



**VIRGINIA ACADEMY  
OF  
FAMILY PHYSICIANS**

**2026  
ANNUAL  
REPORT**

# TABLE OF CONTENTS

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2026 Annual Business Meeting Agenda and VAFP Vision and Mission Statements	<b>3</b>
2025-2026 Officers, Directors, Ex Officio Members & Chairs	<b>4</b>
2026-2027 Nominees for Officers and Directors & AAFP Representatives	<b>5</b>
Outgoing President’s Message	<b>6-7</b>
Incoming President’s Message	<b>8-9</b>
Legislative Update	<b>10-13</b>
Continuing Medical Education	<b>14</b>
Membership	<b>15</b>
VAFP Awards	<b>16</b>
VAFP Career Center	<b>17</b>
Residents, Students & Faculty	<b>18-19</b>
Finances	<b>20</b>
Member Engagement Task Force	<b>21</b>
Future of Family Medicine in Virginia: Your Voice, Our Vision	<b>21</b>
Past Presidents of the VAFP	<b>22-24</b>

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# **2026 ANNUAL BUSINESS MEETING AGENDA**

- I. Call to Order & Welcome – Robin N. Anderson, MD, FAAFP, VAFP President
- II. President’s Remarks
- III. Election of 2026-2027 VAFP Officers and Directors
- IV. Confirmation of AAFP Fellows
- V. Legislative Report—David May, JD, VAFP Legislative Consultant
- VI. Adjournment

## **VIRGINIA ACADEMY OF FAMILY PHYSICIANS VAFP VISION STATEMENT**

The vision of VAFP is for Virginia to be the best place for our people to receive their health care and for family physicians to practice medicine.

## **VAFP MISSION STATEMENT**

The mission of VAFP is to empower its members to be physicians who provide high quality, accessible health care, dedicate themselves to the wellbeing of the people of Virginia, and are guided by the principle that the family physician remains the specialist of choice to guide lifelong health care.

# 2025-2026 OFFICERS, DIRECTORS, EX OFFICIO MEMBERS & CHAIRS

## **PRESIDENT**

Robin N. Anderson, MD, FAAFP, Virginia Beach

## **PRESIDENT ELECT**

Verneeta L. Williams, MD, FAAFP, Williamsburg

## **FIRST VICE PRESIDENT**

Julia A. Bruce, MD, Clifton

## **SECOND VICE PRESIDENT**

Yasir Abdul-Rahman, DO, Woodbridge

## **IMMEDIATE PAST PRESIDENT**

Timothy J. Yu, MD, FAAFP, Clifton

## **TREASURER**

Charles O. Frazier, MD, FAAFP, Williamsburg

## **SECRETARY**

Amanda L. Russell, MD, Carson

## **EXECUTIVE VICE PRESIDENT**

Mary Lindsay White, MHA, Richmond

## **2026 DIRECTORS**

Linwood T. Joyner, MD, Portsmouth

Robert J. Newman, MD, FAAFP, Virginia Beach

Matthew S. Paine, MD, FAAFP, Moseley

## **2027 DIRECTORS**

Tabatha B. Davis, MD, FAAFP, Lynchburg

Charlotte Heppner, MD, Richmond

Gordon W. Theisz, MD, FAAFP, Norfolk

## **202 DIRECTORS**

Jeffrey Carter, DO, Williamsburg

Michelle M. Tran, MD, FAAFP, Sterling

Richard Uribe, MD, MPH, Burke

## **RESIDENT DIRECTORS**

Sanjoli Agarwal, DO, Shenandoah Family  
Medicine Residency

Tom Givens, DO, Fairfax Family Medicine  
Residency

## **STUDENT DIRECTORS**

Allie Marcotte, University of Virginia  
Vaishnavi Nandanam, Virginia Tech Carilion  
School of Medicine

## **AAFP Delegates**

Delmas J. Bolin, MD, PhD, FAAFP, Salem  
Emmeline C. Gasink, MD, FAAFP Newport News

## **AAFP ALTERNATE DELEGATES**

Neeta Goel, MD, Ashburn  
David S. Gregory, M.D., FAAFP, Roanoke

## **EX OFFICIO MEMBERS**

Grant M. Greenberg, MD, FAAFP, Roanoke  
Li Li, MD, PhD, MPH, Charlottesville  
Lauri Ann Maitland, DO, MPH, Lynchburg  
John Snellings, MD, Norfolk  
Scott M. Strayer, MD, MPH, FAAFP, Richmond

