

VIRGINIA RADIOLOGICAL SOCIETY

Annual Meeting

3 August, 2024

GENERAL ASSEMBLY UPDATE

[HB 353](#) - [Hope](#) - Hospitals; emergency departments to have at least one licensed physician on duty at all times.

- Requires any hospital with an emergency department to have at least one licensed physician on duty and physically present at all times.
- Current law requires such hospitals to have a licensed physician on call, though not necessarily physically present on the premises, at all times.
- The bill has a delayed effective date of July 1, 2025.
- The bill has been signed by the Governor.

GENERAL ASSEMBLY UPDATE

[HB 964](#) - [Willett](#) - Medicine, Board of; attorneys allowed to serve as executive director for the Board.

- Allows attorneys to serve as the executive director for the Board of Medicine.
- Under current law, the executive director for the Board of Medicine must be a physician.
- The bill has been signed by the Governor.

GENERAL ASSEMBLY UPDATE

HB 971 - Tran - Nurse practitioners; patient care team provider, autonomous practice.

- Lowers the number of years required for a nurse practitioner to gain autonomous practice from five years to three years.
- Also, allows a nurse practitioner to act as a patient care team provider for the purposes of supervising another nurse practitioner if that nurse practitioner can prove that they were unable to secure a patient care team physician in two consecutive 60-day periods.
- The changes in this bill were a compromise which increased the proposed number of years before autonomous practice from two year to three and also removed efforts to abolish the Joint Board of Medicine and Nursing and an attempt to establish an interstate nursing compact.
- The bill has been signed by the Governor.

GENERAL ASSEMBLY UPDATE

[HB 1322](#) - [Sickles](#) - Certified registered nurse anesthetist; elimination of supervision requirement.

- Removes the word supervision and replaces it with consultation.
- "Consultation" means communicating data and information, exchanging clinical observations and assessments, accessing and assessing additional resources and expertise, problem-solving, and arranging for referrals, testing, or studies.
- This bill was continued to the 2025 session with a letter to the Joint Commission on Healthcare to conduct a study on the issue.

GENERAL ASSEMBLY UPDATE

SB 33 - Locke - Certified registered nurse anesthetists; supervision during an operation or procedure.

- Clarifies that supervision of a certified registered nurse anesthetist requires that a licensed doctor of medicine, osteopathy, podiatry, or dentistry is present during an operation or procedure or is immediately available to respond and provide patient care as needed.
- The bill directs the Secretary of Health and Human Resources, in collaboration with the Board of Medicine, Board of Nursing, and Department of Health Professions, to convene a work group of relevant stakeholders to evaluate and make recommendations to increase the anesthesia provider workforce in the Commonwealth.
- This bill was continued to the 2025 session with a letter to the Joint Commission on Healthcare to conduct a study on the issue.

GENERAL ASSEMBLY UPDATE

[HB 1130](#) - [Hayes](#) - Unconscious bias and cultural competency; Bd. of Medicine shall require continuing education, etc.

- Directs the Board of Medicine to require unconscious bias and cultural competency training as part of the continuing education requirements for renewal of licensure.
- The bill specifies requirements for the training and requires the Board of Medicine to report on the training to the Department of Health and the Virginia Neonatal Perinatal Collaborative.
- This bill is identical to SB 35 (Locke) which also passed the General Assembly.
- The bill was significantly amended by the Governor to require one time CME only for physicians that work with “maternal populations”. Those amendments were subsequently rejected.
- Vetoed by the Governor.

GENERAL ASSEMBLY UPDATE

[SB 98](#) - [Favola](#) - Health insurance; prior authorization.

- Requires that if a prior authorization request is approved and services or supplies have been scheduled, provided, or delivered to the patient consistent with the authorization, the carrier shall not revoke, limit, condition, modify, or restrict that authorization.
- The bill has been signed by the Governor.

GENERAL ASSEMBLY UPDATE

[SB 133](#) - [Head](#) - Physician assistants; practice agreement exemption.

- Allows physician assistants employed by a hospital or employed in certain facilities operated by the Department of Behavioral Health and Developmental Services or in federally qualified health centers designated by the Centers for Medicare and Medicaid Services to practice without a separate practice agreement if the credentialing and privileging requirements of the applicable facility include a practice arrangement.
- The bill has been signed by the Governor.

GENERAL ASSEMBLY UPDATE

[SB 277](#) - [Hashmi](#) - Certificate of public need; expedited review process, etc.

- Directs the Board of Health to convene the State Health Services Plan Task Force to develop recommendations on expedited review of project types subject to certificate of public need requirements that are generally non-contested and present limited health planning impacts.
- The bill has been signed by the Governor.

GENERAL ASSEMBLY UPDATE

[SB 351](#) - [Boysko](#) - Advanced practice registered nurses and licensed certified midwives; joint licensing.

- Moves the professions of advanced practice registered nurses and licensed certified midwives from being licensed jointly by the Board of Medicine and the Board of Nursing to being licensed by the Board of Nursing only.
- Would have abolished the Joint Board.
- This bill failed to pass committee and is dead for the year.

GENERAL ASSEMBLY UPDATE

[SB 360](#) - [VanValkenburg](#) - Employment; definitions, covenants not to compete prohibited, limitations, civil penalty.

- Originally, this bill only applied to healthcare professionals but was amended in committee to ban all non-competes.
- The bill failed to pass the Senate and is dead for the year.

GENERAL ASSEMBLY UPDATE

[SB 493](#) - [Stanley](#) - Medical malpractice; limitations on recovery, certain actions

- Eliminates the cap on the recovery in actions against health care providers for medical malpractice where the act or acts of malpractice occurred on or after July 1, 2024, and occurred against a patient age 10 or younger.
- The bill reported from committee but was referred the Finance and Appropriations committee where it failed to report. It is dead for the year but a workgroup will be established to address the issues surrounding the cap.

GENERAL ASSEMBLY UPDATE

Questions