

2014 Legislative Update

Advisory Council on Health Disparities and Health Equity

April 8, 2014

VDH monitored more than 150 bills, covering a wide range of topics, during the 2014 Session. This document summarizes some of the more significant bills pertaining to public health that passed the House and Senate.

Health Workforce

2014 Budget Bill, Item 283E – Incentive Programs - Requires the Secretary of Health and Human Resources, in collaboration with VDH, to evaluate the effectiveness of existing incentive programs designed to attract nurses to underserved areas, to specifically include the Nursing Scholarship and Loan Repayment Program

Immunization

HB1031 (Orrock) – Childhood Immunization – This bill amends § 32.1-46 by updating language regarding the vaccines required for school attendance. Section 32.1-46 lists the minimum immunization requirements that shall be included in those set forth in the State Board of Health Regulations for the Immunization of School Children. Due to changes in vaccine formulation and administration recommendations, several technical updates are needed to align Code provisions with the current immunization schedule. These changes pertain to vaccines that protect against tetanus, diphtheria and pertussis, varicella and invasive pneumococcal disease. The last major update to the list of immunizations outlined in this section of the Code occurred in 2006.

HB305 (O'Bannon) – Charging for School-Required Immunizations – This bill amends § 32.1-46 of the Code requiring VDH and its health departments to seek reimbursement from health carriers, Medicare, Medicaid, CHIP and/or CHAMPUS for all allowable costs associated with the provision of vaccines third party payers. The bill also clarifies that there will be no out of pocket costs to parents of children insured through Medicare, Medicaid, FAMIS or CHAMPUS for school-required vaccine services.

Child Health

HB387 (Comstock)/SB183 (McWaters) – Critical Congenital Heart Disease – Requires every hospital in Virginia with a newborn nursery to perform a critical congenital heart defect screening use pulse oximetry on every newborn under their

care. The screening must be performed at 24 to 48 hours old, or if the infant is discharged prior to 24 hours of age, prior to discharge. The bill exempts infants whose parents/guardians object on religious grounds. The bill also requires the Board of Health to promulgate regulations within 280 days of enactment by working with a group of specified stakeholders.

SB172 (Stuart)/HB410 (Anderson) – Concussions/Student – Requires each non-interscholastic youth sports program utilizing public school property to either (i) establish policies and procedures based on either the local school division's guidelines or the Board of Education's guidelines regarding the identification and handling of suspected concussions in student-athletes or (ii) follow the policies and procedures regarding the identification and handling of suspected concussions required of local school divisions in existing law. Also requires the Board to include in its guidelines to local school divisions the effects of concussions on student-athletes' academic performance. The bill also directs the Board of Education to review and revise, in conjunction with stakeholders including VDH, the Board's guidelines on concussions as necessary.

HB1096 (Filler-Corn) – Concussions/Students – Requires the Board of Education to amend its guidelines for school division policies and procedures on concussions in student-athletes to include a "Return to Learn Protocol" with requirements that school personnel (i) be alert to cognitive and academic issues that may be experienced by a student-athlete who has suffered a concussion or other head injury and (ii) accommodate the gradual return to full participation in academic activities by a student-athlete who has suffered a concussion or other head injury.

Chronic Disease

HB134 (Cole)/SB532 (Stuart) – Care of Students who have been Diagnosed with Diabetes – Requires local school boards to permit students who are diagnosed with diabetes, subject to parental consent and written approval of the prescriber, to (i) carry with him and use supplies, including a reasonable and appropriate short-term supply of carbohydrates, an insulin pump, and equipment for immediate treatment of high and low blood glucose levels, and (ii) self-check his own blood glucose levels on a school bus, on school property, and at a school-sponsored activity. Requires the Department of Education to review and update the Manual for Training Public School Employees in the Administration of Insulin and Glucagon. The Manual shall include training requirements in (i) administering a bolus of insulin via an insulin pump, (ii) entering a blood sugar reading into an insulin pump, (iii) entering a carbohydrate count into an insulin pump, (iv) removing or

stopping the flow of insulin from an insulin pump, and (v) changing the battery in an insulin pump.

HB329 (Krupicka) – Chron’s Disease – This bill was carried over to the 2015 Session in the House Health, Welfare and Institutions Committee, but the Committee Chairman has sent VDH a letter asking that it review the underlying issues and report its findings and recommendations to the Committee prior to the 2015 Session.

The bill would have required VDH to develop a process for issuing medical identification cards when requested by individuals with Crohn’s disease, ulcerative colitis, inflammatory bowel disease, irritable bowel syndrome, and other medical conditions that require immediate access to a restroom. The cards would indicate that the individual has a medical condition that may require emergency access to restroom facilities. The bill would also require VDH to post information on its website about these medical diseases and conditions, including symptoms, treatment, and needs of individuals with these conditions. VDH could charge a fee for the cards, and could contract with an outside entity to issue the cards.

Environmental Health

SB31(Stanley) – Methamphetamine cleanup; certification – Requires the Board of Health’s guidelines for the cleanup of residential property formerly used as sites to manufacture methamphetamine to also address other types of buildings. The bill requires that the Board’s guidelines address certifying that a building that was previously a methamphetamine manufacturing site is safe for human occupancy. The bill also requires a person convicted of manufacturing methamphetamine to pay the cost of the certification. Current law requires the convicted person to pay cleanup costs.

Regulation of Health Care Facilities/Long-Term Care

HB476 (Head) – Home care organizations; inspections – Requires state agencies that inspect home care organizations to coordinate inspections both among subdivisions of the agency and with other agencies and to accept equivalent inspections performed by other agencies or subdivisions of agencies in lieu of performing their own inspections to the extent possible.

HB702 (Head) – Nursing Home Pre-Admission Screening – Requires the Department of Medical Assistance Services (DMAS) to contract with other public or private entities to conduct preadmission screenings, either in addition to or in

lieu of the current screening team, in local jurisdictions where the screening team has not been able to complete them within 30 days of the initial application. Requires DMAS to promulgate regulations within 280 days.

Advance Health Care Directive Registry

SB575 (Barker) – Submission of documents – Provides that the legal representative or designee of an individual who has executed a health care power of attorney, advance directive, or declaration of an anatomical gift may submit the document to the Registry. Current law provides that only the person who executed the document may submit it.