## **CME/PROFESSIONAL DEVELOPMENT**

Mitchell B. Miller, MD, FAAFP, Virginia Beach

## **EXECUTIVE**

Robin N. Anderson, MD, FAAFP, Virginia Beach

## **FINANCE**

Charles O. Frazier, MD, FAAFP, Williamsburg

## **NOMINATING**

Verneeta L. Williams, MD, FAAFP, Williamsburg

## **LEGISLATIVE**

Jesus L. Lizarzaburu, MD, FAAFP, Yorktown  
E. Mark Watts, MD, FAAFP, Vinton

## **RESIDENT, STUDENT & FACULTY**

Daniel F. McCarter, MD, FAAFP, Richmond  
Denee J. Moore, MD, FAAFP, Dinwiddie

## **WELL-BEING**

Neeta Goel, MD, Ashburn  
Andrey Risser, MD, Richmond

## **FAMDOCPAC**

Sean W. Reed, MD, Charlottesville

# **2026-2027 NOMINEES FOR OFFICERS, DIRECTORS AND AAFP REPRESENTATIVES**

## **PRESIDENT**

Verneeta L. Williams, MD, FAAFP, Williamsburg

## **PRESIDENT ELECT**

Julia A. Bruce, MD, Clifton

## **FIRST VICE PRESIDENT**

Yasir Abdul-Rahman, DO, FAAFP, Woodbridge

## **SECOND VICE PRESIDENT**

Matthew S. Paine, MD, FAAFP, Moseley

## **SECRETARY**

Amanda L. Russell, MD, FAAFP, Carson

## **2029 DIRECTORS**

Kristin Bennie, MD, Clarksville

Kevin Volkema, DO, Middleton

Laurel S. Wallace, DO, MSPH, Richmond

## **RESIDENT DIRECTORS**

Sanjoli Agarwal, DO – Shenandoah

Tom Givens, DO - Fairfax

## **STUDENT DIRECTORS**

Allie Marcotte – UVA

Vaishnavi Nandanam – VT/Carilion

## **AAFP DELEGATE**

Delmas J. Bolin, MD, PhD, FAAFP, Salem

## **AAFP ALTERNATE DELEGATE**

David S. Gregory, MD, FAAFP, Roanoke

# OUTGOING PRESIDENT'S MESSAGE

## ROBIN N. ANDERSON, MD, FAAFP, VIRGINIA BEACH



Dear Members of the VAFFP,

As my year serving as President of the Virginia Academy of Family Physicians comes to a close, I want to express my sincere gratitude for the privilege of representing our Academy. It has been one of the greatest honors of my professional career, and I am thankful for the trust you placed in me to help lead an organization that so passionately advocates for our specialty, our patients, and our communities.

This past year has been one of meaningful progress and engagement. Together, we have invested in the future of family medicine by sending a board member to the AAFP FUTURE Conference, supporting the next group of residents and students as they explore career opportunities across the nation. We participated in the Southeast Family Medicine Forum, collaborating with colleagues from neighboring states to develop and refine resolutions that would ultimately be considered by the AAFP Congress of Delegates.

At the Congress of Delegates in Anaheim, our Academy proudly presented a resolution advocating for the responsible use of artificial intelligence in healthcare. As AI continues to transform medicine, it is essential that family physicians remain at the forefront of ensuring these tools enhance—not replace—the patient-physician relationship while promoting safe, ethical, and equitable care.

Closer to home, we celebrated scholarship and innovation by hosting our annual Scholarly Symposium, providing medical students and residents with the opportunity to present their research and share their passion for advancing family medicine. We also gathered in Richmond for Virginia Family Medicine Advocacy Day, where members met with legislators to advocate for reducing administrative burden, strengthening physician loan repayment programs, and protecting patient access to physician-led care by addressing inappropriate scope expansion for other health care professionals.

Our advocacy extended well beyond Virginia. We attended the National Conference of Constituency Leaders in Kansas City, ensuring diverse voices within family medicine continue to shape the future of our Academy. We partnered closely with the Medical Society of Virginia to help its leadership better understand the unique concerns family physicians face regarding medical malpractice as we work to shape an update to the medical malpractice cap in Virginia. Finally, we joined colleagues from across the country in Washington, D.C., for a national Family Medicine Advocacy Summit, where we met with members of Congress to ensure the interests of family medicine and our patients were represented on the national stage.

Equally important, your Board of Directors sought your input directly. Through our member survey, we listened carefully to your priorities and concerns, and together we developed a plan of action to guide the Academy's work in the years ahead. Your voices continue to shape our direction, and I am excited about the opportunities that lie before us.

None of these accomplishments would have been possible without an extraordinary team of leaders. I want to extend my deepest appreciation to every member of the Board of Directors for their dedication, thoughtful leadership, and countless volunteer hours. I also want to recognize three outstanding board members who are completing their three-year terms: Matt Paine, Bob Newman, and Linwood Joyner. Thank you for your wisdom, service, and unwavering commitment to family medicine in Virginia. Your contributions have strengthened this Academy in lasting ways.

I also want to offer my heartfelt thanks to the incredible VAFP staff. Their professionalism, dedication, and tireless work behind the scenes make every meeting, advocacy effort, educational program, and member service possible. While the Board often receives the recognition, it is our staff who transform ideas into action every single day. We are fortunate to have such an exceptional team.

As one chapter closes, another begins, and I could not be more excited to welcome Verneeta Williams as your next President. Verneeta is a thoughtful leader, a passionate advocate, and someone who embodies the values of family medicine. I know she will lead the Academy with vision, compassion, and purpose, and I look forward to supporting her in the year ahead.

On a more personal note, I would also like to thank my family. While my time with my family physicians does not feel like work, without the support of my husband and children, it would have been a significant challenge.

This July, we will gather in Williamsburg for our Annual Meeting during a remarkable moment in our nation's history as we commemorate the 250th anniversary of the founding of the United States. Williamsburg reminds us of the enduring ideals of liberty, representative government, and the courage required to build something greater than ourselves. At the same time, this anniversary offers an opportunity for honest reflection. The freedoms celebrated at our nation's founding were not enjoyed equally by all people. As family physicians, we recognize that the pursuit of liberty, justice, and opportunity is ongoing, and that our calling is rooted in caring for every individual with dignity, compassion, and respect.

The values that define family medicine—service, advocacy, community, and commitment to improving the lives of others—are deeply connected to that continuing journey. We should never take our freedoms or our responsibilities for granted. Just as those who came before us worked to build a better future, we are called to continue advocating for our patients, our profession, and a healthcare system that serves everyone.

Thank you once again for the opportunity to serve as your President. I am proud of what we have accomplished together, grateful for the friendships and partnerships we have strengthened, and optimistic about the future of family medicine in Virginia. It has been an incredible honor to serve this Academy, and I look forward to continuing our work together in the years ahead.

