The Advisory Board on Behavior Analysis did not form a quorum to hold their meeting scheduled on October 4, 2021 but upon a motion made by Jane Hickey, seconded by Dr. Miller, the Committee unanimously voted to adopt the same requirements listed for the rest of the allied professions as follows: in addition to submitting primary source verification of current certification or credential as a Board Certified Behavior Analyst (BCBA) or Board Certified Assistant Behavior Analyst (BCaBA) issued by the Behavior Analyst Certification Board (BACB), a license applicant should also provide primary source verification of the National Practitioner Data Bank (NPDB) self-query report and one state license verification.

Copies of the following documents could be accepted: Other state license verifications, if submitted; a digitally-certified electronic copy of the NPDB report in lieu of a mailed report, and supporting documentation for any question answered ‘Yes’ on the application form that is deemed non-routine.

It is no longer necessary for applicants to submit a “Form B” employment verification.

The Committee also noted that if the advisory board have a different set of recommendations apart from these, they should be presented back to the Board.”

The above recommendations on licensing requirements for the Behavior Analysis advisory board were approved by the Executive Committee of the Board of Medicine on December 3, 2021.

Action: Review and make other recommendations to the Board as deemed necessary.

Board-Approved Recommendations of Behavior Analysis Licensure Requirements

Profession/Advisory Board Meeting Date	Primary Source Verification	Copies Accepted	No Longer Necessary
Behavior Analysis – Behavior Analyst and Assistant Behavior Analyst *10/4/21 *Did not meet*	<ul style="list-style-type: none"> ✓ Current BCBA or BCaBA certification by the BACB ✓ NPDB self-query report ✓ 1 state license verification 	Supporting document for question answered 'Yes' on the application form deemed non-routine Other state license verifications, if submitted Digitally-certified electronic copy of NPDB report, in lieu of a mailed report	"Form B" employment verification

behavior analyst and \$35 for an assistant behavior analyst. Renewals shall be due in the birth month of the licensee in each odd-numbered year. For 2021, the renewal of an active license as a behavior analyst shall be \$108, and the renewal fee for an inactive license shall be \$54; the renewal fee for an active license as an assistant behavior analyst shall be \$54, and the renewal fee for an inactive license shall be \$28.

4. The additional fee for processing a late renewal application within one renewal cycle shall be \$50 for a behavior analyst and \$30 for an assistant behavior analyst.

5. The fee for a letter of good standing or verification to another state for a license shall be \$10.

6. The fee for reinstatement of licensure pursuant to § 54.1-2408.2 of the Code of Virginia shall be \$2,000.

7. The handling fee for a returned check or a dishonored credit card or debit card shall be \$50.

8. The fee for a duplicate license shall be \$5.00, and the fee for a duplicate wall certificate shall be \$15.

B. Unless otherwise provided, fees established by the board shall not be refundable.

Part II

Requirements for Licensure as a Behavior Analyst or an Assistant Behavior Analyst

18VAC85-150-50. Application requirements.

An applicant for licensure shall submit the following on forms provided by the board:

1. A completed application and a fee as prescribed in 18VAC85-150-40.
2. Verification of certification as required in 18VAC85-150-60.
3. Verification of practice as required on the application form.
4. If licensed or certified in any other jurisdiction, verification that there has been no disciplinary action taken or pending in that jurisdiction.
5. Verification from the BACB on disciplinary action taken or pending by that body.

18VAC85-150-60. Licensure requirement.

An applicant for a license to practice as a behavior analyst or an assistant behavior analyst shall hold current certification as a BCBA® or a BCaBA® obtained by meeting qualifications and passage of the examination required for certification as a BCBA® or a BCaBA® by the BACB.

Advisory Board on:

Behavioral Analysts			10:00 a.m.
Mon - January 31	May 23	September 19	
Genetic Counseling			1:00 p.m.
Mon - January 31	May 23	September 19	
Occupational Therapy			10:00 a.m.
Tues - February 1	May 24	September 20	
Respiratory Care			1:00 p.m.
Tues - February 1	May 24	September 20	
Acupuncture			10:00 a.m.
Wed - February 2	May 25	September 21	
Radiological Technology			1:00 p.m.
Wed - February 2	May 25	September 21	
Athletic Training			10:00 a.m.
Thurs - February 3	May 26	September 22	
Physician Assistants			1:00 p.m.
Thurs - February 3	May 26	September 22	
Midwifery			10:00 a.m.
Fri - February 4	May 27	September 23	
Polysomnographic Technology			1:00 p.m.
Fri - February 4	May 27	September 23	
Surgical Assisting			10:00 a.m.
Mon - February 7	Tues - May 31	September 26	