2017 SESSION

ENROLLED

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VIRGINIA ACTS OF ASSEMBLY — CHAPTER

2 An Act to amend and reenact §§ 54.1-2983.2 and 54.1-2986.2 of the Code of Virginia, relating to advance directives.

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Approved

Be it enacted by the General Assembly of Virginia:

7 1. That §§ 54.1-2983.2 and 54.1-2986.2 of the Code of Virginia are amended and reenacted as follows:

§ 54.1-2983.2. Capacity; required determinations.

A. Every adult shall be presumed to be capable of making an informed decision unless he is determined to be incapable of making an informed decision in accordance with this article. A determination that a patient is incapable of making an informed decision may apply to a particular health care decision, to a specified set of health care decisions, or to all health care decisions. No person shall be deemed incapable of making an informed decision based solely on a particular clinical diagnosis.

16 B. Prior Except as provided in subsection C, prior to providing, continuing, withholding, or 17 withdrawing health care pursuant to an authorization that has been obtained or will be sought pursuant to this article and prior to, or as soon as reasonably practicable after initiating health care for which 18 19 authorization has been obtained or will be sought pursuant to this article, and no less frequently than 20 every 180 days while the need for health care continues, the attending physician shall certify in writing 21 upon personal examination of the patient that the patient is incapable of making an informed decision regarding health care and shall obtain written certification from a capacity reviewer that, based upon a 22 23 personal examination of the patient, the patient is incapable of making an informed decision. However, 24 certification by a capacity reviewer shall not be required if the patient is unconscious or experiencing a 25 profound impairment of consciousness due to trauma, stroke, or other acute physiological condition. The 26 capacity reviewer providing written certification that a patient is incapable of making an informed 27 decision, if required, shall not be otherwise currently involved in the treatment of the person assessed, 28 unless an independent capacity reviewer is not reasonably available. The cost of the assessment shall be 29 considered for all purposes a cost of the patient's health care.

30 C. If a person has executed an advance directive granting an agent the authority to consent to the 31 person's admission to a facility as defined in § 37.2-100 for mental health treatment and if the advance 32 directive so authorizes, the person's agent may exercise such authority after a determination that the 33 person is incapable of making an informed decision regarding such admission has been made by (i) the 34 attending physician, (ii) a psychiatrist or licensed clinical psychologist, (iii) a licensed psychiatric nurse practitioner, (iv) a licensed clinical social worker, or (v) a designee of the local community services 35 board as defined in § 37.2-809. Such determination shall be made in writing following an in-person 36 37 examination of the person and certified by the physician, psychiatrist, licensed clinical psychologist, 38 licensed psychiatric nurse practitioner, licensed clinical social worker, or designee of the local 39 community services board who performed the examination prior to admission or as soon as reasonably 40 practicable thereafter. Admission of a person to a facility as defined in § 37.2-100 for mental health 41 treatment upon the authorization of the person's agent shall be subject to the requirements of 42 § 37.2-805.1. When a person has been admitted to a facility for mental health treatment upon the 43 authorization of an agent following such a determination, such agent may authorize specific health care for the person, consistent with the provisions of the person's advance directive, only upon a 44 45 determination that the person is incapable of making an informed decision regarding such health care in accordance with subsection B. 46

D. If, at any time, a patient is determined to be incapable of making an informed decision, the
patient shall be notified, as soon as practical and to the extent he is capable of receiving such notice,
that such determination has been made before providing, continuing, withholding, or withdrawing health
care as authorized by this article. Such notice shall also be provided, as soon as practical, to the patient's
agent or person authorized by § 54.1-2986 to make health care decisions on his behalf.

52 D. E. A single physician may, at any time, upon personal evaluation, determine that a patient who 53 has previously been determined to be incapable of making an informed decision is now capable of 54 making an informed decision, provided such determination is set forth in writing.

55 § 54.1-2986.2. Health care decisions in the event of patient protest.

56 A. Except as provided in subsection B or C, the provisions of this article shall not authorize

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providing, continuing, withholding or withdrawing health care if the patient's attending physician knows 57 58 that such action is protested by the patient.

59 B. A patient's agent may make a health care decision over the protest of a patient who is incapable 60 of making an informed decision if:

61 1. The patient's advance directive explicitly authorizes the patient's agent to make the health care decision at issue, even over the patient's later protest, and the patient's an attending licensed physician 62 or, a licensed clinical psychologist, a licensed physician assistant, a licensed nurse practitioner, a 63 licensed professional counselor, or a licensed clinical social worker who is familiar with the patient 64 attested in writing at the time the advance directive was made that the patient was capable of making an 65 66 informed decision and understood the consequences of the provision; 67

2. The decision does not involve withholding or withdrawing life-prolonging procedures; and

3. The health care that is to be provided, continued, withheld or withdrawn is determined and 68 69 documented by the patient's attending physician to be medically appropriate and is otherwise permitted 70 by law.

71 C. In cases in which a patient has not explicitly authorized his agent to make the health care decision 72 at issue over the patient's later protest, a patient's agent or person authorized to make decisions pursuant 73 to § 54.1-2986 may make a decision over the protest of a patient who is incapable of making an 74 informed decision if: 75

1. The decision does not involve withholding or withdrawing life-prolonging procedures;

76 2. The decision does not involve (i) admission to a facility as defined in § 37.2-100 or (ii) treatment 77 or care that is subject to regulations adopted pursuant to § 37.2-400;

3. The health care decision is based, to the extent known, on the patient's religious beliefs and basic 78 79 values and on any preferences previously expressed by the patient in an advance directive or otherwise 80 regarding such health care or, if they are unknown, is in the patient's best interests;

4. The health care that is to be provided, continued, withheld, or withdrawn has been determined and 81 documented by the patient's attending physician to be medically appropriate and is otherwise permitted 82 83 by law; and

5. The health care that is to be provided, continued, withheld, or withdrawn has been affirmed and 84 85 documented as being ethically acceptable by the health care facility's patient care consulting committee, if one exists, or otherwise by two physicians not currently involved in the patient's care or in the 86 87 determination of the patient's capacity to make health care decisions.

88 D. A patient's protest shall not revoke the patient's advance directive unless it meets the requirements 89 of § 54.1-2985.

E. If a patient protests the authority of a named agent or any person authorized to make health care 90 91 decisions by § 54.1-2986, except for the patient's guardian, the protested individual shall have no authority under this article to make health care decisions on his behalf unless the patient's advance 92 93 directive explicitly confers continuing authority on his agent, even over his later protest. If the protested individual is denied authority under this subsection, authority to make health care decisions shall be 94 95 determined by any other provisions of the patient's advance directive, or in accordance with § 54.1-2986 96 or in accordance with any other provision of law.