With sincere gratitude,

Robin N. Anderson, MD, FAAFP  
President  
Virginia Academy of Family Physicians

# INCOMING PRESIDENT'S MESSAGE

## VERNEETA L. WILLIAMS, MD, FAAFP, WILLIAMSBURG



Dear Colleagues,

It is with deep gratitude, humility, and a profound sense of responsibility that I begin my service as the 80th President of the Virginia Academy of Family Physicians (VAFP). To be entrusted with this role by my peers is one of the greatest honors of my professional life, and I am committed to serving each of you with integrity, transparency, and unwavering dedication.

The number 80 symbolizes both legacy and renewal. It represents the remarkable foundation built by the visionary leaders who came before us and the exciting opportunity before us to shape the future of family medicine in Virginia. As we celebrate this milestone, we also reaffirm our shared mission: *advocating for our patients, strengthening our profession, and supporting one another in an increasingly complex healthcare environment.*

*one another in an increasingly complex healthcare environment.*

My own journey toward medicine began long before I entered medical school. At six years old, I proudly announced to my family that I wanted to become a physician and deliver babies. After the unexpected death of my father from a heart attack at just 37 years old, this purpose deepened. I wanted to understand the medical circumstances surrounding his death and, in doing so, help my family experience greater clarity surrounding good health and hope for the future of our community. Those early experiences ignited a calling that continues to guide my work today.

That calling led me to the University of Virginia, where I pursued my pre-medical studies while majoring in Sociology with a concentration in African American Studies and minoring in Biology. Those years were filled with academic growth, musical pursuits, leadership opportunities, faith, and service. These experiences reinforced an enduring lesson: *physicians are called not only to treat disease, but to care for people and strengthen communities.*

Each of us has traveled a unique path into family medicine, yet we are united by a common purpose. We chose a profession centered on relationships, continuity, compassion, and service. While there are many career paths available, family medicine is a calling. It's one that requires resilience, wisdom, and an unwavering commitment to improving the lives of others.

For eight decades, the VAFP has been a trusted voice for family physicians across the Commonwealth. Together, we have influenced public policy, advocated for our patients, protected our profession, and advanced high-quality healthcare throughout Virginia. That legacy continues because of the extraordinary dedication of our members, volunteer leaders, and outstanding staff.

I am especially grateful to serve alongside an exceptional Board of Directors: President-Elect Julie Bruce, MD; First Vice President Yasir Abdul-Rahman, DO; Second Vice President Matt Paine, MD; Treasurer Charlie Frazier, MD; Secretary Amanda Russell, MD; and our newly elected Directors Kristin Bennie, DO; Kevin Volkema, DO; and Laurel Wallace, MD. I would also like to welcome our new resident board members Sanjoli Agarwal, DO, Shenandoah FM Residency; Tom Givens, DO, Fairfax FM Residency and student board members Allie Marcotte, UVA and Vaishnavi Nandanam, VT/Carilion.

I also extend heartfelt appreciation to our immediate Past President, Robin Anderson, MD, whose leadership and mentorship have positioned our Academy for continued success. Finally, none of our accomplishments would be possible without the remarkable VAFP staff: Mary Lindsay White, Kristi Reynolds, Kristie Duncan, Sydney Call, Coda Fisher, David May, and Hunter Jamerson, whose commitment and professionalism are the foundation of our organization.

As your President, my commitment is simple: *to listen, to lead thoughtfully, and to ensure every member feels represented, supported, and valued.* I believe our greatest strength lies not only in our advocacy, but also in our willingness to learn from one another and work collaboratively to address the challenges facing family medicine.

Thank you for the confidence you have placed in me. It is a privilege to serve as your 80th President. Together, let us honor the remarkable legacy of the Virginia Academy of Family Physicians while embracing the opportunities ahead with courage, compassion, and purpose.

With gratitude,

Verneeta L. Williams, MD, FAAFP  
80<sup>th</sup> President  
Virginia Academy of Family Physicians

# LEGISLATIVE UPDATE

## DAVID MAY, JD, MBA, LEGISLATIVE CONSULTANT

### Introduction

During the 2026 session of the Virginia General Assembly, the VAFP Legislative Committee, Co-Chaired by Drs. Jesus Lizarzaburu and Mark Watts, Mary Lindsay White, Executive Vice President, David May, Legislative Consultant, and all family physician Committee members, continued to diligently advocate on behalf of family medicine in Virginia. The Committee met weekly throughout the legislative session and, during the interim, continues to meet on an as-needed basis and communicate through its list serv.

The Committee continues to serve an important role in promoting VAFP's mission and in representing all VAFP members in the legislative arena to ensure that all issues related to primary care, especially those impacting the daily practice of family medicine, are monitored and addressed.

Because of such efforts, and despite significant challenges that arose during the 2026 session, the Committee had a very successful year. As highlighted below, VAFP secured several significant victories in coordination with our colleagues in the House of Medicine.

### Medical Malpractice

Like last year's bill, SB 99 (Stanley) proposed to eliminate the recovery cap on medical malpractice actions brought against health care providers by patients 10 years of age or younger. The bill again advanced from the Senate Courts Committee but, with the help of VAFP and other stakeholders, was ultimately defeated in the Senate Finance Committee.

SB 536 (Obenshain), as introduced, provided that the total amount recoverable in a medical malpractice action shall not include any amount of interest accrued prior to the verdict of a jury or the entry of a final judgment by the court. However, the House laid a substitute over the introduced version and passed a version that would have increased the medical malpractice cap to \$6 million. Fortunately, the Senate did not agree to the House position. Ultimately, the General Assembly removed all substantive statutory changes from the bill and, instead, directed that certain data be reported during the 2026 interim.

