Executive Committee Meeting

Virginia Board of Medicine

April 13, 2018

8:30 a.m.

Executive Committee

Friday, April 13, 2018 @ 8:30 a.m. 9960 Mayland Drive, Suite 200 Richmond, VA 23230 Board Room 4

I	Page
Call to Order of the Executive Committee—Kevin O'Connor, MD, President, Chair	
Emergency Egress Procedures	.i
Roll Call	
Approval of Minutes – December 1, 2017	. 1-8
Adoption of Agenda	
Public Comment on Agenda Items	
DHP Director's Report – David Brown, DC	
President's Report - Kevin O'Connor, MD	
Executive Director's Report – William L. Harp, MD	.6-15
NEW BUSINESS:	
 Regulatory Actions – Ms. Yeatts Report of the 2018 General Assembly Chart of Regulatory Actions Final Regulations for Licensure by Endorsement 	.25-25
Announcements	31
Next scheduled meeting: August 3, 2018	
Adjournment	

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

Exit the room using one of the doors at the back of the room. (**Point**) Upon exiting the room, turn **RIGHT.** Follow the corridor to the emergency exit at the end of the hall.

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VIRGINIA BOARD OF MEDICINE

EXECUTIVE COMMITTEE MINUTES

Friday, December 1, 2017

Department of Health Professions

Henrico, VA

PUBLIC HEARING

Dr. O'Connor opened the floor at 8:34 a.m. for comments on the Proposed Regulations on the Prescribing of Opioids. Dr. O'Connor stated that the final regulations will be adopted by the Full Board on February 15, 2018.

Dr. O'Connor acknowledged the written comment submission from William O'Keefe. In his letter, Mr. O'Keefe urges the Board not to treat all classes of opioids the same and to place greater reliance on the existing monitoring system to track potential overprescribing.

George Carter, Administrator of the Statewide Sickle Cell Chapters of Virginia, Inc. addressed the Committee and expressed his concerns about the adverse effects the opioid laws could have on sickle cell patients. Mr. Carter asked that consideration be given to adding an amendment at the beginning of the documentation that states the dosing limits on the use of long-acting opioids should not be applied to patients with sickle cell disease.

The floor closed at 8:46 a.m.■

CALL TO ORDER:

Dr. O'Connor called the Executive Committee meeting to

order at 8:46 a.m.

ROLL CALL:

Ms. Opher called the roll; a quorum was established.

MEMBERS PRESENT:

Kevin O'Connor, MD, President & Chair

Syed Salman Ali, MD

Lori Conklin, MD, Secretary-Treasurer

Alvin Edwards, MDiv, PhD

Jane Hickey, JD

Nathaniel Tuck, Jr., DC, Vice-President

MEMBERS ABSENT:

Randy Clements, DPM

Maxine Lee, MD

STAFF PRESENT:

Jennifer Deschenes, JD, Deputy Director, Discipline

Alan Heaberlin, Deputy Director, Licensure

Barbara Matusiak, MD, Medical Review Coordinator

Colanthia Morton Opher, Operations Manager

Sherry Gibson, Administrative Assistant

David Brown, DC, DHP Director Elaine Yeatts, Sr. Policy Analyst

Erin Barrett, JD, Assistant Attorney General

OTHERS PRESENT: George H. Carter, Statewide Sickle Cell Chapters of Virginia

Floyd Herdrich, Acupuncture, LAc

W. Scott Johnson, Medical Society of Virginia

James Pickral, VSPS

Chris Nolen, International Aesthetic & Laser Association

Julie Galloway, Medical Society of Virginia

EMERGENCY EGRESS INSTRUCTIONS

Dr. Tuck provided the emergency egress instructions.

APPROVAL OF MINUTES OF AUGUST 4, 2017

Dr. Edwards moved to approve the meeting minutes of August 4, 2017 as presented. The motion was seconded and carried unanimously.

ADOPTION OF AGENDA

Dr. Edwards moved to adopt the agenda as presented. The motion was seconded and carried unanimously.

PUBLIC COMMENT

There was no public comment.

DHP DIRECTOR'S REPORT

Dr. Brown began by thanking Dr. Hazel for his 8 years of service with the Commonwealth. Dr. Brown noted that the workgroup convened to develop core competencies on prescribing and pain management has submitted their report to Secretary Hazel's office and will be provided to the Governor. Secretary Hazel asked that the document be used by non-prescribers and from its use, see how to derive a tool that can be useful in the schools.

Dr. Brown noted that a probable cause video designed to assist board members in their appointment duties is in the works. Additionally, a video library is being built that will cover topics such as FOIA, confidentiality, etc.; the Board's input is welcomed.

PRESIDENT'S REPORT

No report.

EXECUTIVE DIRECTOR'S REPORT

No report.

--- DRAFT UNAPPROVED --

NEW BUSINESS

Chart of Regulatory Actions

Ms. Yeatts reviewed the status of regulations for the Board as of November 20, 2017 and noted that there were no additional updates.

This report was for informational purposes only.

<u>Proposed Regulations for Performance of and for Supervision and Direction of Laser Hair</u> Removal AND Repeal of Guidance Document on Laser Hair Removal

Ms. Yeatts went over the legislation, the proposed regulations that the Regulatory Advisory Panel (RAP) on Laser Hair developed, and the public comment received on the subject. She said that the consensus was that the supervising licensee should be on-site to oversee the procedures performed by non-licensed personnel. She also advised that an identical set of regulations will be presented to the Joint Boards of Nursing and Medicine before coming back to the Full Board of Medicine in February 2018.

Dr. O'Connor asked if the RAP discussed the number of cases a supervisor should oversee before considering the non-licensed individual "properly trained".

Ms. Yeatts advised that there was discussion but no recommendation.

Dr. Ali noted that in other regulated disciplines there are stringent continuing education requirements in the regulations (e.g., AMA accredited), and asked if the RAP had considered specifying formalized training that can be pointed to or to capture the user's participation.

Ms. Deschenes stated there does not appear to be a nationally recognized accrediting body for the practice of laser hair removal, as is seen with other accrediting organizations that offer training for certain specialties. Ms. Deschenes also noted that this law requires specific licensees to oversee this practice and ensure competence of themselves and those they supervise, and the licensees will be held accountable to ensure public protection. Ms. Deschenes commented that this practice has been going on for years and the Board has received very few complaints in this area.

Ms. Barrett reminded the members that the Board still has the discretion to ascertain whether training is appropriate.

Dr. Ali asked if the supervisor is required to be licensed in Virginia as the law does not indicate so.

Ms. Deschenes confirmed that the MD, PA or NP would be required to hold an active license in Virginia in order to supervise this practice in Virginia.

MOTION: Dr. Conklin moved to adopt the proposed regulations to implement HB2119 in 18VAC85-20 (Regulations for Doctors of Medicine, Osteopathic Medicine, Podiatry and

4 --- DRAFT UNAPPROVED --

Chiropractic) and 18VAC85-50 (Regulations for Physicians as recommended by the Regulatory Advisory Panel. The motion was seconded and carried unanimously.

MOTION: After adoption of the above proposed regulations, Dr. Tuck moved to repeal Guidance Document 85-7. The motion was seconded and carried unanimously.

Guidance Document on the completion of FORM B

Mr. Heaberlin stated that the Guidance Document was developed to address reoccurring issues some applicants face with completion of FORM B as required for licensure.

MOTION: Dr. Conklin moved to adopt Guidance Document 85-3 as presented. The motion was seconded and carried unanimously.

Dr. Edwards asked the Committee to revisit the matter regarding the unintended consequences of the opioid laws and how they may affect sickle cell patients.

