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FEATURED CONTENT

[VHHA in Action](#)

[News Updates](#)

- [Legislation Filed to Expand Medical Marijuana Access for Terminally Ill Patients in Medical Facilities](#)
- [CDC Announces Updates to Child Immunization Schedule](#)
- [CDC Estimates 11 Million Flu Cases, 120,000 Hospitalizations So Far This Season](#)
- [DHS Issues Final Rule on H-1B Visa Standards and Weighted Selection Process](#)
- [Federal Agencies Solicit Comment on Clinical Care AI, Insurance Transparency, Medicare Rulemaking](#)
- [DEA, HHS Extend COVID-19 Telehealth Prescribing Flexibilities for Another Year](#)
- [VDH Accepting Public Comments on Update to Regulations for Durable Do Not Resuscitate Orders](#)

[Events](#)

- [Register for the 2026 Virginia Patient Safety Summit in February](#)
- [VASHRM to Host Free Jan. 22 Webinar on Risk Management Tools for Event Analysis](#)

[Podcast](#)

- [VHHA Patients Come First Podcast Features VCU Health Transplant Surgeon and Physician Leader](#)

[Around the State](#)

VHHA in Action

Each day, VHHA actively works on behalf of its members, their employees, and Virginians to advance the interests of Virginia's hospitals and health care systems. In the past week, these are some developments of interest to Virginia hospitals and health systems:

VHHA Gears Up for Virginia General Assembly 2026 Legislative Session

- This year's **Virginia General Assembly** legislative regular session commences next week. The 2026 session is scheduled for 60 days from Jan. 14-March 16. During that period, lawmakers will consider several thousand bills and are tasked with developing a new two-year state budget. Just days after the start of session, **Virginia Governor-Elect Abigail Spanberger**, **Virginia Lieutenant Governor-Elect Ghazala Hashmi**, and **Virginia Attorney General-Elect Jay Jones** will be sworn in on Jan. 17 to serve four-year terms. The results of November's elections mean Democrats will control of Virginia's executive and legislative branches, including a broadened majority in the **Virginia House of Delegates**. Throughout the session, the **VHHA Government Affairs Team** will be engaged in work at the State Capitol advocating for the interests of hospitals, health systems, the healthcare delivery system, public health, and patients.

VHHA Invites Hospital Staff, Partners, Stakeholders to Jan. 28 Centennial Celebration in Richmond

- This year, the **Virginia Hospital & Healthcare Association (VHHA)** is celebrating its centennial anniversary and 100 years of working alongside Virginia's hospitals, health systems, policymakers, and community leaders to advance healthcare across the Commonwealth. Throughout 2026, VHHA will honor and celebrate a century of impactful work during events over the course of this year. This month, VHHA is hosting a celebration in Richmond to reflect on that legacy and look ahead to the future we're building together. The VHHA Centennial Celebration event is scheduled for Jan. 28 at 5 p.m. On the Carpenter Theaters Stage in Richmond, VA. Please use this [link](#) to RSVP to attend the event by Jan. 20. Questions may be sent to centennial@vhha.com.

View VHEMP Webinar Recording with National Weather Service on Anticipated Winter Conditions

- The **Virginia Healthcare Emergency Management Program (VHEMP)** recently hosted a winter weather briefing webinar with the **National Weather Service (NWS)**. VHEMP is a partnership between the **Virginia Department of Health (VDH)**, the **Virginia Hospital & Healthcare Association (VHHA)** and the four Regional Healthcare Coalitions. The webinar featured **Katie Carter**, Emergency Response Specialist with NWS, who provided an overview of the upcoming winter weather season forecast from mid-December through March as well as resources available to prepare for and monitor events. View a webinar recording [here](#) and presentation slides through this [link](#).

VHHA in the News

- VHHA actively engages with the news media to share public messaging and coordinate member media appearances to showcase the important work done by Virginia hospitals. That work is reflected in recent coverage from [WXFR](#), [WAVY](#), [Richmond Magazine](#), the [Richmond Times-Dispatch](#), and [Yahoo News](#).

News Updates

Legislation Filed to Expand Medical Marijuana Access for Terminally Ill Patients in Medical Facilities

Ahead of the upcoming **Virginia General Assembly** 2026 legislative session, a [bill](#) has been filed that would require healthcare facilities to permit terminally ill patients to use medical cannabis and would

require such facilities to adopt policies to facilitate the use of medical cannabis. The bill does not apply to emergency medical services, including hospital emergency departments. The bill requires compliance with applicable drug and medication requirements and specifies that compliance with it is not a condition of obtaining or renewing a license as a medical care facility. It also establishes a protocol for non-compliance in the event of intervention by the federal government.