Specifically, the final version of SB 536 requires medical malpractice insurers to disclose information regarding (i) premiums; (ii) claims activity; (iii) claim payments and litigation costs; and (iv) insurer financial condition. The bill also requires all medical care facilities and health care providers that maintain self-insurance, captive insurance, risk retention arrangements, or other retained financial risk for medical malpractice liability to disclose information regarding (a) the numbers of physicians and health care providers covered; (b) claims activity; (c) malpractice expenditures; and (d) the total malpractice liability expenditures for the reporting year. The bill further requires such insurers, facilities, and providers to provide a list of any medical malpractice actions in which the jury verdict exceeded the medical malpractice cap. Such information will be submitted to the Bureau of Insurance on or before September 1, 2026, for the 2025 calendar year and on or before March 31 of each year thereafter. Thereafter, the Bureau will report deidentified aggregate summaries of such information.

Such report will ultimately be used to further evaluate the Commonwealth's medical malpractice damages cap and framework. With an expectation that legislation will again be introduced during the 2027 session to raise or modify the medical malpractice cap, VAFP has already started working collaboratively with other stakeholders in the House of Medicine to prepare for this effort and will continue to strongly advocate against any changes that would have a negative impact on family medicine.

### Prior Authorization

During the 2026 session, VAFP successfully sponsored legislation to help prevent unfounded denials of prior authorization requests. Specifically, HB 481 (Hope), which passed the General Assembly and was signed into law by Governor Spanberger, prohibits health insurance carriers from making an adverse determination of a prior authorization

request (i) for prescription drugs unless such denial has been reviewed and approved by a licensed physician or, if a licensed physician is not available, by a licensed pharmacist or (ii) for health care services unless such adverse determination has been reviewed and approved by (a) a licensed physician; (b) in the case of mental health services, a licensed mental health provider if a licensed physician is unavailable; or (c) in the case of dental services, a licensed dentist if a licensed physician is unavailable.

VAFP, in consultation with the House of Medicine, also helped successfully support the passage of HB 736 (Maldonado), HB 676 (Maldonado), and SB 172 (Pekarsky).

HB 736 amends existing required provisions for health carrier contracts related to prior authorizations for prescription drugs. Current law requires that if prior authorization is approved for prescription drugs and such prescription drugs have been scheduled, provided, or delivered to the patient consistent with the authorization, health carriers may not revoke, limit, condition, modify, or restrict that authorization except in certain circumstances. The bill requires this limitation on carriers to apply for the duration of the authorization, which the bill requires to be a minimum of six months for initial authorizations and a minimum of 12 months for continued authorizations. The bill adds circumstances under which a prior authorization may be revoked, limited, conditioned, modified, or restricted by a carrier, including (i) a final action by the FDA, other regulatory agencies, or the manufacturer communicating a patient efficacy issue that would affect the authorization and (ii) when additional safety and efficacy monitoring is clinically appropriate or recommended by the FDA, other regulatory agencies, or the manufacturer.

HB 676 and SB 172 provides that, in the following contexts, information may be submitted by a provider to a health insurance carrier through electronic attachment, as defined in the bill: (i) information related to services rendered as required by the carrier in its provider contract; (ii) information related to any defect or impropriety that prevents the carrier from deeming a health insurance claim a clean claim, as defined in existing law; and (iii) information required to establish medical necessity, benefit coverage, or prior authorization of services, or to conduct reconsideration activities. The bill has a delayed effective date of January 1, 2027. This bill is identical to SB 172.

Other prior authorization bills that failed include HB 1526 (Fowler), SB 476 (DeSteph), and SB 500 (DeSteph).

### **Cost Estimates**

HB 1276 (Watts), which was defeated, would have required health care providers to provide a good faith estimate of the payment amount for which the patient will be responsible for nonemergency health care services, including any fees or other charges. The bill would have required the good faith estimate to include (i) a description of the health care service, (ii) the provider's standard charge for the service and any related item or service, (iii) the provider's standard charges and any contracted rates known at the time of the estimate, and (iv) a statement that the estimate is not binding and the actual amount billed may differ.

### **Continuing Medical Education**

Numerous bills were introduced during the 2026 session that would have created new CME requirements.

HB 1147 (Hayes) and SB 22 (Locke), which ultimately passed, direct the Boards of Medicine and Nursing to require certain licensees to complete education on bias reduction in health care as part of their continuing education and continuing competency requirements for licensure. The bills also authorize the Board of Nursing to require certain continuing learning activities or courses in a specific subject area. Under current law, the Board of Medicine already has such authority.

HB 156 (Krizek) and SB 194 (Williams Graves) as introduced, would have required the Boards of Medicine and Nursing to establish CME requirements on the electronic death registration system and require physician attestations on the requirement to timely sign death certificates. However, with VAFP's assistance, such bills were amended to instead require the Boards of Medicine and Nursing to amend their licensure and renewal applications to require physicians and certain other providers to indicate whether they expect their scope of practice to include signing death certificates and, if so, to indicate that they have completed the online tutorial for the Electronic Death Registration System on the Department of Health website.

HB 1223 (Delaney), which ultimately failed, would have required counselors, licensed substance abuse treatment practitioners, marriage and family therapists, behavioral health technicians, qualified mental health professionals, occupational therapists, psychologists, and social workers to complete mandatory suicide prevention training once every six years and would have required other health professionals to complete such training once.

### **Health Insurance – Downcoding**

HB 484 (Shin) and SB 164 (McPike), as passed, prohibit an insurance carrier, intermediary, administrator, or representative of a carrier from downcoding a claim unless the decision to downcode is made by a person or electronic system that reflects correct coding standards and considers all relevant patient data from the billing provider in making the determination. The bills require a carrier, intermediary, administrator, or representative that downcodes a claim to provide certain notice to the provider and that all downcoding dispute decisions be reviewed and adjudicated by a natural person.

### **Scope of Practice – Physician Assistants; APRNs**

Last year (2025 session), after an agreement was reached between MSV and the physician assistants, the General Assembly ultimately passed HB 2489 (Henson). This bill directed the Department of Health Professions (DHP) to conduct a study on potential expansion of the scope of practice for physician assistants.