Dr. Ali said that the comments presented by Mr. Carter were well presented and received. However, the opioid guidelines do not apply to inpatient hospital admissions, i.e., dosages are not restricted in the treatment of acute or chronic pain during an inpatient hospital admission. Additionally, a practitioner may exceed 120 mg as long as they document the reason for doing so (for example, sickle cell crisis). A physician being fearful to prescribe is understood, but the Board has no ability to change that mindset.

Ms. Deschenes stated that the Board is aware of the levels of medication that are prescribed to sickle cell patients and she could not recall the Board ever receiving a complaint about a physician prescribing high doses of opioids to sickle cell patients. She also explained that in compliance with the law, the Board and Enforcement have recently begun receiving reports from the Prescription Monitoring Program on prescribers that exceed specified parameters, and noted a sickle cell provider appeared in that audit and the Board recognized the pain issues inherent in sickle cell patients and closed the matter. However, Ms. Deschenes stated the Board could consider carving out this condition.

Dr. O'Connor agreed but noted that if the Board begins carving out specific conditions, it could be endless. The physician has the latitude to prescribe as long as it is well documented.

Dr. Conklin agreed that the list of carve outs for conditions such as sickle cell, pancreatitis, Crohn's, etc. could require endless modification to the Regulations, when the Regulations permit prescribing the necessary dosage for these conditions with "reasonable justification" for such doses documented in the record.

Dr. Tuck noted that some places in the regulations say "should be documented" and in other places is says "should be considered". Is there a hole?

Dr. O'Connor noted it is very difficult for a practitioner to prove something occurred or was considered, if such has not been documented in the record.

ANNOUNCEMENTS

The next meeting of the Committee will be April 13, 2018 at 8:30 a.m.

ADJOURNMENT

With no additional business, the meeting adjourned at 9:20 a.m.

Kevin O'Connor, MD
President, Chair

Colanthia M. Opher
Recording Secretary

Jennifer Deschenes, JD Deputy Executive Director, Discipline

Virginia Department of Health Professions Cash Balance As of February 28, 2018

		102- Medicine
Board Cash Balance as June 30, 2017	\$	10,051,272
YTD FY18 Revenue		3,621,601
Less: YTD FY18 Direct and Allocated Expenditures	7 San 20 San	5,262,436
Board Cash Balance as February 28, 2018		8,410,437

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10200 - Medicine

For the Period Beginning July 1, 2017 and Ending February 28, 2018

			Amount	
Account			Under/(Over)	
Number Account Description	Amount	Budget	Budget	% of Budget
4002400 Fee Revenue				
4002401 Application Fee	762,702.00	964,774.00	202,072.00	79.05%
4002402 Examination Fee	1,964.00		(1,964.00)	0.00%
4002406 License & Renewal Fee	2,801,974.00	5,959,129.00	3,157,155.00	47.02%
4002407 Dup. License Certificate Fee	5,555.00	3,375.00	(2,180.00)	164.59%
4002409 Board Endorsement - Out	8,510.00	49,820.00	41,310.00	17.08%
4002421 Monetary Penalty & Late Fees	38,906.00	94,179.00	55,273.00	41.31%
4002432 Misc. Fee (Bad Check Fee)	245.00	175.00	(70.00)	140.00%
Total Fee Revenue	3,619,856.00	7,071,452.00	3,451,596.00	51.19%
4003000 Sales of Prop. & Commodities				
4003020 Misc. Sales-Dishonored Payments	1,745.00	-	(1,745.00)	0.00%
Total Sales of Prop. & Commodities	1,745.00		(1,745.00)	0.00%
Total Revenue	3,621,601.00	7,071,452.00	3,449,851.00	51.21%
5011110 Employer Retirement Contrib.	111,246.60	174,066.00	62,819.40	63.91%
5011120 Fed Old-Age Ins- Sal St Emp	51,618.54	88,287.00	36,668.46	58.47%
5011130 Fed Old-Age Ins- Wage Earners	597.69	-	(597.69)	0.00%
5011140 Group Insurance	10,946.27	16,904.00	5,957.73	64.76%
5011150 Medical/Hospitalization Ins.	143,032.11	245,763.00	102,730.89	58.20%
5011160 Retiree Medical/Hospitalizatn	9,790.34	15,226.00	5,435.66	64.30%
5011170 Long term Disability Ins	4,952.41	8,517.00	3,564.59	58.15%
Total Employee Benefits	332,183.96	548,763.00	216,579.04	60.53%
5011200 Salaries				
5011230 Salaries, Classified	797,587.20	1,290,330.00	492,742.80	61.81%
5011250 Salaries, Overtime	5,360.39	670.00	(4,690.39)	800.06%
Total Salaries	802,947.59	1,291,000.00	488,052.41	62.20%
5011300 Special Payments				
5011340 Specified Per Diem Payment	6,400.00	21,150.00	14,750.00	30.26%
5011380 Deferred Compnstn Match Pmts	3,875.80	9,298.00	5,422.20	41.68%
Total Special Payments	10,275.80	30,448.00	20,172.20	33.75%
5011400 Wages				
5011410 Wages, General	7,812.90		(7,812.90)	0.00%
Total Wages	7,812.90		(7,812.90)	0.00%
5011530 Short-trm Disability Benefits	28,387.28		(28,387.28)	0.00%
Total Disability Benefits	28,387.28	-	(28,387.28)	0.00%
5011600 Terminatn Personal Svce Costs			(==,====,	3.00 %
5011620 Salaries, Annual Leave Balanc	68.00		(68.00)	0.00%
5011660 Defined Contribution Match - Hy	532.65		(532.65)	0.00%
Total Terminatn Personal Svce Costs	600.65		(600.65)	0.00%
5011930 Turnover/Vacancy Benefits			(000.00)	0.00%
Total Personal Services	1,182,208.18	1,870,211.00	688,002.82	63.21%
5012000 Contractual Sys	1,102,200.10	1,070,211.00	000,002.02	03.21%
5012100 Communication Services				

Virginia Department of Health Professions Revenue and Expenditures Summary Department 10200 - Medicine

