

February 13, 2026

**Bills of Interest Summaries**  
**Virginia General Assembly, 2026 Session**  
**Virginia House of Delegates**

**HB6**

**Contraception; establishes right to obtain, applicability, enforcement.**

**Patrons Introduced by:** [Marcia S. "Cia" Price \(Chief Patron\)](#)

**Summary As Introduced**

**Contraception; right to contraception; applicability; enforcement.** Establishes a right to obtain contraceptives and engage in contraception, as such terms are defined in the bill. The bill clarifies that none of its provisions shall be construed to permit or sanction the performance of any sterilization procedure without a patient's voluntary and informed consent. The bill creates a cause of action that may be instituted against anyone who infringes on such right.

**Status: Passed by House of Delegates. On course to pass Senate.**

**History**

11/17/2025House Referred to Committee on [H-Health and Human Services](#)

1/16/2026House Assigned sub: Health

1/20/2026House H-HS [Health](#) subcommittee recommends reporting (6-Y 3-N)

1/22/2026House Reported from [H-Health and Human Services](#) committee (15-Y 7-N)

1/26/2026House Read first time

1/27/2026House Read second time and engrossed

1/28/2026House Read third time and passed House (65-Y 32-N 0-A)

1/29/2026Senate Referred to Committee on [S-Education and Health](#)

## HB605

**Nursing home staffing; minimum staffing standards, enforcement of administrative sanctions.**

**Patron** [Rodney T. Willett \(Chief Patron\)](#)

### Summary As Introduced

**Nursing home staffing; minimum staffing standards; enforcement of administrative sanctions.** Requires certified nursing facilities eligible to participate in the Virginia Medicaid Nursing Facility Value-Based Purchasing program to provide at least 3.25 hours of nurse staffing per resident per day on average. The bill grants the State Health Commissioner the authority to impose administrative sanctions related to such minimum staffing standards and directs the Board of Health to promulgate regulations to implement the provisions of the bill by December 1, 2026.

**Status: Referred to House Appropriations Committee. In Appropriations Committee**

### History

1/13/2026House Referred to Committee on [H-Health and Human Services](#)

1/21/2026House Assigned sub: [Health Professions](#)

2/10/2026House Subcommittee recommends reporting with substitute and referring to Appropriations (10-Y 0-N)

2/12/2026House Assigned H-APP sub: [Health & Human Resources](#)

2/12/2026House Reported from [H-Health and Human Services](#) committee with substitute and r

## HB606

**Medical care facility reporting; value of charity care.**

**Patron Introduced by:** [Rodney T. Willett \(Chief Patron\)](#)

### Summary As Introduced

**Medical care facility reporting; value of charity care.** Removes certain limitations on the meaning of "reviewable service" as it relates to data reporting requirements for medical care facilities and specifies that the value of charity care for such reporting shall be based on gross patient charges.

**Status: Passed House. On course to pass Senate.**

### **History**

1/13/2026House Referred to Committee on [H-Health and Human Services](#)

1/21/2026House Assigned sub: Health

1/27/2026House Subcommittee recommends reporting (10-Y 0-N)

1/29/2026House Reported from [H-Health and Human Services](#) committee (22-Y 0-N)

2/2/2026House Delegate Willett substitute offered

2/3/2026House Delegate Willett Floor substitute agreed

2/4/2026House Read third time and passed House (88-Y 10-N 0-A)

2/5/2026Senate Referred to Committee on [S-Education and Health](#)

### **HB717**

**Nursing homes; application to Commissioner of Health for change of operator license, civil penalty.**

**Patrons** introduced by: [Rodney T. Willett \(Chief Patron\)](#)

### **Summary As Introduced**

**Nursing homes; change of operator; application to Commissioner of Health for change of operator license; civil penalty.** Requires a person taking over the daily operations and management of a nursing home when change of ownership or control occurs to apply to the Commissioner of Health for a change of operator license. The bill establishes the requirements for the application for and for the granting of such license and establishes a civil penalty for failing to provide the Commissioner with information or documentation, effectuating a change of operator without applying for a change of operator license, or providing fraudulent information on an application for a change of operator license.

**Status: Referred to Appropriations Committee. In Appropriations Committee.**

### **History**

1/13/2026House Referred to H-Committee on [H-Health and Human Services](#)

1/23/2026House Assigned sub: [Health Professions](#)

2/10/2026House Subcommittee recommends reporting and referring to Appropriations (10-Y 0-N)

2/12/2026House Reported from [H-Health and Human Services](#) committee and referred to Appropriations (21-Y 0-N)

## **HB829**

**Hospital price transparency; price comparison tool, penalties for noncompliance.**

**Patron** Introduced by: [Dan I. Helmer \(Chief Patron\)](#)

### **Summary As Introduced**

**Hospital price transparency; price comparison tool; penalties for noncompliance.**

Directs the Department of Health to establish a hospital price transparency comparison tool based on the information hospitals provide under existing law and the information available through the Virginia All-Payer Claims Database. The bill specifies that the list of standard charges provided by the hospital controls in the event of a dispute between a hospital and a patient over a patient payment amount and requires hospitals to discharge debt and not require payment for any elective procedure, test, or service for which the patient payment amount is disputed and there is not a standard charge made available to the public on the hospital's website on the date such elective procedure, test, or service is performed.