Following that study, HB 746 (Henson) was introduced during the 2026 session with the goal of placing PAs on more equal footing with NPs regarding autonomous practice. VAFP worked with the patron to make many changes and improvements to this bill. As passed, the legislation authorizes a PA with at least three years of full-time clinical experience to practice without a practice agreement upon receipt of an attestation from a patient care team physician who provided collaboration and consultation to such PA verifying the length and nature of the PA's practice. The bill also establishes a scope of practice for PAs who practice without a practice agreement.

HB 622 (Glass), which was ultimately defeated, would have permitted advanced practice registered nurses who practiced autonomously for at least three years as part of either military service or employment with the Department of Veterans Affairs to practice without a practice agreement.

### **Noncompete Agreements**

HB 627 (Herring) and SB 128 (VanValkenburg) add health care professionals as a category of employee with or upon whom no employer shall enter into, enforce, or threaten to enforce a covenant not to compete. The bill defines "health care professional" as any person licensed, registered, or certified by the Board of Medicine, Nursing, Counseling, Optometry, Psychology, or Social Work. The bill provides that any employer that violates the prohibition against covenants not to compete with a health care professional is subject to the civil penalty in current law of \$10,000 for each violation.

### **Budget Items**

At the time this bulletin was created, the General Assembly has not yet been able to come to an agreement on the state budget. Much of the push and shove centers around the data center tax exemption.

### **Looking Ahead**

During the 2027 session, VAFP will continue its advocacy in the General Assembly to support the priorities of family medicine. The Legislative Committee is presently focused on the medical malpractice cap, continued defense on scope of practice issues, alleviation of administrative burdens, support for family medicine residency and loan repayment programs, and reimbursement.

Amid high turnover in the General Assembly, potentially severe budget constraints, and continued competing opinions and priorities among health professionals and other stakeholders, advocacy by VAFP and its members continues to be of incredible importance. Please consider supporting FamDocPAC to assist us in promoting and advocating for family medicine in the Commonwealth.

### **Advocacy Day**

VAFP successfully utilized the 2026 session to spread awareness of the issues associated with, and the priorities of, family medicine. With a high percentage of new members in the General Assembly, the need for education is higher than usual. In recognition of this, VAFP has spent significant time and resources to spread awareness regarding the ins and outs of primary care.

As part of these efforts, VAFP sponsored another successful Advocacy Day on Thursday, February 5, 2026. The day began with breakfast and an issue brief from David May, VAFP Legislative Consultant, after which the group headed to the General Assembly Building. Aided by a great turnout, we were able to engage in many face-to-face meetings with legislators and explain our positions on legislation and budget items before the legislature. These efforts not only helped us to develop new relationships and strength existing ties with Delegates and Senators, but also to ensure that all legislators understand and appreciate the importance of primary care in the Commonwealth.

Like in years past, VAFP's presence at the General Assembly was recognized, welcomed, and appreciated by the legislators. The legislators made their opinion clear that it is important for family docs to have a seat at the table as legislators weigh new statutory provisions governing the Commonwealth's health care system.

We would like to extend a special thank you to all members that volunteered their time to support our advocacy efforts this year! If you are interested in participating in our 2027 Advocacy Day (February 4, 2027), please reach out to ML White ([mlwhite@vafp.org](mailto:mlwhite@vafp.org)) and/or sign up to be a VAFP Key Contact.

### **Family Physician of the Day Program**

During the 2026 session, VAFP members again volunteered their time to staff the health clinic in the General Assembly Building daily from 9am–3pm. This continues to serve as a great way for our members to meet legislators and ensure that family medicine remains at the forefront in the minds of our lawmakers. If you are interested volunteering at the clinic during the 2027 Session, please reach out to ML White ([mlwhite@vafp.org](mailto:mlwhite@vafp.org)).

### **VAFP Key Contact Program**

With so many new legislators in the Virginia General Assembly, it is now more important than ever to participate as a Key Contact for your senator or delegate. If you know your legislator or would like to get to know them, please use the QR code below to sign up to be a VAFP Key Contact.



# CONTINUING MEDICAL EDUCATION

The Virginia Academy of Family Physicians continues its tradition of offering first class, affordable continuing medical education conferences for Academy members. The Academy is pleased to report that year 2025-2026 was again very strong in attendance at our CME events. The VAFP CME Committee Chaired by Mitchell Miller, MD, continually works on behalf of family physicians to create events that focus on the most up to date topics that are pertinent to the daily practice of family medicine and national/state educational requirements.

Each year, the Academy sponsors two major CME activities. The Winter Family Medicine Weekend is held over four days in the month of January. The 2026 winter event was held over the dates of January 29 – February 1 at Wintergreen Resort. It drew over 200 family physicians, residents, medical students, and other health care professionals and 35 exhibiting organizations supported the meeting. The Academy continues to offer a one-time complimentary registration to all AAFP member recent graduates that were less than 5 years out of residency. Nine of our new physician members took advantage of this outstanding opportunity.

The Academy's Annual Meeting & Exposition is held each summer in mid-July or early August. This year's Annual Meeting is scheduled for July 16-19 at Williamsburg Lodge. The meeting will be comprised of two full days and two half days of in-person general CME sessions and workshops worth over 20 credits of live AAFP Prescribed CME. In 2024, the Academy began offering the VAFP Journal Club as a new session that satisfies the ABFM certification requirements. A special thank you to VAFP Past President and Treasurer Charles Frazier, MD for continuing to facilitate this session in 2026.

In addition to the VAFP Journal Club, the VAFP also sponsored five Knowledge Self-Assessment (KSA) programs to assist VAFP members with the completion of their ABFM Family Medicine certification requirements. These sessions drew maximum attendance and continue to be evaluated very highly. The facilitation of KSA's in a hybrid model has truly been a great membership as it allows members to feel as though they are in person without having to travel if they choose.