CDC Announces Updates to Child Immunization Schedule

This week, the **Centers for Disease Control and Prevention** (CDC) [announced](#) revisions to its recommended childhood immunization schedule in response to an earlier [directive](#) from **U.S. President Donald Trump** instructing relevant federal authorities to review the practices of other developed nations. Under the [revised standards](#), the CDC recommends fewer vaccinations for all children. In all CDC is recommending 11 immunizations for all children, compared to 17 previously recommended by the agency. The agency continues to recommend “that all children are vaccinated against diphtheria, tetanus, acellular pertussis (whooping cough), Haemophilus influenzae type b (Hib), Pneumococcal conjugate, polio, measles, mumps, rubella, and human papillomavirus (HPV), for which there is international consensus, as well as varicella (chickenpox),” while immunizations recommended for certain high-risk groups include “respiratory syncytial virus (RSV), hepatitis A, hepatitis B, dengue, meningococcal ACWY, and meningococcal B.” The CDC’s current position is that vaccinations for rotavirus, COVID-19, influenza, meningococcal disease, hepatitis A, and hepatitis B should be based on “shared clinical decision making” between patients, families, and providers. Read more [here](#).

CDC Estimates 11 Million Flu Cases, 120,000 Hospitalizations So Far This Season

The **Centers for Disease Control and Prevention** (CDC) [estimates](#) that there have been at least 11,000,000 illnesses, 120,000 hospitalizations, and 5,000 deaths from flu so far this season. Flu season traditionally spans the fall and winter, with the period of December-February seen as the peak period. The CDC recommends that individuals 6 months and older who have not yet been vaccinated this season get an annual influenza vaccine. Approximately 130 million doses of influenza vaccine have been distributed in the United States this season.

DHS Issues Final Rule on H-1B Visa Standards and Weighted Selection Process

The **U.S. Department of Homeland Security** (DHS) has issued a [final rule](#) modifying the H-1B non-immigrant visa process to implement a weighted selection process in lieu of the previous lottery system for selecting visa recipients. According to DHS, the new process is designed to give “greater weight to those with higher skills.” Going forward, annual H-1B visas are to be capped at 65,000, with an additional 20,000 for U.S. advanced degree holders. The final rule is effective Feb. 27, 2026, and will be in place for the FY 2027 H-1B cap registration season. This action is part of the broader immigration reform program implemented by the **Trump Administration**, including a [presidential proclamation](#) that requires employers to pay an additional \$100,000 per visa as a condition of eligibility. Physicians from other nations seeking to practice medicine in the U.S. are among the professionals who seek these visas. Read more [here](#).

Federal Agencies Solicit Comment on Clinical Care AI, Insurance Transparency, Medicare Rulemaking

The **U.S. Department of Health and Human Services** (HHS) has issued a request for information to seek broad public comment on what the agency can do to accelerate the adoption and use of AI as part of

clinical care. Feb. 23, 2026 is the deadline for submitting public comments. Read more [here](#). In another development, the **U.S. Departments of Treasury, Labor, and Health and Human Services** have proposed changes to the Transparency in Coverage requirements for insurers related to machine-readable files consistent with a previous executive order and guidance materials. Feb. 23, 2026 is the deadline for submitting public comments. Read more [here](#). And the **Centers for Medicare & Medicaid Services (CMS)** recently published the [Measures Under Consideration List](#) for 2025. These are measures that CMS is considering adopting through the federal rulemaking process for use in Medicare programs. The list comprises 24 unique measures, with some under consideration for multiple CMS programs and others already in use but undergoing substantial change to their specifications. Notably, several measures address topics consistent with the Department of Health and Human Services' Make America Healthy Again priority framework, such as chronic illness and nutrition, and all 24 measures rely on data submissions using at least one digital source. In addition, CMS is promoting the early review of five measures that align with the MAHA initiative and are currently in the development stage. CMS will convene a consensus-based multidisciplinary group, on which the AHA sits, to provide recommendations to the agency on these measures by Feb. 1.

DEA, HHS Extend COVID-19 Telehealth Prescribing Flexibilities for Another Year

The **U.S. Drug Enforcement Administration (DEA)** and the **U.S. Department of Health and Human Services (HHS)** recently announced another extension on telemedicine flexibilities for prescribing controlled medications through Dec. 31, 2026. It is the fourth such extension of COVID-19 telemedicine flexibilities. It is intended to allow DEA-registered practitioners to continue prescribing schedule II-V controlled substances without requiring an in-person medical evaluation if certain conditions are met. Those conditions include prescriptions that are issued for a legitimate medical purpose and that a prescription is issued by a provider authorized to prescribe the class of controlled substance. The intent of the extension is to prevent disruptions of care, prevent a backlog of patients who need in-person appointments, and allow adequate time for potential future implementation of in-person medical evaluation requirements. Read more [here](#).

VDH Accepting Public Comments on Update to Regulations for Durable Do Not Resuscitate Orders

The **Virginia Department of Health (VDH)** is accepting public comments through Jan. 28, 2026 on proposed changes to state regulations pertaining to Durable Do Not Resuscitate (DNR) Orders. The regulatory action is being taken to ensure regulatory compliance with state law and conformity with the Virginia Administrative Code. The proposed changes are deemed non-controversial and are focused on updating the "clarity and consistency of the regulation" to "help ensure that health care personnel, emergency medical services providers, and residents of the Commonwealth can effectively access and understand the regulation governing DNRs." Feb. 12, 2026 is the scheduled effective date of the updated regulations. Read more [here](#). Questions may be directed to **Mohamed G. Abbamin**, MPA, Senior Policy Analyst, Office of Emergency Services, Virginia Department of Health, at (804) 980-6984, or mohamed.abbamin@vdh.virginia.gov.