**Status: In Subcommittee**

### **History**

1/13/2026House Referred to Committee on [H-Health and Human Services](#)

1/23/2026House Assigned sub: Health

## **HB1201**

**Certificate of public need; exception for independent outpatient or ambulatory surgery facilities.**

**Patron** Introduced by: [Phillip A. Scott \(Chief Patron\)](#)

## Summary As Introduced

**Certificate of public need; exception for independent outpatient or ambulatory surgery facilities.** Creates an exception from the requirement to obtain a certificate of public need for facilities for outpatient or ambulatory surgery with up to three operating rooms that are not affiliated with a hospital. The bill requires hospitals to obtain a certificate of public need before acquiring an excepted facility.

**Status: Deceased. “laying on the table” is a polite way of saying killed.**

## History

Referred to Committee on [Health and Human Services](#) 1/14/2026House

1/23/2026House Assigned sub: Health

2/10/2026House Subcommittee recommends laying on the table (6-Y 2-N)

## HB1337

**Certificate of public need; medical deserts, expedited review, etc.**

**Patron** Introduced by: [Nadarius E. Clark \(Chief Patron\)](#)

## Summary As Introduced

**Certificate of public need; medical deserts; expedited review; duties of the State Health Services Plan Task Force.** Adds projects located within medical deserts, defined in the bill, to the list of projects for which there is an expedited certificate of public need application and review process and directs the State Health Services Plan Task Force to include specific criteria for determining need in medical deserts.

**Status: On House Floor. On way to passage by House of Delegates**

## History

1/19/2026House Referred to Committee on [H-Health and Human Services](#)

1/23/2026House Assigned sub: Health

2/10/2026House H-HS [Health](#) subcommittee substitute offered

2/10/2026House Subcommittee recommends reporting with substitute (8-Y 0-N)

2/12/2026House [H-Health and Human Services](#) committee substitute printed  
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2/12/2026House Reported from [H-Health and Human Services](#) committee with substitute (21-Y 0-N)

## Virginia Senate

### SB168

**Certificate of public need; creates exception for maternal and perinatal health services.**

**Patron** Introduced by: [Christie New Craig \(Chief Patron\)](#)

### Summary As Introduced

**Certificate of public need; exception; maternal and perinatal health services.** Creates an exception to certificate of public need requirements for any project or action related to maternal and perinatal health services. The bill also removes neonatal intensive care from the definition of tertiary care for purposes of determining health planning regions.

**Status: Deceased. “Passed by indefinitely” is another polite way of saying killed.**

### History

1/8/2026Senate Referred to Committee on [S-Education and Health](#)

1/20/2026Senate Assigned Education sub: [Health](#)

1/29/2026Senate Passed by indefinitely in [S-Education and Health](#) committee (9-Y 6-N)

## **SB239**

**Certificate of public need; medical deserts, expedited review, etc.**

**Patron** Introduced by: [Christopher T. Head \(Chief Patron\)](#)

### **Summary As Introduced**

**Certificate of public need; medical deserts; expedited review; duties of the State Health Services Plan Task Force.** Adds projects located within medical deserts, defined in the bill, to the list of projects for which there is an expedited certificate of public need application and review process and directs the State Health Services Plan Task Force to include specific criteria for determining need in medical deserts.

**Status: Passed Senate. In House Health and Human Resources Committee**

### **History**

1/12/2026Senate Referred to Committee on [S-Education and Health](#)

1/27/2026Senate Assigned Education sub: [Health](#)

2/5/2026Senate Reported from [S-Education and Health](#) committee with substitute (15-Y 0-N)

2/6/2026Senate Constitutional reading dispensed Block Vote (on 1st reading) (39-Y 0-N 0-A)

2/9/2026Senate [S-Education and Health](#) committee Substitute agreed to

2/9/2026Senate Read second time

2/10/2026Senate Read third time and passed Senate Block Vote (40-Y 0-N 0-A)

2/13/2026House Referred to Committee on [H-Health and Human Services](#)

## **SB241**

**Home care organizations; licensure.**

**Patron** Introduced by: [Christopher T. Head \(Chief Patron\)](#)

### **Summary As Introduced**

**Home care organizations; licensure.** Provides that no license to establish or operate a home care organization shall be issued or renewed until such time as all existing home

care organizations have been inspected. The bill also prohibits a home care organization from maintaining its office in a private residence or virtual office.