Continuing in the year 2025-2026, VAFP served as the educational partner for a program facilitated by the Medical Society of Virginia's Foundation. This new program called the HealthHaven-Adult Psychiatric Access Line (APAL), is funded by the state's budget and mirrors the current pediatric mental health program, VMAP. Beginning at the 2024 VAFP Annual Meeting, the Academy facilitated lectures, webinars, scholarships and media all focused on mental health and substance use disorder education throughout this past year. The partnership was very successful, and the education extremely well received by VAFP members. The Academy will continue the educational partnership for the 2026-2027 year.

The Academy expresses deep appreciation to the Continuing Medical Education Committee for their outstanding work in creating superb CME for VAFP members and to Kurtis S. Elward, MD, MPH, FAAFP, Mark H. Greenawald, MD, FAAFP, Charles Frazier, MD, FAAFP, Timothy J. Yu, MD, FAAFP, and Michael Petrizzi, MD for their exceptional work as Family Medicine Certification session presenters.

# MEMBERSHIP

As of May 2026, total VAFP membership stood at 3,054 with Active membership totaling 1,781, resident membership at 365 and student membership at 463. Four additional categories including Life membership totaled 445. The membership numbers have slightly increased from 2025 but continue to be an area that the VAFP staff is focused on for the remainder of 2026. The New Physician category was more stable versus the previous year but the number of members transitioning from the Active Member to Life Member continues to increase.

Additionally, our resident members increased slightly, and staff will continue to work with program coordinators to strive for 100% resident membership. To help offset the financial pressure of dues for New Physician members, the VAFP continued with a 25% dues reduction for year two new physicians and a 50% dues reduction for year one new physicians. These are aligned with the discounts offered by the AAFP for New Physicians year one through three. The VAFP continues to contact graduating residents so they can be tracked for continued membership either in Virginia or the state in which they practice.

The VAFP continues to offer multiple member benefits including access to the Daily POEMS, the VAFP Career Center and legal resources for employment contract negotiations, regulatory and administrative issues.

Daily POEMs from Essential Evidence Plus provide members with complimentary daily alerts and over 3,000 archived POEMs to help members stay abreast of the latest and most relevant medical literature. Delivered directly to by e-mail every Monday through Friday, Daily POEMs identify the most valid, relevant research that may change the way physicians practice. Since 1996, POEMs editors review more than 1,200 studies monthly from more than 100 medical journals, presenting only the best and most relevant as POEMs. The acclaimed POEMs process applies specific criteria for validity and relevance to clinical practice. If you are interested in receiving, please e-mail [scall@vafp.org](mailto:scall@vafp.org).

VAFP's General Counsel, Hunter Jamerson, JD, MBA, continues to partner with the Academy to provide an initial legal resource for VAFP members and David May, VAFP Legislative Representative began his second year on the team and continues to elevate the VAFP in the legislative arena. His prior experience in Legislative Services at the Virginia General Assembly is a big win for the Academy's efforts to continue to establish grassroots relationships between legislators and VAFP members. See pages 10-13 for a complete legislative report.

The VAFP Career Center is housed on the VAFP website and is the career hub for physician employment opportunities in Virginia. The VAFP Career Center is the premier resource for you to explore employment opportunities in Virginia or to recruit for open positions within your practice. The VAFP has discounted member rates for those that want to advertise open positions within the VAFP Career Center. See page 17 for additional information on this great membership benefit.

In addition to the specific benefits mentioned above, members of the VAFP generally benefit in multiple ways noted below.

- Advocacy and representation at a state and national level
- Continuing medical education offerings that are family medicine specific
- Communications and services to keep you up to date
- Cost effective VAFP's dues structure
- Leadership opportunities at the committee and board levels
- Access to the VAFP's dedicated staff to answer your questions
- Monthly e-mail updates and a quarterly magazine
- Online registration for all VAFP events
- Facebook/Twitter/Instagram social media content to keep members connected with the Academy
- Easy online CME reporting, tracking, and planning

For information on all the member benefits, please contact the VAFP at [admin@vafp.org](mailto:admin@vafp.org); 1-800-THE-VAFP or the website <https://vafp.org>.

# AWARDS

Congratulations to the recipients of this year's VAFP Awards. The 2026 Awards will be presented during the Installation and Awards dinner on Friday, July 17, 2026.

## Virginia Family Physician of the Year Award



Giancarlo Pierantoni, MD

*Interim Vice Chair, Clinical Operations and Quality  
Family Medicine and Population Health  
VCU School of Medicine  
Richmond, VA*

## James P. Charlton, MD Teacher of the Year Award



Sahira A. Humadi, MD

*Family and Community Medicine  
EVMS Medical Group at ODU  
Norfolk, VA*

## F. Elliott Oglesby, MD, Volunteer of the Year Award



E. Mark Watts, MD, FAAFP

*Bradley Free Clinic  
Roanoke, VA*

## CAREER CENTER

The VAFP Career Center is the hub for physician employment opportunities in Virginia and is the premier member resource to explore employment opportunities in Virginia or to recruit for open positions within your practice. VAFP has discounted rates for members that want to advertise open positions within the Career Center.

To access the Career Center, visit [vafp.careerwebsite.com](http://vafp.careerwebsite.com) or scan the QR code below. The VAFP Career Center will provide the opportunity to:

**Manage Your Career** - search and apply to multiple family medicine positions that are all located in Virginia, upload your anonymous resume, and allow employers to contact you through the Career Center's messaging system, set up job alerts specifying your skills, interests, and preferred location(s) to receive email notifications when a job is posted that matches your criteria.

**Recruit for Open Positions** - promote your jobs directly to VAFP members via the exclusive Career Center email system, search the anonymous resume database to find qualified candidates, manage your posted jobs and applicant activity easily on this user-friendly site.