Events

Register for the 2026 Virginia Patient Safety Summit in February

Registration is open for the **2026 Virginia Patient Safety Summit**, which will be held as a virtual event on Feb. 26, 2026. The Summit will highlight innovative work in Virginia and across the nation to advance a culture of safety and continuous improvement in health care with a focus on how shared values and behaviors can minimize errors, improve outcomes, and enhance the overall quality and experience of care. Beginning in 2026, the **Centers for Medicare & Medicaid Services (CMS)** will require all U.S. hospitals participating in Medicare or Medicaid to attest to patient safety structural measures that assess strategies to strengthen systems for safety, including leadership commitment to eliminating preventable harm, supporting a culture of safety and learning in health systems, accountability and transparency, and patient and family engagement. Register through this [link](#). The **VHHA Center for Healthcare Excellence** is hosting this event in partnership with the **Virginia Nurses Association** and the **Virginia Nurses Foundation**, the **Medical Society of Virginia**, the **Virginia Pharmacists Association**, and the **Virginia Society of Health-System Pharmacists**.

VASHRM to Host Free Jan. 22 Webinar on Risk Management Tools for Event Analysis

The **Virginia Chapter of the American Society for Healthcare Risk Management (VASHRM)** is hosting a free webinar on Jan. 22 at noon on “Analyzing Events: Which Tool Is Best? RCA, ACA, or FME.” The webinar will feature Risk and Patient Safety Consultant **Anne Huben-Kearney**, BSN, MPA, DFASHRM, CPHRM, CPHQ. Continuing education credits for this event are pending. Register through this [link](#).

Podcast

VHHA *Patients Come First* Podcast Features VCU Health Transplant Surgeon and Physician Leader

This episode of VHHA’s *Patients Come First* podcast features **Dr. David Bruno**, a transplant surgeon and Director of the **VCU Health Hume-Lee Transplant Center**. Under his leadership, Hume-Lee is achieving national firsts and reshaping transplant medicine through innovations like fully robotic living-donor liver transplantation, advanced options for patients with chronic pancreatitis, and a new lung transplant program. Listen to the episode [here](#) and hear past episodes through this [link](#). Podcast episodes are also available through these podcast apps and networks: [Apple Podcast](#), [Amazon Music](#), [Spotify](#), [Pandora](#), [Stitcher](#), [TuneIn](#), [SoundCloud](#), [Blubrry](#), [iHeart Radio](#), [Deezer](#), [Podbay](#), [Pocket Casts](#), the [Virginia Audio Collective](#), and the [World Podcast Network](#). The podcast can also be heard on the radio airwaves – episodes air Sundays at 9 a.m. on 100.5 FM, 107.7 FM, 92.7 FM, and 820 AM across Central Virginia and 1650 AM in Hampton Roads. Send questions, comments, feedback, or guest suggestions to pcfpodcast@vhha.com.



Around the State



Sentara Leigh Hospital has named **Dr. Robert Linton** the new Chief Medical Officer. Prior to joining Sentara Leigh Hospital, Dr. Linton served as the Vice President and Chief Medical Officer at Howard University Hospital. He brings 26 years of emergency medicine experience to Sentara having completed his medical education at Meharry Medical College before residency at Howard University and earning an MBA at Johns Hopkins Carey Business School. Dr. Linton looks forward to supporting provider engagement and wellness, strengthening teamwork, and exploring ways to improve patient experience.

Mark Weathers has been named the first Chief Operating Officer for the **Paul and Diane Manning Institute of Biotechnology at the University of Virginia**. He previously served as chief of staff for the **UVA School of Medicine**. Before coming to UVA, Weathers served 28 years in the U.S. Army, concluding his service as chief operating officer and then chief of staff at the U.S. Military Academy. He is a civil engineer by training. Read more [here](#).



Webb



Bridge



Gammon

Dr. B. Cameron Webb, MD, JD, has been nominated as Virginia State Health Commissioner by **Virginia Governor-Elect Abigail Spanberger**. Dr. Webb previously served as a Senior Advisor to the White House COVID-19 Response Team, as Director of Health Policy and Equity at the **UVA School of Medicine**, and he ran for a seat in the **U.S. Congress**

in 2020. **Carilion Clinic Foundation** Director of Operations **Amy Bridge** has been named Director of the Executive Mansion by the Governor-Elect. She previously served as Director of the Executive Mansion from 2002-2010. And VHHA Director of Policy and Legislative Affairs **W. Davis Gammon** has been selected as Deputy Legislative Director by the Governor-Elect. Read more [here](#).