

WVHA LEGISLATIVE UPDATE

February 13, 2026

Midpoint of Legislative Session Coincides with Successful Hospital Day

We're halfway through the 60-day legislative session, with over 2,400 bills introduced. All House bills must be introduced by Tue., Feb. 17; Senate bills by Mon., Feb. 23.

WVHA celebrated Hospital Day on Feb. 12, bringing together more than 150 hospital leaders at the State Capitol. The morning began with a Legislative Breakfast featuring Senate Finance Chair Jason Barrett, Senate Health Chair Brian Helton, House Deputy Speaker Matt Rohrbach, and House Health Chair Evan Worrel, who outlined key leadership and healthcare priorities. Thank you to our legislative leaders for their insightful remarks. Here's the link to the full [WVHA Legislative Breakfast - YouTube](#).

On the Senate Floor, the full Senate adopted [SR 34](#) designating Feb. 12, 2026, as Hospital Day at the Legislature. The week wrapped up Friday morning with a virtual session led by Senator and physician Tom Takubo who talked about key healthcare bills moving through the Senate. Thanks to all our legislative champions and all who made Hospital Day activities a success.

Key Bills of Interest

HB 4335 - Medicaid Provider Enrollment and Credentialing Streamlining – This bill streamlines Medicaid provider enrollment and credentialing by establishing strict timelines and standardized processes. The bill aims to eliminate lengthy delays that prevent healthcare providers from billing Medicaid, thereby improving provider recruitment and patient access to care across the State – *passed the House, advanced from Senate Health Committee, now pending Senate Floor*

SB 822 – Prior Authorization – This bill revises the gold card process to include hospitals or department hospitals – *pending Senate Health Committee*

SB 741 - Involuntary Commitment Pilot Program County Expansion– Expands the counties (Hampshire, Morgan, Wood, and Raleigh) that can participate in the current pilot program to implement involuntary commitment process. Existing counties include Cabell, Berkeley, and Ohio. This bill will allow more counties flexibility in implementing a process that works best for their communities– *advanced from Senate Health Committee this week*

SB 742 - Involuntary Hospitalization Petition Timeline Extension – Changes the deadline for filing a mental hygiene petition from 24 hours to 72 hours after the involuntary hospitalization begins. This gives hospitals and physicians more time to complete the necessary paperwork. Patients can still only be held involuntarily for up to 72 hours under this provision unless further detained through the formal hearing process – *pending Senate Judiciary Committee*

HB 4179 - Healthcare Worker Protections –Increases criminal penalties for assaults on healthcare workers - nurses, nurse practitioners, physicians, physician assistants, technicians, and anyone employed by or under contract with a hospital– *passed House, now pending Senate Judiciary Committee*

HB 4089 - Required Coverage for Chemotherapy Hair Loss Prevention Devices - Designated as "Jessica Huffman's Law," this bill requires all health insurance policies in the state that cover cancer chemotherapy treatment to also provide coverage for scalp cooling systems—devices that cool the scalp to prevent or reduce hair loss during chemotherapy– *passed House, now pending Senate Health Committee*

SB 231 - Performance-Based Payment Model for Addiction Treatment Services - Changes how West Virginia pays for addiction treatment, shifting from paying for *services delivered* to paying for *results achieved*. Today, providers are paid for each visit or service, regardless of whether patients actually improve. Under this bill, payments would be tied to real recovery outcomes– *pending full Senate*

SB 650 – Directed Payment Program changes – Deals with the Directed Payment Program (DPP) as it relates to designating psychiatric hospitals that treat exclusively civil and forensic patients (Highland-Clarksburg Hospital) – *pending Senate Finance Committee*

HB 5096 – Certificate of Need – Removes personal care services and intellectual development disabilities services from CON – advanced from the House Health Committee this week – *advanced from House Health Committee this week, now on House Floor*

HB 4740 – RHTP (purchasing) - Provides the Department of Health with procurement flexibility necessary to meet strict federal deadlines and compliance requirements for the RHTP, avoiding the risk of losing federal funding due to delays from standard state purchasing procedures. The flexibility enables quicker deployment of the \$199 million in available federal funds – *advanced from the Senate Government Organization Committee this week, now pending full Senate*

SB 570 - RHTP (appropriations) - Appropriates the \$199 million in federal funds to the Department of Health for the RHTP in fiscal year 2026 – *pending Senate*

HB 4951 –MD/DO continuing education - Requires MDs and DOs to complete continuing education - requires 2 hours of nutrition education within existing continuing education requirements – *pending Senate Health Committee*

HB 4982 – “Make West Virginia Healthy Act of 2026” - reestablishes the Office of Healthy Lifestyles within the Department of Health to coordinate statewide wellness initiatives addressing chronic diet- and lifestyle-related diseases – *passed House, advanced from Senate Health Committee this week, now pending Senate Floor*

SB 729 – OBBA Related - Implements state-level changes aligned with the federal One Big Beautiful Bill Act (OBBA). It establishes a Medicaid work requirement by January 1, 2027, and amends managed care taxes, provider taxes, and directed payments according to OBBA provisions. adults. The Bureau of Medical Services (Medicaid) is authorized to seek necessary federal approval to implement all requirements –*pending Senate Health Committee*

HB 4853 – Trauma Informed Care - Requires hospitals to establish formal protocols for trauma-informed care, particularly for patients who have experienced miscarriages, abuse, neglect, or other traumatic events – *pending House Health Committee*

HB 5086 – Peer Support Programs – Provides legal protections for peer support programs serving healthcare workers and first responders – *advanced from House Health Committee this week, now pending House Judiciary Committee*

HB 4198 – E-Verify – requiring employers to verify a new employee’s authorization to work – *pending Senate Judiciary Committee*

HB 5459 – MCO Tax - brings the health care provider tax on managed care organizations into compliance with new federal regulations – *pending House Finance Committee*

HB 5021 – RN Legislation - Relating to the limited circumstances in which a registered nurse may administer anesthetics – *pending House Floor*

Hospital-Centered Legislation

A few new bills directly impacting hospital operations are surfacing in the Legislature:

- **HB 5476** - requires monitoring of electronic records maintained by hospitals – *pending House Health Committee*
- **HB 5523** - relating to establishing minimum requirements for discharge of women in later stages of pregnancy from hospitals – *pending House Health Committee*
- **SB 946** - Relating to hospital facility fee oversight – *language not available - to be introduced in the Senate on Monday 2/16*

Other hospital bills introduced have not advanced beyond the committee stage, but we continue to monitor. For a full listing on the Legislature’s website, please click [here](#).

Healthcare Provider Bills

Several bills addressing healthcare workforce and scope of practice issues are under consideration. These include measures to expand practice authority for mid-level providers, reduce supervision requirements, and create new licensing categories for healthcare professionals. Other workforce-related bills would establish interstate compacts, clarify anesthesia administration protocols, and improve access to care in rural areas.

Additional healthcare bills under review address inspector general oversight, recruitment incentives for community health centers, prior authorization requirements for behavioral health services, medical product mandates, and pharmacy benefit manager regulation.

If you have any questions regarding bills introduced and legislative activity, please do not hesitate to reach out.

Thanks.

Tony