**Status: Continued to 2027. No further action on the bill this session.**

### **History**

1/12/2026Senate Referred to Committee on [S-Education and Health](#)

1/27/2026Senate Assigned Education sub: [Health](#)

1/27/2026Senate Senate subcommittee amendment offered

1/29/2026Senate Continued to 2027 in [S-Education and Health](#) committee (13-Y 2-N)

### **SB247**

**Nursing homes; change of operator; application to Commissioner of Health for change of operator license; civil penalty.**

**Patron** Introduced by: [Barbara A. Favola \(Chief Patron\)](#)

### **Summary As Introduced**

**Nursing homes; change of operator; application to Commissioner of Health for change of operator license; civil penalty.** Requires a person taking over the daily operations and management of a nursing home when change of ownership or control occurs to apply to the Commissioner of Health for a change of operator license. The bill establishes the requirements for the application for and for the granting of such license and establishes a civil penalty for failing to provide the Commissioner with information or documentation, effectuating a change of operator without applying for a change of operator license, or providing fraudulent information on an application for a change of operator license.

**Status Passed Senate. In House Health and Human Services Committee**

### **History**

1/12/2026Senate Referred to Committee on [S-Education and Health](#)

1/22/2026Senate Reported from [S-Education and Health](#) committee and rereferred to Finance and Appropriations (14-Y 0-N)

2/5/2026Senate Reported from [S-Finance and Appropriations](#) committee (15-Y 0-N)

2/10/2026Senate Read third time and passed Senate Block Vote (40-Y 0-N 0-A)



2/13/2026House Referred to Committee on [H-Health and Human Services](#)

## **SB429**

**Department of Health and State Health Commissioner; nursing home oversight and accountability.**

**Patron** Introduced by: [Christopher T. Head \(Chief Patron\)](#)

### **Summary As Introduced**

**Department of Health and State Health Commissioner; nursing home oversight and accountability.** Directs the Department of Health and State Health Commissioner to take steps to improve care quality, protect residents, and strengthen oversight and accountability of nursing homes in the Commonwealth. The bill directs the Department to enhance recruitment efforts and expand workforce capacity in the Office of Licensure and Certification, accelerate training and onboarding initiatives, and explore measures to reduce administrative burdens. The bill requires the Commissioner to submit an annual report with recommendations for continuing improvement of nursing home quality and oversight.

**Status: In Committee**

### **History**

1/13/2026Senate Referred to H-Committee on [S-Education and Health](#)

2/5/2026Senate Reported from [S-Education and Health](#) committee (14-Y 0-N)

2/10/2026Senate Read third time and passed Senate Block Vote (40-Y 0-N 0-A)

2/13/2026House Referred to Committee on [H-Health and Human Services](#)

## **SB555**

**Nursing homes; periodic medical visits and resident assessments; civil penalties.**

**Patron** Introduced by: [Glen H. Sturtevant, Jr. \(Chief Patron\)](#)

### **Summary As Introduced**

**Nursing homes; periodic medical visits and resident assessments; civil penalties.**

Requires all nursing homes to ensure each resident receives monthly medical visits,

including two visits by a physician in person each year. The bill also requires each nursing home to conduct a comprehensive assessment on an annual basis to determine each resident's needs and describe each resident's capability to perform daily life functions. Such assessments must be reviewed at least once every three months, and more frequently in the event of a significant change in the resident's physical or mental condition. The bill directs nursing homes to notify the resident, the resident's family or legal representative, and the Department of Health each time a monthly medical visit or comprehensive assessment is delayed. The Department of Health is directed to publish compliance information on its website for each nursing home and publish an annual accountability scorecard.

**Status: On Senate Floor**

**History**

1/14/2026Senate Referred to H-Committee on [S-Education and Health](#)

2/6/2026Senate Assigned Education sub: [Health Professions](#)

2/12/2026Senate [S-Education and Health](#) committee substitute offered

2/12/2026Senate Reported from [S-Education and Health](#) committee with substitute and rereferred to Finance and Appropriations (15-Y 0-N)

**SB633**

**Health care planning; statewide emergency medical services system and services; provision of emergency medical services for events.**

**Patron** Introduced by: [Kannan Srinivasan \(Chief Patron\)](#)

**Summary As Introduced**

**Health care planning; statewide emergency medical services system and services; provision of emergency medical services for events.** Requires the Department of Health to publish on its website a document for event planners and event venues to provide to prospective clients, containing (i) notice that emergency medical services personnel may be made available for events; (ii) information regarding the benefits of appropriate medical support for large or high-risk events; and (iii) a list of emergency medical services providers available to provide services at event venues in each locality of the Commonwealth.

**Status: Passed Senate. In House Health and Human Services Committee**

## History

1/14/2026Senate Referred to H-Committee on [S-Education and Health](#)

1/29/2026Senate [S-Education and Health](#) committee substitute offered

1/29/2026Senate Reported from [S-Education and Health](#) committee with substitute (15-Y 0-N)

2/2/2026Senate [S-Education and Health](#) committee substitute agreed to (Voice Vote)

2/3/2026Senate Read third time and passed Senate Block Vote (39-Y 0-N 0-A)

2/9/2026House Referred to Committee on [H-Health and Human Services](#)