One of the goals at the VAFP is to provide members with training and tools to advance their career development. Please utilize the VAFP Career Center to find or fill a job in the future. If you have any questions, please do not hesitate to contact the VAFP at 1-800-THE-VAFP or e-mail Coda Fisher [cfisher@vafp.org](mailto:cfisher@vafp.org).



# RESIDENT, STUDENT & FACULTY

The Virginia Academy of Family Physicians puts great focus on our resident members and student members and the faculty at the residency programs and medical schools that support the training of these future family physicians.

## Resident and Student Leadership

VAFP resident and student members can participate in multiple leadership positions at the state level on the VAFP Board of Directors, as members of VAFP committees and as Delegate to the AAFP National Conference representing Virginia. On the national level, as members of AAFP commissions and other various representatives to partner AAFP organizations. On the VAFP Board, resident and medical student representatives serve a one-year term beginning in the spring of each year. Representatives are funded to attend all VAFP Board Meetings as well as the AAFP's FUTURE conference held annually in July/August.

## Resident and Student Benefits

Academy dues are paid by the VAFP for resident members in their first year of residency and all four years of medical student dues are complimentary.

In addition to membership dues benefits, the VAFP provides complimentary housing for students and residents to attend the VAFP Winter Family Medicine Weekend held annually at Wintergreen Resort. At the 2026 VAFP Winter Family Medicine Weekend, 23 Family Medicine Residents and 48 medical students were in attendance. Continued from previous years, was a resident panel discussion that offered students the opportunity to ask questions of residents related to "What It's Like to be a FM Resident?". At the conclusion of the panel discussion, the residents and students enjoyed a complimentary networking dinner.

VAFP also supports residents with discounted employment contract review by the VAFP's General Counsel and a Career Center that houses multiple job offerings in the Commonwealth. VAFP supports the Family Medicine Interest Group's at each of the six Virginia medical schools with \$500.00 in funding to develop programs that promote Family Medicine.

## Choose VA Scholarships

The VAFP Foundation offers a resident scholarship for assistance with education loan repayment. Many family medicine residents in Virginia have expressed an interest in staying in the Commonwealth after their graduation. If they practice in a health professions shortage area for at least one year post graduation, they are eligible to apply for a resident Choose VA scholarship. The Foundation awarded its first scholarships in 2017.

The VAFP Foundation receives donations from generous members to support this effort to keep our own. In 2026 the Choose Virginia Resident Scholarship was \$10,000 and in 2027, the Foundation anticipates providing the \$10,000 scholarship and a second resident scholarship amount to be determined.

## Research

In the fall of 2025, the VAFP hosted a Scholarly Symposium for residents, medical students, and fellows. This one-day event showcased scholarly work in the areas of clinical or population health research, medical education research, literature review, case reports, QI/PI projects, clinical successes, patient stories, or educational projects. Over 40 students, residents and family physician members attended the virtual conference which was approved for 1.50 AAFP Prescribed CME credits. The event for 2026 is slated for Saturday, November 7<sup>th</sup> from 10:00 a.m. – 11:30 a.m.

### Choose VA

On April 18<sup>th</sup> the VAFP hosted Choose Virginia 2026 at the DoubleTree Charlottesville. This event was first held back in 2009 in partnership with the Virginia Workforce Development Authority and the Virginia Department of Health. Over 85 medical students from Virginia, surrounding states and Caribbean medical schools, faculty, staff and family medicine residents from eleven programs across the Commonwealth were in attendance. Choose VA offers medical students a firsthand look into what it's like to be a family physician with introductions to Virginia's family medicine residency program faculty and residents as well as multiple procedural sessions for that clinical experience.

The residency programs in attendance included:

- Bon Secours St. Francis Family Medicine Residency Program
- Carilion Clinic - Virginia Tech Carilion Family Medicine Residency Program
- Centra - Lynchburg Family Medicine Residency Program
- Dr. S. Hughes Melton Family Medicine Residency Program
- EVMS Family Medicine Residency Program
- INOVA Fairfax Family Medicine Residency
- Mary Washington Hospital Family Medicine Residency Program
- Riverside/VCU Family Medicine Residency Program
- Shenandoah Valley Family Medicine Residency Program
- University of Virginia Family Medicine Residency Program
- VCU Health Community Memorial Hospital Family Medicine Residency Program

### Virginia Program/Associate Program Director Engagement

The Virginia Family Medicine Residency Program leadership faculty continues to meet on a quarterly basis to share ideas and learn from each other on ways to continue to enhance the training of our future family physicians.

# FINANCES

The Virginia Academy of Family Physicians continues its tradition of operating under sound financial leadership. This effort is led by VAFP Treasurer Charles Frazier, MD, and the members of the VAFP Executive/Finance Committee. The committee meets each year to develop an operating budget that meets the needs of the Academy yet is very mindful of fiscal responsibility to the Academy. During the meeting, the committee also reviews the Academy's Financial Reserve Policy and Statement of Cash.

Currently, the VAFP's dues are among the lowest in the country as compared to other AAFP Chapters with an active membership of similar size. In the last 30 plus years, the Academy has only had four dues increases.

In the fall of 2024, the Academy created an Investment Policy Committee guided by an Investment Policy Statement that enhances the Academy's long-term strategy of investing cash reserves in strategic instruments including certificates of deposit and a portfolio comprised of investment vehicles that are well diversified, with reasonable expense ratios.

Net income for fiscal year 2025 was \$139,755 which exceeded the budgeted projections by just over \$118,000. The VAFP ended fiscal year 2025 with Net Assets of just over \$2,510,000.

