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HOUSE BILL NO. 529

House Amendments in [] - February 11, 2026

A BILL to amend and reenact §§ 2.2-2004.2, 32.1-263, and 32.1-283 of the Code of Virginia, relating to Suicide Prevention Program created; deaths by suicide of veterans or military service members; inquiry by State Registrar of Vital Records; Department of Veterans Services annual report.

Patron Prior to Engrossment—Delegate Thornton

Referred to Committee on Health and Human Services

Be it enacted by the General Assembly of Virginia:

1. That §§ 2.2-2004.2, 32.1-263, and 32.1-283 of the Code of Virginia are amended and reenacted as follows:

§ 2.2-2004.2. Suicide Prevention Program created; duties; report.

A. There is created in the Department of Veterans Services the position of Suicide Prevention Coordinator Program (the Program) to support and closely coordinate effective mental health care services for military service members and veterans and their families.

B. The Suicide Prevention Coordinator purpose of the Program shall be to:

1. Gather data on mental health and substance use challenges commonly experienced by military service members and veterans and their families that may lead to suicide;

2. In coordination with federal, state, and local partners, gather, review, analyze, and disseminate timely federal, state, and local data on the quantity, common causes, and methods of suicide utilized among military service members, veterans, and their family members;

3. Collaborate with federal, state, and local partners to increase mental health, substance abuse use, and suicide risk screenings and refer military service members and veterans and their family members to the appropriate behavioral health and medical professionals or services;

4. Identify and coordinate new behavioral health and suicide prevention opportunities and funding for those opportunities and, from such funds as may be appropriated or are otherwise available for this purpose, administer a grant program to assist local partners in implementing and coordinating suicide prevention efforts in local communities;

5. Provide suicide prevention, opioid addiction, and substance use resources, training, and support to federal, state, and local agencies; and

6. Compile and analyze data relating to the suicides of veterans and military service members pursuant to death certificates filed with the State Registrar of Vital Records in accordance with § 32.1-263. Such data shall be included in the annual report submitted in accordance with the provisions of § 2.2-2001; and

7. Perform other duties as may be required to effectively provide suicide prevention resources, training, and support to military service members, veterans, and their families.

C. The Commissioner shall include a summary of the work of the Suicide Prevention Coordinator Program in the annual report to the Secretary of Veterans and Defense Affairs, the Governor, and the General Assembly as required pursuant to subdivision 9 of § 2.2-2004.

§ 32.1-263. Filing death certificates; medical certification; investigation by Office of the Chief Medical Examiner.

A. A death certificate, including, if known, the social security number or control number issued by the Department of Motor Vehicles pursuant to § 46.2-342 of the deceased, shall be filed for each death that occurs in the Commonwealth. Non-electronically filed death certificates shall be filed with the registrar of any district in the Commonwealth within three days after such death and prior to final disposition or removal of the body from the Commonwealth. Electronically filed death certificates shall be filed with the State Registrar of Vital Records through the Electronic Death Registration System within three days after such death and prior to final disposition or removal of the body from the Commonwealth. Any death certificate shall be registered by such registrar if it has been completed and filed in accordance with the following requirements:

1. If the place of death is unknown, but the dead body is found in the Commonwealth, the death shall be registered in the Commonwealth and the place where the dead body is found shall be shown as the place of death. If the date of death is unknown, it shall be determined by approximation, taking into consideration all relevant information, including information provided by the immediate family regarding the date and time that the deceased was last seen alive, if the individual died in his home; and

2. When death occurs in a moving conveyance, in the United States of America and the body is first removed from the conveyance in the Commonwealth, the death shall be registered in the Commonwealth and the place where it is first removed shall be considered the place of death. When a death occurs on a moving

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59 conveyance while in international waters or air space or in a foreign country or its air space and the body is
60 first removed from the conveyance in the Commonwealth, the death shall be registered in the Commonwealth
61 but the certificate shall show the actual place of death insofar as can be determined.

62 B. The licensed funeral director, funeral service licensee, office of the state anatomical program, or next
63 of kin as defined in § 54.1-2800 who first assumes custody of a dead body shall complete the certificate of
64 death. He shall obtain personal data of the deceased necessary to complete the certificate of death, including
65 the social security number of the deceased or control number issued to the deceased by the Department of
66 Motor Vehicles pursuant to § 46.2-342, from the best qualified person or source available and obtain the
67 medical certification from the person responsible therefor.

68 If a licensed funeral director, funeral service licensee, or representative of the office of the state
69 anatomical program completes the certificate of death, he shall file the certificate of death with the State
70 Registrar of Vital Records electronically using the Electronic Death Registration System and in accordance
71 with the requirements of subsection A. If a member of the next of kin of the deceased completes the
72 certificate of death, he shall file the certificate of death in accordance with the requirements of subsection A
73 but shall not be required to file the certificate of death electronically.

