

Executive Order

AMENDED NUMBER FIFTY-SEVEN (2020)

LICENSING OF HEALTH CARE PROFESSIONALS IN RESPONSE TO NOVEL CORONAVIRUS (COVID-19)

Importance of the Issue

The COVID-19 disease, caused by a virus that spreads easily from person to person that may result in serious illness or death and has been classified by the World Health Organization as a worldwide pandemic, has spread throughout the Commonwealth. The number of cases of COVID-19 continues to increase within the Commonwealth and in neighboring states. It is anticipated that COVID-19 will result in increased demands on the Commonwealth's health professional workforce that will require additional personnel. Authorizing out-of-state licensed professionals, as well as residents, interns, and certain senior students to practice in the Commonwealth will assist in meeting that demand. In addition, permitting experienced nurse practitioners to practice without a practice agreement will increase the availability of primary care and hospital providers. Finally, expanding the use of telehealth will assist in the provision of needed health care services to the citizens of the Commonwealth.

Directive

Therefore, by virtue of the authority vested in me by the Constitution of Virginia and §44-146.17 of the *Code of Virginia*, during the state of emergency declared in Executive Order 51, I hereby order the following:

1. During the state of emergency declared by Executive Order 51, a license in good standing issued to a health care practitioner by another state shall be deemed to be an active license issued by the Commonwealth to provide health care or professional services as a health care practitioner of the same type for which such license is issued in another state, provided such health care practitioner is engaged by a hospital or an affiliate of such hospital where both share the same corporate parent, licensed nursing facility, dialysis facility, physicians' office, or other health care facility in the Commonwealth for the purpose of assisting that office or facility with public health and medical disaster response operations. Hospitals, licensed nursing facilities, dialysis facilities, physicians'

offices, and other health care facilities must submit to the applicable licensing board each out-of-state health care practitioner's name, license type, state of license, and license identification number within a reasonable time of such healthcare practitioner providing services for the health care facility or office in the Commonwealth. A health care facility includes assisted living facilities, congregate care settings, and any alternate care facility established in response to the COVID-19 emergency.

- 2. A clinical psychologist, professional counselor, marriage and family therapist, and clinical social worker with an active license issued by another state may be issued a temporary license by endorsement as a health care practitioner of the same type for which such license is issued in another state upon submission of an application and information requested by the applicable licensing board and the board's verification that the applicant's license issued by another state is active in good standing and there are no current reports in the United States Department of Health and Human Services National Practitioner Data Bank. Such temporary license shall expire ninety (90) days after the state of emergency ends. During such time the practitioner may seek a full Virginia license or transition patients to Virginia-licensed practitioners.
- 3. Health care practitioners with an active license issued by another state may provide continuity of care to their current patients who are Virginia residents through telehealth services. Establishment of a relationship with a new patient requires a Virginia license unless pursuant to paragraphs 1 or 2 above.
- 4. A healthcare practitioner may use any non-public facing audio or remote communication product that is available to communicate with patients. This exercise of discretion applies to telehealth provided for any reason regardless of whether the telehealth service is related to the diagnosis and treatment of COVID-19.
- 5. Nurse practitioners licensed in the Commonwealth of Virginia, except those licensed in the category of certified registered nurse anesthetists, with two or more years of clinical experience may practice in the practice category in which they are certified and licensed and prescribe without a written or electronic practice agreement.
- 6. Physician assistants licensed in the Commonwealth of Virginia with two or more years of clinical experience may practice in their area of knowledge and expertise and may prescribe without a written or electronic practice agreement.
- 7. Interns, residents, and fellows with active temporary training licenses to practice medicine issued by the Virginia Board of Medicine may practice in a hospital, including a clinic or alternate care facility operated by a hospital without the supervision of a licensed physician or fully licensed member of the applicable faculty program at all times. The level of supervision required for each intern, resident, and fellow shall be

established by the training program in coordination with the hospital where practice is occurring.

- 8. Senior fourth year medical students may practice in a hospital, including a clinic or alternate care facility operated by a hospital without the direct tutorial supervision by a licensed physician member of the hospital staff. The level of supervision required for each student shall be established by the institution in coordination with the hospital where practice is occurring.
- 9. Individuals who have completed an accredited respiratory care program may practice respiratory therapy and for ninety (90) days thereafter or until the individual has passed the National Board on Respiratory Care licensure examination and been issued a license or has failed the examination, whichever occurs first.

Nothing in this order designates the healthcare practitioners above as agents of the Commonwealth.

These actions are in concert with, and further the provisions of Executive Order 51 in marshalling all resources and appropriate preparedness, response, and recovery measures to respond to the emergency.

Effective Date of this Amended Executive Order

This Executive Order shall be effective April 17, 2020, and shall remain in full force and in effect until June 10, 2020 unless sooner amended or rescinded by further executive order.

Given under my hand and under the Seal of the Commonwealth of Virginia, this 23rd day of April, 2020.



Ralph S. Northam, Governor

Attest:

Kelly Thomasson, Secretary of the Commonwealth