For the Period Beginning July 1, 2017 and Ending February 28, 2018

Account				Amount Under/(Over)	
Account Number	Account Description	Amount	Budget	Budget	% of Dudget
	Express Services	2,941.26	5,997.00	3,055.74	% of Budget 49.05%
	Messenger Services	125.30	5,997.00	(125.30)	0.00%
	Postal Services	27,143.09	66,802.00	39,658.91	40.63%
20.000000000000000000000000000000000000	Printing Services	1,308.82	3,026.00	1,717.18	43.25%
	Telecommunications Svcs (VITA)	4,322.39	10,500.00	6,177.61	41.17%
	Telecomm. Svcs (Non-State)	765.00	10,500.00	(765.00)	0.00%
	Inbound Freight Services	21.56	35.00	13.44	
3012130	Total Communication Services	36,627.42	86,360.00		61.60% 42.41%
E012200	Employee Development Services	30,027.42	80,300.00	49,732.58	42.4170
	Organization Memberships	6,020.00	7 229 00	1 209 00	83.29%
	Employee Trainng/Workshop/Conf	60.00	7,228.00	1,208.00	
		60.00	4,283.00	4,223.00	1.40%
3012230	Employee Tuition Reimbursement Total Employee Development Services	6,000,00	752.00	752.00	0.00%
E012200	Health Services	6,080.00	12,263.00	6,183.00	49.58%
	X-ray and Laboratory Services		2 209 00	2 202 00	0.000/
3012360	Total Health Services		2,298.00	2,298.00	0.00%
E042400			2,298.00	2,298.00	0.00%
	Mgmnt and Informational Svcs	- 24 250 00	440.000.00	00.000.00	00.440/
	Fiscal Services	31,359.62	119,963.00	88,603.38	26.14%
	Management Services	895.92	1,797.00	901.08	49.86%
	Public Infrmtnl & Relatn Svcs	12.00	- F F70 00	(12.00)	0.00%
5012470	Legal Services	1,872.00	5,579.00	3,707.00	33.55%
E042E00	Total Mgmnt and Informational Svcs	34,139.54	127,339.00	93,199.46	26.81%
	Repair and Maintenance Svcs		4 705 00		
5012530	Equipment Repair & Maint Srvc		1,705.00	1,705.00	0.00%
5040000	Total Repair and Maintenance Svcs		1,705.00	1,705.00	0.00%
	Support Services	405.400.04	100 707 00		
	Clerical Services	105,182.91	189,795.00	84,612.09	55.42%
	Food & Dietary Services	4,924.36	12,698.00	7,773.64	38.78%
	Laundry and Linen Services Manual Labor Services	266.85	-	(266.85)	0.00%
		10,383.43	24,912.00	14,528.57	41.68%
	Production Services	69,039.83	153,625.00	84,585.17	44.94%
5012680	Skilled Services	258,145.13	531,779.00	273,633.87	48.54%
5040500	Total Support Services	447,942.51	912,809.00	464,866.49	49.07%
	Technical Services				
	VITA InT Int Cost Goods&Svs	372.41	₩	(372.41)	0.00%
5012790	Computer Software Dvp Svs	825.00		(825.00)	0.00%
	Total Technical Services	1,197.41	-	(1,197.41)	0.00%
	Transportation Services				
	Travel, Personal Vehicle	12,173.31	25,626.00	13,452.69	47.50%
	Travel, Public Carriers	933.10	4,170.00	3,236.90	22.38%
	Travel, Subsistence & Lodging	6,881.41	21,524.00	14,642.59	31.97%
5012880	Trvl, Meal Reimb- Not Rprtble	3,172.75	7,407.00	4,234.25	42.83%
	Total Transportation Services	23,160.57	58,727.00	35,566.43	39.44%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10200 - Medicine
For the Period Beginning July 1, 2017 and Ending February 28, 2018

Account				Amount Under/(Over)	
Number	Account Description	Amount	Budget	Budget	% of Budget
	Total Contractual Svs	549,147.45	1,201,501.00	652,353.55	45.71%
5013000	Supplies And Materials				
5013100	O Administrative Supplies				
5013120	O Office Supplies	6,246.22	14,609.00	8,362.78	42.76%
5013130	Stationery and Forms		3,614.00	3,614.00	0.00%
	Total Administrative Supplies	6,246.22	18,223.00	11,976.78	34.28%
5013300	Manufctrng and Merch Supplies				
5013350	Packaging & Shipping Supplies		94.00	94.00	0.00%
	Total Manufctrng and Merch Supplies	×	94.00	94.00	0.00%
5013600	Residential Supplies				
5013620	Food and Dietary Supplies	431.33	528.00	96.67	81.69%
5013630	Food Service Supplies	114.56	1,129.00	1,014.44	10.15%
	Total Residential Supplies	545.89	1,657.00	1,111.11	32.94%
5013700	O Specific Use Supplies				
5013730	Computer Operating Supplies		166.00	166.00	0.00%
	Total Specific Use Supplies		166.00	166.00	0.00%
	Total Supplies And Materials	6,792.11	20,140.00	13,347.89	33.72%
5014000	O Transfer Payments				
5014100	Awards, Contrib., and Claims				
5014130) Premiums	448.00	<u>-</u>	(448.00)	0.00%
	Total Awards, Contrib., and Claims	448.00	<u> - </u>	(448.00)	0.00%
	Total Transfer Payments	448.00	-	(448.00)	0.00%
5015000	Continuous Charges				
5015100	Insurance-Fixed Assets				
5015160	Property Insurance	- Ta-	485.00	485.00	0.00%
	Total Insurance-Fixed Assets	-	485.00	485.00	0.00%
5015300	Operating Lease Payments				
5015340	Equipment Rentals	4,596.79	7,200.00	2,603.21	63.84%
5015350	Building Rentals	348.14		(348.14)	0.00%
5015360	Land Rentals		100.00	100.00	0.00%
5015390	Building Rentals - Non State	84,626.14	150,699.00	66,072.86	56.16%
	Total Operating Lease Payments	89,571.07	157,999.00	68,427.93	56.69%
5015500	Insurance-Operations				
5015510	General Liability Insurance		1,828.00	1,828.00	0.00%
5015540	Surety Bonds		108.00	108.00	0.00%
	Total Insurance-Operations	-	1,936.00	1,936.00	0.00%
	Total Continuous Charges	89,571.07	160,420.00	70,848.93	55.84%
5022000) Equipment			,	
	Computer Hrdware & Sftware				
	Other Computer Equipment	2,331.71		(2,331.71)	0.00%
	Total Computer Hrdware & Sftware	2,331.71		(2,331.71)	0.00%
5022200	Educational & Cultural Equip	2,001.71		(2,001.71)	3.00 %

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10200 - Medicine

For the Period Beginning July 1, 2017 and Ending February 28, 2018

				Amount	
Account				Under/(Over)	
Number	Account Description	Amount	Budget	Budget	% of Budget
5022240	Reference Equipment	96.00	829.00	733.00	11.58%
	Total Educational & Cultural Equip	96.00	829.00	733.00	11.58%
5022600	Office Equipment				
5022610	Office Appurtenances		125.00	125.00	0.00%
5022620	Office Furniture	690.00	1,857.00	1,167.00	37.16%
5022630	Office Incidentals	855.65		(855.65)	0.00%
5022640	Office Machines		1,250.00	1,250.00	0.00%
5022680	Office Equipment Improvements	- <u> </u>	17.00	17.00	0.00%
	Total Office Equipment	1,545.65	3,249.00	1,703.35	47.57%
	Total Equipment	3,973.36	4,078.00	104.64	97.43%
	Total Expenditures	1,832,140.17	3,256,350.00	1,424,209.83	56.26%
	Allocated Expenditures				
30100	Data Center	659,368.17	1,166,397.47	507,029.30	56.53%
30200	Human Resources	59,824.15	151,485.99	91,661.83	39.49%
30300	Finance	264,186.97	344,386.15	80,199.18	76.71%
30400	Director's Office	117,881.86	174,226.85	56,344.99	67.66%
30500	Enforcement	1,363,069.24	1,868,703.05	505,633.82	72.94%
30600	Administrative Proceedings	640,055.93	950,901.92	310,845.99	67.31%
30700	Impaired Practitioners	19,380.52	27,276.17	7,895.65	71.05%
30800	Attorney General	136,143.48	181,532.74	45,389.26	75.00%
30900	Board of Health Professions	64,359.34	98,974.10	34,614.76	65.03%
31100	Maintenance and Repairs	-	3,379.12	3,379.12	0.00%
31300	Emp. Recognition Program	502.07	2,435.73	1,933.65	20.61%
31400	Conference Center	46,066.89	47,116.09	1,049.20	97.77%
31500	Pgm Devipmnt & Implmentn	59,457.38	97,155.57	37,698.20	61.20%
	Total Allocated Expenditures	3,430,296.00	5,113,970.95	1,683,674.95	67.08%
	Net Revenue in Excess (Shortfall) of Expenditures	\$ (1,640,835.17)	\$ (1,298,868.95)	\$ 341,966.22	126.33%

Virginia Department of Health Professions Input of Case Hours by Department For Use in Allocation of Department 305- *Enforcement* Costs For the Fiscal Year Ended June 30, 2018