74 C. The medical certification shall be completed and filed electronically with the State Registrar of Vital
75 Records using the Electronic Death Registration System within 24 hours after death by the physician or
76 autonomous nurse practitioner in charge of the patient's care for the illness or condition that resulted in death
77 except when inquiry or investigation by the Office of the Chief Medical Examiner is required by § 32.1-283
78 or 32.1-285.1, or by the physician or autonomous nurse practitioner who pronounces death pursuant to
79 § 54.1-2972. If the death occurred while under the care of a hospice provider, the medical certification shall
80 be completed by the decedent's health care provider and filed electronically with the State Registrar of Vital
81 Records using the Electronic Death Registration System for completion of the death certificate.

82 In the absence of such physician or autonomous nurse practitioner or with his approval, the certificate
83 may be completed and filed by the following: (i) another physician or autonomous nurse practitioner
84 employed or engaged by the same professional practice; (ii) a physician assistant supervised by such
85 physician; (iii) an advanced practice registered nurse who is not an autonomous nurse practitioner practicing
86 in accordance with the provisions of § 54.1-2957; (iv) the chief medical officer or medical director, or his
87 designee, of the institution, hospice, or nursing home in which death occurred; (v) a physician or autonomous
88 nurse practitioner specializing in the delivery of health care to hospitalized or emergency department patients
89 who is employed by or engaged by the facility where the death occurred; (vi) the physician who performed an
90 autopsy upon the decedent; (vii) an individual to whom the physician or autonomous nurse practitioner has
91 delegated authority to complete and file the certificate, if such individual has access to the medical history of
92 the case and death is due to natural causes; or (viii) a physician who is not licensed by the Board of Medicine
93 who was in charge of the patient's care for the illness or condition that resulted in death. A physician
94 described in clause (viii) who completes a certificate in accordance with this subsection shall not be required
95 to register with the Electronic Death Registration System or complete the certificate electronically.

96 As used in this subsection, "autonomous nurse practitioner" has the same meaning as provided in
97 § 54.1-2972.

98 D. When inquiry or investigation by the Office of the Chief Medical Examiner is required by § 32.1-283
99 or 32.1-285.1, the Chief Medical Examiner shall cause an investigation of the cause of death to be made and
100 the medical certification portion of the death certificate to be completed and filed within 24 hours after being
101 notified of the death. If the Office of the Chief Medical Examiner refuses jurisdiction, the physician last
102 furnishing medical care to the deceased shall prepare and file the medical certification portion of the death
103 certificate.

104 E. If the death is a natural death and a death certificate is being prepared pursuant to § 54.1-2972 and the
105 physician, autonomous nurse practitioner, or physician assistant is uncertain about the cause of death, he shall
106 use his best medical judgment to certify a reasonable cause of death or contact the health district physician
107 director in the district where the death occurred to obtain guidance in reaching a determination as to a cause
108 of death and document the same.

109 If the cause of death cannot be determined within 24 hours after death, the medical certification shall be
110 completed as provided by regulations of the Board. The attending physician or autonomous nurse
111 practitioner, as defined in § 54.1-2972, or the Chief Medical Examiner, an Assistant Chief Medical Examiner,
112 or a medical examiner appointed pursuant to § 32.1-282 shall give the funeral director or person acting as
113 such notice of the reason for the delay, and final disposition of the body shall not be made until authorized by
114 the attending physician, autonomous nurse practitioner, the Chief Medical Examiner, an Assistant Chief
115 Medical Examiner, or a medical examiner appointed pursuant to § 32.1-282.

116 F. A physician, autonomous nurse practitioner, physician assistant, or individual delegated authority to
117 complete and file a certificate of death by a physician who, in good faith, files a certificate of death or
118 determines the cause of death shall be immune from civil liability, only for such filing and determination of
119 causes of death on such certificate, absent gross negligence or willful misconduct.

120 *G. In any case where a death certificate of a veteran or military service member is filed and lists suicide*

121 as the [~~cause and~~] manner of death, the State Registrar of Vital Records shall provide such information
 122 concerning the suicide to the Department of Veterans Services.