	Fiscal Month No.	1	2	3	4	5	9	7	8	6	10	11	12	Annual
	Month Name	July	August	September	October	November	December	January	February	March	April	May	June	Total
Dept. No.	Dept. No. Dept. Name													
101	Nursing	1,784.25	2350.50	1,932.75	1,944.00	1,984.25	1,758.00	1,947.00	1,869.50					15,570.25
102	Medicine	1,511.00	2024.75	1,765.55	1,829.48	1,774.48	1,515.54	1,915.04	1,988.94					14,324.78
103	Dentistry	567.83	595.33	579.50	448.75	439.95	376.99	452.50	447.00					3,907.85
104	Funeral Directors and Emba	149.50	156.75	137.00	139.00	106.25	83.75	146.75	83.00					1,002.00
105	Optometry	33.00	27.50	20.00	26.25	14.50	39.00	36.00	23.50					219.75
106	Veterinary Medicine	348.00	430.50	348.75	323.25	227.25	284.00	259.25	291.25					2,512.25
107	Pharmacy	987.90	1220.00	1,064.75	1,033.00	1,119.00	792.75	1,082.75	1,171.25					8,471.40
108	Psychology	80.25	176.75	106.25	89.75	56.00	64.50	126.75	85.00					785.25
109	Professional Counselors	149.50	209.25	167.75	164.25	149.25	183.50	168.50	135.25					1,327.25
110	Social Work	122.50	118.75	78.00	124.75	67.75	29.00	55.83	82.50					709.08
112	Cerified Nurse Aids (State	532.25	571.58	481.00	529.25	486.75	420.25	446.00	441.50					3,908.58
114	Nursing Home Administrator	71.50	121.25	122.25	102.75	127.75	148.50	181.25	139.5					1,014.75
115	Audiology and Speech Lang	16.00	5.50	6.50	21.00	2.75	4.75	4.25	10.00					70.75
116	Physical Therapy	17.00	29.50	54.00	16.75	28.75	63.25	114.75	61.00					385.00
	Total	6,370.48	8,037.91	6,864.05	6,792.23	6,584.68	5,793.78	6,936.62	6,829.19	ı	1	-	1	54,208.940

Description of Allocation Method

Sources & Notes

Note: Number of hours = Investigative Hours + Manpower Analysis Hours (#'s come from monthly statistical reports from Enforcment (Tamika)

The source for these numbers is a VDHP spreadsheet titled Allocation 305 & 306.x/s

Maximus report of April 11, 2002 recommended using the average of the current and two prior months in computing the allocation factor.

Virginia Department of Health Professions Input of Case Hours by Department For Use in Allocation of Department 305- *Enforcement* Costs For the Fiscal Year Ended June 30, 2017

	Fiscal Month No.	1	2	3	4	5	9	7	80	6	10	11	12	Annual
	Month Name	July	August	September	October	November	December	January	February	March	April	May	June	Total
Dept. No.	Dept. No. Dept. Name													
101	Nursing	1,808.05	2463.85	1,894.05	1,797.05	1,367.40	1,635.30	2,040.00	2,031.40	2,537.75	1,774.05	1,814.75	2,031.00	23,194.65
102	Medicine	1,658.45	1915.35	1,572.00	1,596.25	1,351.50	1,662.73	1,320.80	1,564.03	1,887.33	1,727.80	1,734.20	1,807.00	19,797.44
103	Dentistry	572.20	493.25	441.92	477.75	290.50	356.75	543.63	481.35	386.33	449.25	416.50	522.50	5,431.93
104	Funeral Directors and Emba	128.42	188.17	96.32	112.38	08.89	124.83	121.59	129.40	161.75	140.00	168.00	144.50	1,584.16
105	Optometry	13.00	6.25	3.50	15.00	17.50	41.00	31.50	14.25	24.25	18.50	56.15	75.25	316.15
106	Veterinary Medicine	349.82	449.28	312.80	395.92	354.72	257.58	391.47	172.10	410.30	306.25	315.00	366.50	4,081.74
107	Pharmacy	700.60	87.78	828.20	948.08	841.98	867.44	882.77	842.50	00.966	1,137.55	1,181.00	1,176.28	11,400.18
108	Psychology	34.50	76.75	62.75	108.25	118.75	29.00	101.70	81.75	79.25	44.75	73.58	00'86	939.03
109	Professional Counselors	69.50	142.00	79.50	107.55	133.30	150.90	155.50	99.75	51.25	128.50	143.50	185.00	1,446.25
110	Social Work	62.90	89.80	65.75	61.00	71.00	48.33	71.00	114.25	82.25	76.50	62.00	85.00	889.78
112	Cerified Nurse Aids (State	724.99	665.75	591.05	533.05	488.70	455.90	590.70	452.50	644.30	770.50	801.25	00.789	7,405.69
114	Nursing Home Administrator	148.35	223.25	106.75	133.75	154.75	00.68	103.75	113.75	72.50	77.50	90.50	99.25	1,413.10
115	Audiology and Speech Lang	0.50	00.00	8.00	4.00	00.9	9.00	0.50	5.50	4.50	1.00	17.50	11.00	67.50
116	Physical Therapy	102.50	23.00	22.00	27.25	36.75	65.80	34.75	31.00	67.75	57.35	38.00	35.50	541.65
	Total	6,373.78	7,734.48	6,084.59	6,317.28	5,301.65	5,823.56	6,389.66	6,133.53	7,405.51	6,709.50	6,911.930	7,323.780	78,509.250

Description of Allocation Method

Sources & Notes

Note: Number of hours = Investigative Hours + Manpower Analysis Hours (#'s come from monthly statistical reports from Enforcment (Tamika)

The source for these numbers is a VDHP spreadsheet titled Allocation 305 & 306 x/s

Maximus report of April 11, 2002 recommended using the average of the current and two prior months in computing the allocation factor.

Virginia Department of Health Professions Input of Case Hours by Department Tor Use in Allocation of Department 306- Administrative Proceedings Costs For the Fiscal Year Ended June 30, 2018

	Fiscal Month No.	-	2	3	4	5	9	7	80	6	10	11	12	Annual
	Month Name	July	August	September	October	November	December	January	February	March	April	May	June	Total
Dept. No.	Dept. No. Dept. Name													
101	Nursing	421.50	483.25	325.75	359.15	351.25	326.75	481.00	462.75					3,211.40
102	Medicine	602.85	783.40	572.45	742.30	721.50	09'228	910.50	973.20				×	6,183.80
103	Dentistry	54.70	167.30	245.45	167.65	169.70	126.10	46.25	98.75					1,075.90
104	Funeral Directors and Emba	18.50	10.00	00.0	00.0	51.50	00.00	11.50	21.00					112.50
105	Optometry	33.00	20.75	29.00	83.50	3.50	13.75	2.50	7.50					193.50
106	Veterinary Medicine	23.75	40.00	37.50	54.75	19.50	09'86	42.75	27.00					343.75
107	Pharmacy	121.00	135.25	121.00	113.25	113.75	109.75	22.00	93.50					829.50
108	Psychology	1.50	63.50	00'9	00.0	00.0	09'9		00.00					77.50
109	Professional Counselors	36.00	52.50	23.00	8.50	0.00	46.75	25.50	64.00					256.25
110	Social Work	44.50	2.75	9.00	8.00	00.9	47.25	70.50	27.00					215.00
112	Cerified Nurse Aids (State	144.25	144.00	139.50	134.75	132.75	158.50	247.75	101.50					1,203.00
114	Nursing Home Administrator	20.25	21.75	00.0	10.00	21.25	14.15	7.25	60.75					155.40
115	Audiology and Speech Lang	00.00	0.00	00.00	00.0	0.00	2.00	9.50	5.75					17.25
116	Physical Therapy	00.00	26.00	25.50	29.00	14.75	2.00	37.75	21.00					156.00
	Total	1,521.80	1,950.45	1,534.15		1,710.85 1,605.45		1,829.60 1,914.75	1,963.70	0.00	0.00	0.00	0.00	14,030.75

Description of Allocation Method

Notes & Sources Number of Hours = weekly log sheet totals provided monthly by APD - Susan Brooks The source for these numbers is a VDHP spreadsheet titled $Allocation\ 305\ \&\ 306.xls$