123 **§ 32.1-283. Investigation of deaths; obtaining consent to removal of organs, etc.; fees.**

124 A. Upon the death of any person from trauma, injury, violence, poisoning, accident, suicide, or homicide,
 125 or suddenly when in apparent good health, or when unattended by a physician, or in jail, prison, or other
 126 correctional institution, or in police custody, or who was at the time of his death, or immediately prior to
 127 admission to another hospital, an individual receiving services in a state hospital or training center operated
 128 by the Department of Behavioral Health and Developmental Services whether the death of such individual
 129 was expected or unexpected, or suddenly as an apparent result of fire, or in any suspicious, unusual, or
 130 unnatural manner, or the sudden death of any infant, the Office of the Chief Medical Examiner shall be
 131 notified by the physician in attendance, hospital, law-enforcement officer, funeral director, or any other
 132 person having knowledge of such death. Good faith efforts shall be made by any person or institution having
 133 initial custody of the dead body to identify and to notify the next of kin of the decedent. Notification shall
 134 include informing the person presumed to be the next of kin that he has a right to have identification of the
 135 decedent confirmed without due delay and without being held financially responsible for any procedures
 136 performed for the purpose of the identification. Identity of the next of kin, if determined, shall be provided to
 137 the Office of the Chief Medical Examiner upon transfer of the dead body.

138 B. Upon being notified of a death as provided in subsection A, the Office of the Chief Medical Examiner
 139 shall take charge of the dead body and the Chief Medical Examiner shall cause an investigation into the cause
 140 and manner of death to be made and a full report, which shall include written findings, to be prepared. In
 141 order to facilitate the investigation, the Office of the Chief Medical Examiner is authorized to inspect and
 142 copy the pertinent medical records of the decedent whose death is the subject of the investigation. Full
 143 directions as to the nature, character, and extent of the investigation to be made in such cases shall be
 144 furnished each medical examiner appointed pursuant to § 32.1-282 by the Office of the Chief Medical
 145 Examiner, together with appropriate forms for the required reports and instructions for their use. The facilities
 146 and personnel of the Office of the Chief Medical Examiner shall be made available to any medical examiner
 147 investigating a death in accordance with this section. Reports and findings of the Office of the Chief Medical
 148 Examiner shall be confidential and shall not under any circumstance be disclosed or made available for
 149 discovery pursuant to a court subpoena or otherwise, except as provided in this chapter. Nothing in this
 150 subsection shall prohibit the Office of the Chief Medical Examiner from releasing the cause or manner of
 151 death or prohibit disclosure of reports or findings to the parties in a criminal case.

152 C. A copy of each report pursuant to this section shall be delivered to the appropriate attorney for the
 153 Commonwealth and to the appropriate law-enforcement agency investigating the death. A copy of any such
 154 report regarding the death of a victim of a traffic accident shall be furnished upon request to the State Police
 155 and the *Virginia Highway Safety Commission Office*. In addition, a copy of any report concerning an
 156 individual who was receiving services, or who immediately prior to admission to another hospital received
 157 services, in a state hospital or training center operated by the Department of Behavioral Health and
 158 Developmental Services shall be delivered to the Commissioner of Behavioral Health and Developmental
 159 Services and to the State Inspector General. A copy of any autopsy report concerning a prisoner committed to
 160 the custody of the Director of the Department of Corrections shall, upon request of the Director of the
 161 Department of Corrections, be delivered to the Director of the Department of Corrections. A copy of any
 162 autopsy report concerning a prisoner committed to any local correctional facility shall be delivered to the
 163 local sheriff or superintendent. Upon request, the Office of the Chief Medical Examiner shall release such
 164 autopsy report to the decedent's attending physician and to the personal representative or executor of the
 165 decedent [~~and shall notify such decedent's next of kin that such autopsy report has been released~~]. Upon
 166 request of the Commissioner of the Department of Veterans Services, a copy of any autopsy report
 167 concerning the suicide of a veteran or military service member shall be delivered to the Commissioner of the
 168 Department of Veterans Services. At the discretion of the Chief Medical Examiner, an autopsy report may be
 169 released to the following persons in the following order of priority: (i) the spouse of the decedent, (ii) an adult
 170 son or daughter of the decedent, (iii) either parent of the decedent, (iv) an adult sibling of the decedent, (v)
 171 any other adult relative of the decedent in order of blood relationship, or (vi) any appropriate health facility
 172 quality assurance program.

173 D. For each investigation under this article, including the making of the required reports, the medical
 174 examiner appointed pursuant to § 32.1-282 shall receive a fee established by the Board within the limitations
 175 of appropriations for the purpose. Such fee shall be paid by the Commonwealth if the deceased is not a legal
 176 resident of the county or city in which his death occurred. In the event the deceased is a legal resident of the
 177 county or city in which his death occurred, such county or city shall be responsible for the fee up to \$20. If
 178 the deceased is an individual who receives services in a state hospital or training center operated by the
 179 Department of Behavioral Health and Developmental Services, the fee shall be paid by the Department of
 180 Behavioral Health and Developmental Services.

181 E. Nothing herein shall be construed to interfere with the autopsy procedure or with the routine obtaining
 182 of consent for removal of organs as conducted by surgical teams or others.