Virginia Department of Health Professions Input of Case Hours by Department For Use in Allocation of Department 306- *Administrative Proceedings* Costs For the Fiscal Year Ended June 30, 2017

	Fiscal Month No.	1	2	3	4	5	9	7	8	6	10	11	12	Annual
	Month Name	July	August	September	October	November	December	January	February	March	April	May	June	Total
Dept. No.	Dept. No. Dept. Name													
101	Nursing	450.50	528.25	369.50	448.25	427.50	451.50	349.25	382.25	613.50	493.25	524.75	568.50	5,607.00
102	Medicine	502.80	644.95	688.35	735.85	598.50	698.40	559.00	643.30	686.65	487.75	533.65	554.70	7,333.90
103	Dentistry	181.70	332.75	287.00	208.15	189.10	164.65	241.35	219.60	119.20	160.05	184.00	152.10	2,439.65
104	Funeral Directors and Emba	14.50	29.50	25.00	3.50	11.50	31.50	24.75	60.75	16.00	9.00	3.00	15.50	244.50
105	Optometry	26.50	77.00	13.00	7.50	5.75	0.50	27.25	8.75	52.25	57.75	146.50	65.00	487.75
106	Veterinary Medicine	97.75	59.25	95.50	34.50	50.00	77.40	46.00	25.00	26.25	39.50	41.25		592.40
107	Pharmacy	65.00	89.00	108.75	96.50	118.25	98.03	133.75	119.75	149.75	89.50	165.75	156.50	1,390.53
108	Psychology		12.00	00.0	2.50	27.00	65.00	4.50	12.00	20.50		1.00		144.50
109	Professional Counselors	2.00	31.50	32.00	46.50	23.75	20.00	59.75	9.50	39.00	71.50	5.50	65.50	406.50
110	Social Work	3.50	9.50	16.00	55.50	7.00	00.0	00.0	7.00	32.50	12.75	4.95	13.50	162.20
112	Cerified Nurse Aids (State	135.50	124.50	70.00	67.25	123.75	68.25	109.75	94.25	173.10	122.50	105.25	152.25	1,346.35
114	Nursing Home Administrator	13.50	30.50	126.75	41.00	46.25	20.25	62.00	33.25	49.00	00'9	24.75	60.25	513.50
115	Audiology and Speech Lang	9.75	0.00	6.75	20.50	4.50	15.00	00.0		00.00		2.00		61.50
116	Physical Therapy	8.00	8.75	1.50	9.25	00.0	00.00	0.50	17.50	22.00	5.75	11.50	16.00	100.75
	Total	1,511.00	1,977.45	1,840.10	1,776.75	1,632.85	1,710.48	1,617.85	1,632.90	1,999.70	1,555.30	1,756.85	1,819.80	20,831.03

Description of Allocation Method

Notes & Sources Number of Hours = weekly log sheet totals provided monthly by APD - Susan Brooks The source for these numbers is a VDHP spreadsheet titled *Allocation 305 & 306 xls*

HPMP Monthly Sensus Report Active Cases February 28, 2018

Board	Board Participants	License	Count of ID	% with this license
Nursing	275	LPN	36	8.2
Nursing	275	RN	222	50.3
Nursing	275	LNP	17	3.9
			275	62.4
Nursing	5	CNA	5	1.1
Medicine	112	lD0		0.0
	112	DO	9	2.0
Medicine	112	Intern/Resident	6	1.4
Medicine	112	MD	75	17.0
Medicine	112	PA	7	1.6
Medicine	112	Lic Rad Tech	2	0.5
Medicine	112	DC	3	0.7
Medicine	112	ОТ	4	0.9
Medicine	112	RT	4	0.9
Medicine	112	DPM	1	0.2
Medicine	112	LBA	1	0.2
			112	25.4
Pharmacy	16	Pharmacist	16	3.6
. Training of		Trialina Oloc		J. 0
Dentistry	16	DDS	11	2.5
Dentistry	16	DMD	1	0.2
Dentistry	16	RDH	4	0.9
			16	3.6
Social Work	4	LCSW	4	0.9
Psychology	3	LCP	2	0.5
1 sychology	3	SOTP	1	0.5
	PTECT METER PROJECTION IN METER PROVINCIAN OFFICE AND ACTIVITIES FOR A STOCK AND ACTIVITIES OF A	SOTE	3	0.2
Counseling		LPC	1	0.2
Funeral Directors and Embalmers	1	FSL	1	0.2
Optometry	2	OD	2	0.5
Veterinary Medicine	1	DVM	1	0.2
Audiology & Speech-Language Path	1	SLP	1	0.2
Physical Therapy	4	PT	1	0.2
Physical Therapy	4	PTA	3	0.7
	and on the W		4	0.9
TOTALS			441.0	100.0

Report of the 2018 General Assembly

Board of Medicine

HB 226 Patients; medically or ethically inappropriate care not required.

Chief patron: Stolle

Summary as passed House:

Medically or ethically inappropriate care not required. Establishes a process whereby a physician may cease to provide health care that has been determined to be medically or ethically inappropriate for a patient. This bill is identical to SB 222.

02/28/18 House: Signed by Speaker 03/03/18 Senate: Signed by President

03/06/18 Governor: Governor's Action Deadline Midnight, April 9, 2018 03/19/18 Governor: Approved by Governor-Chapter 368 (effective 7/1/18)

HB 621 Cobalt poisoning; notice to patients of risk.

Chief patron: Bell, Robert B.

Summary as introduced:

Notice to patients of risk of cobalt poisoning.

01/08/18 House: Referred to Committee on Health, Welfare and Institutions

01/17/18 House: Assigned HWI sub: Subcommittee #1

01/18/18 House: Subcommittee recommends continuing to 2019

02/13/18 House: Left in Health, Welfare and Institutions

HB 793 Nurse practitioners; practice agreements.

Chief patron: Robinson

Summary as passed:

Nurse practitioners; practice agreements. Eliminates the requirement for a practice agreement with a patient care team physician for a licensed nurse practitioner who has completed the equivalent of at least five years of full-time clinical experience and submitted an attestation from his patient care team physician stating (i) that the patient care team physician has served as a patient care team physician on a patient care team with the nurse practitioner pursuant to a practice agreement; (ii) that while a party to such practice agreement, the patient care team physician routinely practiced with a patient population and in a practice area included within the category for which the nurse practitioner was certified and licensed; and (iii) the period of time for which the patient care team physician practiced with the nurse practitioner under such a practice agreement. The bill requires that a nurse practitioner authorized to practice without a practice agreement (a) 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, (b) consult and collaborate with other health care providers based on the clinical conditions of the patient to whom health care is provided, and (c) establish a plan for referral of complex medical cases and emergencies to physicians or other appropriate health care providers. The bill requires (1) the Boards of Medicine and Nursing to jointly promulgate regulations governing the practice of nurse practitioners without a practice agreement; (2) the Department of Health Professions, by November 1, 2020, to report to the General Assembly a process by which nurse practitioners who practice without a practice agreement may be included in the online Practitioner Profile maintained by the Department of Health Professions; and (3) the Boards of Medicine and Nursing to report information related to the practice of nurse practitioners without a practice agreement that includes certain data, complaints and disciplinary actions, and recommended modifications to the provisions of this bill to the Chairmen of the House Committee on Health, Welfare and Institutions and the Senate Committee on Education and Health and the Chairman of the Joint Commission on Health Care by November 1, 2021.

03/01/18 House: Signed by Speaker 03/05/18 Senate: Signed by President

03/06/18 House: Enrolled Bill communicated to Governor on March 6, 2018 03/06/18 Governor: Governor's Action Deadline Midnight, April 9, 2018

HB 842 Controlled paraphernalia; possession or distribution, hypodermic needles and syringes, naloxone.

Chief patron: LaRock

Summary as passed House:

Provides that a person who is authorized by the Department of Behavioral Health and Developmental Services to train individuals on the administration of naloxone for use in opioid overdose reversal and who is acting on behalf of an organization that provides services to individuals at risk of experiencing an opioid overdose or training in the administration of naloxone for overdose reversal and that has obtained a controlled substances registration from the Board of Pharmacy may dispense or distribute hypodermic needles and syringes in conjunction with such dispensing of naloxone and that a person to whom naloxone has been distributed by such individual may possess hypodermic needles and syringes in conjunction with such possession of naloxone. The bill also allows the dispensing or distributing of hypodermic needles and syringes by persons authorized to dispense naloxone. The bill contains an emergency clause.

EMERGENCY

02/23/18 Senate: Signed by President

02/26/18 Governor: Governor's Action Deadline Midnight, March 5, 2018 03/02/18 Governor: Approved by Governor-Chapter 97 (effective 3/2/18)

03/02/18 Governor: Acts of Assembly Chapter text (CHAP0097)

HB 854 Polysomnographic technology; students or trainees, licensure.

Chief patron: Peace

Summary as introduced:

Practice of polysomnographic technology; licensure; students or trainees. Provides that a student enrolled in an educational program in polysomnographic technology or a person engaged in a traineeship does not require a license to practice polysomnographic technology, provided that such student or trainee is under the direct supervision of a licensed polysomnographic technologist or a licensed doctor of medicine or osteopathic medicine. The bill requires any such student or trainee to be identified to patients as a student or trainee in polysomnographic technology. The bill also provides that any such student or trainee is required to have a license to practice after 18 months from the start of the educational program or traineeship or six months from the conclusion of such program or traineeship, whichever is earlier.

02/23/18 Senate: Signed by President

02/26/18 Governor: Governor's Action Deadline Midnight, March 5, 2018 03/02/18 Governor: Approved by Governor-Chapter 98 (effective 7/1/18)

03/02/18 Governor: Acts of Assembly Chapter text (CHAP0098)

HB 915 Military medical personnel program; personnel may practice under supervision of physician, etc.

Chief patron: Stolle

Summary as passed House:

Military medical personnel program; supervision. Directs the Department of Veterans Services to establish a program in which military medical personnel may practice and perform certain delegated acts that constitute the practice of medicine or nursing under the supervision of a licensed physician or podiatrist or the chief medical officer of an organization participating in such program, or his designee who is licensed by the Board of Medicine and supervising within his scope of practice. The bill allows the chief medical officer of an organization participating in such program to, in consultation with the chief nursing officer of such organization, designate a registered nurse licensed by the Board of Nursing or practicing with a multistate licensure privilege to supervise military personnel participating in such program while engaged in the practice of nursing. This bill is identical to SB 829.

02/23/18 Senate: Signed by President

02/26/18 Governor: Governor's Action Deadline Midnight, March 5, 2018 03/02/18 Governor: Approved by Governor-Chapter 69 (effective 7/1/18)

03/02/18 Governor: Acts of Assembly Chapter text (CHAP0069)

HB 1071 Health regulatory boards; electronic notice of license renewal.

Chief patron: Heretick

Summary as passed House:

Health regulatory boards; license renewal; electronic notice. Provides that the Board of Funeral Directors and Embalmers, the Board of Medicine, and the Board of Nursing may send notices for license renewal electronically.

02/23/18 Senate: Signed by President

02/26/18 House: Enrolled Bill communicated to Governor on February 26, 2018 02/26/18 Governor: Governor's Action Deadline Midnight, March 5, 2018

03/02/18 Governor: Approved by Governor-Chapter 101 (effective 7/1/18)

03/02/18 Governor: Acts of Assembly Chapter text (CHAP0101)

HB 1251 CBD oil and THC-A oil; certification for use, dispensing.

Chief patron: Cline

Summary as passed:

CBD oil and THC-A oil; certification for use; dispensing. Provides that a practitioner may issue a written certification for the use of cannabidiol (CBD) oil or THC-A oil for the treatment or to alleviate the symptoms of any diagnosed condition or disease determined by the practitioner to benefit from such use. Under current law, a practitioner may only issue such certification for the treatment or to alleviate the symptoms of intractable epilepsy. The bill increases the supply of CBD oil or THC-A oil a pharmaceutical processor may dispense from a 30-day supply to a 90-day supply. The bill reduces the minimum amount of cannabidiol or tetrahydrocannabinol acid per milliliter for a dilution of the Cannabis plant to fall under the definition of CBD oil or THC-A oil, respectively. As introduced, this bill was a recommendation of the Joint Commission on Health Care. The bill contains an emergency clause. This bill is identical to SB 726.

EMERGENCY

02/28/18 Senate: Signed by President

03/02/18 House: Enrolled Bill communicated to Governor on March 2, 2018 03/02/18 Governor: Governor's Action Deadline Midnight, March 9, 2018 03/09/18 Governor: Approved by Governor-Chapter 246 (effective 3/9/18)

03/09/18 Governor: Acts of Assembly Chapter text (CHAP0246)

HB 1377 Epinephrine; possession and administration at outdoor educational programs.

Chief patron: Torian

Summary as passed:

Possession and administration of epinephrine; outdoor educational programs. Provides that an employee of an organization that provides outdoor educational experiences or programs for youth who is authorized by a prescriber and trained in the administration of epinephrine may possess and administer epinephrine and provides liability protection for such employees.

02/28/18 Senate: Signed by President

03/02/18 House: Enrolled Bill communicated to Governor on March 2, 2018 03/02/18 Governor: Governor's Action Deadline Midnight, March 9, 2018 03/09/18 Governor: Approved by Governor-Chapter 247 (effective 7/1/18)

03/09/18 Governor: Acts of Assembly Chapter text (CHAP0247)

HB 1378 Surgical assistants; renewal of registration.

Chief patron: Robinson

Summary as passed House:

Registration of surgical assistants; renewal of registration. Provides that in cases in which a surgical assistant was initially registered on the basis of a credential as a surgical assistant or surgical first assistant issued by the National Board of Surgical Technology and Surgical Assisting, the National Surgical Assistant Association, or the National Commission for the Certification of Surgical Assistants or a successor thereof, the surgical assistant must attest that such credential is still current upon applying for renewal of his registration as a surgical assistant.

02/28/18 House: Signed by Speaker 03/03/18 Senate: Signed by President

03/06/18 House: Enrolled Bill communicated to Governor on March 6, 2018 03/06/18 Governor: Governor's Action Deadline Midnight, April 9, 2018 03/19/18 Governor: Approved by Governor-Chapter 374 (effective 7/1/18)

HB 1524 Health record retention; practitioners to maintain records for a minimum of six years.

Chief patron: Ingram

Summary as passed:

Board of Medicine; regulations related to retention of patient records; time. Requires health care practitioners licensed by the Board of Medicine to maintain health records for a minimum of six years following the last patient encounter. The bill also provides that practitioners are not required to maintain health records for longer than 12 years from the date of creation except for (i) health records of a minor child, which shall be maintained until the patient reaches the age of 18 or becomes emancipated, with a minimum of six years following the last patient encounter, and (ii) health records that are required by contractual obligation or federal law to be maintained longer.

03/08/18 House: Impact statement from VDH (HB1524ER)

03/08/18 House: Signed by Speaker 03/10/18 Senate: Signed by President

03/16/18 House: Enrolled Bill communicated to Governor on March 16, 2018 03/16/18 Governor: Governor's Action Deadline Midnight, April 9, 2018

SB 293 Controlled substances and devices, certain; Board of Pharmacy may issue limited license to dispense.

Chief patron: McClellan

Summary as passed Senate:

Dispensing of certain controlled substances and devices; limited license. Authorizes the Board of Pharmacy to issue a limited license at a reduced fee to a prescriber in a nonprofit facility to dispense controlled substances and devices for contraception or treatment of sexually transmitted disease. The bill provides that the non-profit facility from which a prescriber with such limited license dispenses such controlled substances and devices is required to obtain a limited-use permit from the Board and comply with relevant Board regulations and is exempt from associated fees. The bill requires the Board of Pharmacy to promulgate regulations to implement its provisions to be effective within 280 days of its enactment.

02/08/18 House: Read first time

02/08/18 House: Referred to Committee on Health, Welfare and Institutions

02/16/18 House: Assigned HWI sub: Subcommittee #1

02/21/18 House: Subcommittee failed to recommend reporting (4-Y 6-N)

03/06/18 House: Left in Health, Welfare and Institutions

SB 330 THC-A oil; dispensing, tetrahydrocannabinol levels.

Chief patron: Dunnavant

Summary as passed:

CBD and **THC-A** oil. Adds cannabidiol oil (CBD oil) or THC-A oil to the list of covered substances the dispensing of which must be reported to the Prescription Monitoring Program. The bill requires a practitioner, prior to issuing a written certification for CBD oil or THC-A oil to a patient, to request information from the Director of the Department of Health Professions for the purpose of determining what other covered substances have been dispensed to the patient.

The bill requires the Board of Pharmacy to (i) promulgate regulations that include a process for registering CBD oil and THC-A oil products and (ii) require an applicant for a pharmaceutical processor permit to submit to fingerprinting and provide personal descriptive information to be forwarded through the Central Criminal Records Exchange to the Federal Bureau of Investigation for a criminal history record search. The bill requires a pharmacist or pharmacy technician, prior to the initial dispensing of each written certification, to (a) make and maintain for two years a paper or electronic copy of the written certification that provides an exact image of the document that is clearly legible;(b) view a current photo identification of the patient, parent, or legal guardian; and (c) verify current board registration of the practitioner and the corresponding patient, parent, or legal guardian. The bill requires that, prior to any subsequent dispensing of each written certification, the pharmacist, pharmacy technician, or delivery agent view the current written certification; a current photo identification of the patient, parent, or legal guardian; and the current board registration issued to the patient, parent, or legal guardian.

Finally, the bill requires a pharmaceutical processor to ensure that the percentage of tetrahydrocannabinol in any THC-A oil on site is within 10 percent of the level of tetrahydrocannabinol measured for labeling and to establish a stability testing schedule of THC-A oil.

EMERGENCY

03/07/18 Senate: Impact statement from VDH (SB330ER)

03/07/18 House: Signed by Speaker 03/09/18 Senate: Signed by President

03/15/18 Senate: Enrolled Bill Communicated to Governor on March 15, 2018 03/15/18 Governor: Governor's Action Deadline Midnight, April 9, 2018

SB 357 Death certificates; electronic filing required.

Chief patron: McClellan

Summary as introduced:

Death certificates; electronic filing required. Requires a death certificate, for each death that occurs in

the Commonwealth, to be electronically filed with the State Registrar. Under current law, death certificates may be filed electronically or nonelectronically.

01/08/18 Senate: Prefiled and ordered printed; offered 01/10/18 18102472D

01/08/18 Senate: Referred to Committee on Education and Health

01/16/18 Senate: Assigned Education sub: Health 01/19/18 Senate: Impact statement from VDH (SB357)

02/01/18 Senate: Continued to 2019 in Education and Health (15-Y 0-N)

SB 505 Doctorate of medical science; establishes requirements for licensure and practice.

Chief patron: Carrico

Summary as introduced:

Doctorate of medical science; licensure and practice. Establishes requirements for licensure and practice as a doctorate of medical science. The bill provides that it is unlawful to practice as a doctorate of medical science unless licensed by the Board of Medicine (Board) and requires that an applicant for licensure, among other requirements, (i) hold an active unrestricted license to practice as a physician assistant in the Commonwealth or another jurisdiction and be able to demonstrate engagement in active clinical practice as a physician assistant under physician supervision for at least three years and (ii) be a graduate of at least a two-year doctor of medical science program or an equivalent program that is accredited by a regional body under the U.S Department of Education and an accrediting body approved by the Board. The bill provides that doctorates of medical science can practice only as part of a patient care team at a hospital or group medical practice engaged in primary care and are required to maintain appropriate collaboration and consultation, as evidenced in a written or electronic practice agreement, with at least one patient care team physician. The bill requires the Board to establish the scope of practice for doctorates of medical science and to promulgate regulations regarding collaboration and consultation among a patient care team and requirements for the practice agreement. The bill outlines the prescriptive authority of doctorates of medical science. The bill also authorizes various powers and requires various duties of a doctorate of medical science where such powers and duties are, under current law, given to and required of physician assistants and nurse practitioners.

01/09/18 Senate: Prefiled and ordered printed; offered 01/10/18 18103047D

01/09/18 Senate: Referred to Committee on Education and Health

02/01/18 Senate: Impact statement from VDH (SB505)

02/02/18 Senate: Assigned Education sub: Health Professions

02/08/18 Senate: Continued to 2019 in Education and Health (15-Y 0-N)

SB 511 Optometry; scope of practice.

Chief patron: Suetterlein

Summary as passed:

Optometry; scope of practice. Provides that the practice of optometry includes the evaluation, examination, diagnosis, and treatment of abnormal or diseased conditions of the human eye and its adnexa by the use of medically recognized and appropriate devices, procedures, or technologies but that it does not include treatment through surgery, including laser surgery, other invasive modalities, or the use of injections, except for certain injections by TPA-certified optometrists and for the treatment of

emergency cases of anaphylactic shock with intramuscular epinephrine. The bill authorizes a TPA-certified optometrist to administer therapeutic pharmaceutical agents by injection for the treatment of chalazia by means of an injection of a steroid included in Schedule VI controlled substances, provided that the optometrist provides written evidence that he has completed certain training requirements to the Board of Optometry.

02/28/18 Senate: Signed by President

03/02/18 Senate: Enrolled Bill Communicated to Governor on March 2, 2018 03/02/18 Governor: Governor's Action Deadline Midnight, March 9, 2018 03/09/18 Governor: Approved by Governor-Chapter 280 (effective 7/1/18)

03/09/18 Governor: Acts of Assembly Chapter text (CHAP0280)

SB 632 Controlled substances; limits on prescriptions containing opioids.

Chief patron: Dunnavant

Summary as introduced:

Limits on prescription of controlled substances containing opioids. Eliminates the surgical or invasive procedure treatment exception to the requirement that a prescriber request certain information from the Prescription Monitoring Program (PMP) when initiating a new course of treatment that includes prescribing opioids for a human patient to last more than seven days. Under current law, a prescriber is not required to request certain information from the PMP for opioid prescriptions of up to 14 days to a patient as part of treatment for a surgical or invasive procedure. The bill has an expiration date of July 1, 2022. This bill is identical to HB 1173.

02/23/18 Senate: Signed by President

02/26/18 Senate: Enrolled Bill Communicated to Governor on February 26, 2018

02/26/18 Governor: Governor's Action Deadline Midnight, March 5, 2018 03/02/18 Governor: Approved by Governor-Chapter 106 (effective 7/1/18)

03/02/18 Governor: Acts of Assembly Chapter text (CHAP0106)

SB 728 Prescription Monitoring Program; prescriber and dispenser patterns, annual review, report.

Chief patron: Dunnavant

Summary as passed Senate:

Prescription Monitoring Program; prescriber and dispenser patterns. Requires the Director of the Department of Health Professions to annually review controlled substance prescribing and dispensing patterns. The bill requires the Director to conduct such review in consultation with an advisory panel consisting of representatives from the relevant health regulatory boards, the Department of Health, the Department of Medical Assistance Services, and the Department of Behavioral Health and Developmental Services. The bill requires the Director to make any necessary changes to the criteria for unusual patterns of prescribing and dispensing and report any findings and recommendations for best practices to the Joint Commission on Health Care by November 1 of each year. This bill is identical to HB 313.

02/23/18 Senate: Signed by President

02/26/18 Senate: Enrolled Bill Communicated to Governor on February 26, 2018

02/26/18 Governor: Governor's Action Deadline Midnight, March 5, 2018 03/05/18 Governor: Approved by Governor-Chapter 190 (effective 7/1/18)

03/05/18 Governor: Acts of Assembly Chapter text (CHAP0190)

SB 832 Prescription Monitoring Program; adds controlled substances included in Schedule Vaud naloxone.

Chief patron: Carrico

Summary as introduced:

Prescription Monitoring Program; covered substances. Adds controlled substances included in Schedule V for which a prescription is required and naloxone to the list of covered substances the dispensing of which must be reported to the Prescription Monitoring Program. This bill is identical to HB 1556.

02/27/18 House: Signed by Speaker 03/02/18 Senate: Signed by President

03/05/18 Senate: Enrolled Bill Communicated to Governor on March 5, 2018 03/05/18 Governor: Governor's Action Deadline Midnight, April 9, 2018 03/19/18 Governor: Approved by Governor-Chapter 379 (effective 7/1/18)

SB 882 Prescription refill; protocol.

Chief patron: DeSteph

Summary as passed Senate:

Prescription refill; approval. Provides that a prescriber may authorize a registered nurse or licensed practical nurse to approve additional refills of a prescribed drug for no more than 90 consecutive days, provided that (i) the drug is classified as a Schedule VI drug; (ii) there are no changes in the prescribed drug, strength, or dosage; (iii) the prescriber has a current written protocol, accessible by the nurse, that identifies the conditions under which the nurse may approve additional refills; and (iv) the nurse documents in the patient's chart any refills authorized for a specific patient pursuant to the protocol and the additional refills are transmitted to a pharmacist in accordance with the allowances for an authorized agent to transmit a prescription orally or by facsimile pursuant to current law and regulations of the Board of Pharmacy.

03/01/18 House: Signed by Speaker 03/03/18 Senate: Signed by President

03/06/18 Senate: Enrolled Bill Communicated to Governor on March 6, 2018 03/06/18 Governor: Governor's Action Deadline Midnight, April 9, 2018 03/19/18 Governor: Approved by Governor-Chapter 380 (effective 7/1/18)

Agenda Item: Regulatory Actions - Chart of Regulatory Actions

Staff Note: Attached is a chart with the status of regulations for the Board

as of March 30, 2018

Board	Board of Medicine	
Chapter		Action / Stage Information
[18 VAC 85 - 20]	Regulations Governing the Practice of Medicine, Osteopathic Medicine, Podiatry, and Chiropractic	Licensure by endorsement [Action 4716]
		Proposed - Register Date: 1/8/18 Adoption of final regs: 4/13/18
[18 VAC 85 - 20]	Regulations Governing the Practice of Medicine, Osteopathic Medicine, Podiatry, and Chiropractic	Supervision and direction for laser hair removal [Action 4860]
		Proposed - At Secretary's Office for 14 days
[18 VAC 85 - 20]	Regulations Governing the Practice of Medicine, Osteopathic Medicine, Podiatry, and Chiropractic	Renewal fee reduction for limited licenses [Action 5000]
		Final - Register Date: 4/2/18 Effective: 5/2/18
[18 VAC 85 - 21]	Regulations Governing Prescribing of Opioids and Buprenorphine	Initial regulations [Action 4760]
	Buprentor printe	Final - At Secretary's Office for 11 days
[18 VAC 85 - 50]	Regulations Governing the Practice of Physician Assistants	Definitions of supervision and weight loss rules [Action 4943]
		Fast-Track - DPB Review in progress
[18 VAC 85 - 130]	Regulations Governing the Practice of Licensed Midwives	Practical experience under supervision [Action 4944]
		Fast-Track - At Secretary's Office for 105 days

Agenda Item: Final regulations for Licensure by Endorsement

Included in the agenda package:

Copy of action as posted on the Va. Regulatory Townhall

Copy of proposed regulations for licensure by endorsement

Staff note:

There was a comment period on the proposed regulations from 1/8/18 to 3/9/18 and a public hearing conducted on 2/15/18 – no comment was received.

Action:

Adoption of final regulations for licensure by endorsement

Virginia.gov

Agencies | Governor



Logged in as

Elaine J. Yeatts

Agency

Department of Health Professions

Board

Board of Medicine

Chapter

Regulations Governing the Practice of Medicine, Osteopathic Medicine, Podiatry, and Chiropractic [18 VAC 85 - 20]

Action: Licensure by endorsement

Proposed Stage O

Action 4716 / Stage 8017

Documents		
Proposed Text	12/21/2017 12:12 pm	Sync Text with RIS
<u>Agency Statement</u>	8/10/2017	Upload / Replace
Attorney General Certification	8/11/2017	
<u> </u>	9/13/2017	
Agency Response to EIA	10/4/2017	Upload / Replace
Governor's Approval Memo	12/19/2017	
Registrar Transmittal	12/19/2017	

Status		
Incorporation by Reference	No	
Exempt from APA	No, this stage/action is subject to article 2 of the <i>Administrative Process Act</i> and the standard executive branch review process.	
Attorney General Review	Submitted on 8/10/2017 Review Completed: 8/11/2017 Result: Certified	
DPB Review	Submitted on 8/11/2017 Economist: Oscar Ozfidan Policy Analyst: Larry Getzler Review Completed: 9/22/2017 DPB's policy memo is "Governor's Confidential Working Papers"	
Secretary Review	Secretary of Health and Human Resources Review Completed: 11/3/2017	

Governor's Review	Review Completed: 12/19/2017 Result: Approved
Virginia Registrar	Submitted on 12/19/2017 The Virginia Register of Regulations Publication Date: 1/8/2018 Volume: 34 Issue: 10
Public Hearings	02/15/2018 8:35 AM
Comment Period	Ended 3/9/2018 0 comments

Contact Inform	nation	
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This person is the primary contact for this chapter. 16

Project 4970 - Proposed

BOARD OF MEDICINE

Licensure by endorsement

18VAC85-20-141. Licensure by endorsement.

To be licensed by endorsement, an applicant shall:

- 1. Hold at least one current, unrestricted license in a United States jurisdiction or Canada for the five years immediately preceding application to the board;
- 2. Have been engaged in active practice, defined as an average of 20 hours per week or 640 hours per year, for five years after postgraduate training and immediately preceding application;
- 3. Verify that all licenses held in another United States jurisdiction or in Canada are in good standing, defined as not currently under investigation and if lapsed, eligible for renewal or reinstatement;
- 4. Hold current certification by one of the following:
 - a. American Board of Medical Specialties;
 - b. Bureau of Osteopathic Specialists;
 - c. American Board of Foot and Ankle Surgery;
 - d. Fellowship of Royal College of Physicians of Canada;
 - e. Fellowship of the Royal College of Surgeons of Canada; or
 - f. College of Family Physicians of Canada;

- 5. Submit a current report from the U.S. Department of Health and Human Services

 National Practitioner Data Bank; and
- 6. Have no grounds for denial based on provisions of § 54.1-2915 of the Code of Virginia or regulations of the board.



If you are not a state employee, you are eligible for a \$50.00 per diem and reimbursement of your mileage.

The travel regulations require that "travelers must submit the Travel Expense Reimbursement Voucher with 30 days after completion of their trip". (CAPP Topic 20335, State Travel Regulations, p.7)

In order for the agency to be in compliance with the state travel regulations, please submit your request for today's meeting no later than

May 11, 2018