## Finances — Statement of Financial Position & Activities FOR THE YEAR ENDING DECEMBER 31, 2025

### SUPPORT AND REVENUE

Membership dues	\$ 580,750
Annual Meeting	\$ 175,746
CME seminars	\$ 201,910
APAL Educational Partnership	\$ 74,572
Choose VA	\$ 18,325
Career Center	\$ 9,953
Grants	\$ 5,000
Interest income	\$ 124,181
Unrealized gain on investments	\$ 19,635
Total support and revenue	\$ 1,210,072

### EXPENSES

Program	
Education	\$ 589,854
Advocacy	\$ 257,541
Supporting services	
General and administrative	\$ 222,922
Total expenses	\$ 1,070,317

Unrestricted Net Assets, beginning of year	\$ 2,371,847
Increase in unrestricted net assets	\$ 139,755
Unrestricted Net Assets, end of year	\$ 2,511,602

# MEMBER ENGAGEMENT TASK FORCE

In the fall of 2024, VAFP Past President Tim Yu, MD and VAFP Second Vice President Yasi Abdul-Rahman, DO proposed the creation of a Member Engagement Task Force with a focus on increased social media presence and recruitment efforts for the VAFP. The VAFP Board approved the request at the November meeting in Fredericksburg.

The Task Force's activities include:

- Enhance Social Media Presence: Develop a strategy to utilize social media platforms to engage current members and attract new ones.
- Promote Conferences and Events: Create targeted advertising campaigns for upcoming conferences and events to increase attendance and awareness.
- Recruit New Members: Implement strategies to reach out to potential members, including med students and new physicians, to grow the VAFP community.
- Evaluate and Adapt: Continuously assess the effectiveness of our social media strategies and recruitment efforts, adapting as necessary based on feedback and analytics.

The twelve-member group includes family physicians, family medicine residents and medical students working together to advance the message of family medicine. In 2026, the task force and staff have a goal of bi-weekly social media posts. VAFP encourages anyone with an interest in social media to join the task force. Contact [mlwhite@vafp.org](mailto:mlwhite@vafp.org) if interested.

## FUTURE OF FAMILY MEDICINE IN VIRGINIA: YOUR VOICE. OUR VISION



In early 2026, the Virginia Academy of Family Physicians invited members to help chart a course for the specialty. More than 200 —active physicians, residents, medical students, and retired members—shared frustrations, innovative ideas, and hopes for the next 5 to 20 years.

The results of the 2026 FFM in Virginia membership survey are clear: members are not asking for a completely new philosophy. Instead, for core values—continuity, trust, and whole-person care—to survive and thrive inside a better-designed system.

### What We Heard: The Heart of the Matter

The survey revealed a powerful consensus on what the future must look like. You envision a Virginia where family medicine is physician-led, relationship-centered, and community-rooted.

### A Roadmap, Not a Promise

We want to be realistic: the Academy cannot fix the healthcare system overnight. However, this survey provides us with a strategic roadmap. It suggests five "strategic lanes" where the VAFP will focus its energy over the next three to five years:

1. Leading Payment and Policy Reform to make primary care economically viable.
2. Defining Physician-Led Team-Based Care to protect our professional identity.
3. Shaping Responsible AI Adoption to reduce friction rather than increase productivity pressure.
4. Rebuilding the Pipeline to ensure the next generation sees a sustainable, broad-scope career path in Virginia.
5. Elevating our Public Voice to frame family medicine as essential infrastructure for the Commonwealth.
6. We Need Your Hands on the Wheel

# **PAST PRESIDENTS OF THE VAFP**

- \*William L. Powell, MD, Roanoke 1947-48
- \*James L. Hamner, MD, Mannboro 1948-49
- \*James D. Hagood, MD, Clover 1949-50
- \*Ira L. Hancock, MD, Virginia Beach 1950-51
- \*John O. Boyd, Jr., MD, Roanoke 1951-52
- \*Edward S. Haddock, MD, Richmond 1952-53
- \*Brewster A. Hopkins, MD, Stuart 1953-54
- \*Richard M. Reynolds, MD, Norfolk 1954-55
- \*Rufus Brittain, MD, Tazewell 1955-56
- \*Frank E. Tappan, MD, Berryville 1956-57
- \*Malcolm H. Harris, MD, West Point 1957-58
- \*W. Linwood Ball, MD, Richmond 1958-59
- \*Fletcher J. Wright, Jr., MD, Petersburg 1959-60
- \*Boyd H. Payne, MD, Staunton 1960-61
- \*William J. Hagood, MD, Clover 1961-62
- \*Harry M. Frieden, MD, Norfolk 1962-63
- \*Frank D. Daniel, MD, Lynchburg 1963-64
- \*Thomas L. Lucas, MD, Charleston, SC 1964-65
- \*Russell G. McAllister, MD, Richmond 1965-66
- \*Robert L. Cassidy, MD, Culpeper 1966-67
- \*J. Powell Anderson, MD, Waynesboro 1967-68
- \*Howard I. Kruger, MD, Norfolk 1968-69
- \*A. Epes Harris, MD, Blackstone 1969-70
- \*Clarence W. Taylor, Jr., MD, Shawsville 1970-71
- \*Thomas H. Jennings, MD, Bedford 1971-72
- \*Alan Mackintosh, MD, Bristow 1972-73
- \*T. Winston Gouldin, MD, Norfolk 1973-74
- \*William B. Waddell, MD, Bald Head Island 1974-75

# PAST PRESIDENTS OF THE VAFP

- \*Robert S. Smith, MD, Richmond 1975-76
- \*Levi W. Hulley, Jr., MD, Richmond 1976-77
- \*George Robert Smith, MD, Shawsville 1977-78
- \*Emerson D. Baugh, Jr., MD, Kenbridge 1978-79
- \*Gene E. Clapsaddle, MD, Moneta 1979-80
- \*Harold M. Horden, MD, Norfolk 1980-81
- \*James P. Charlton, MD, Virginia Beach 1981-82
- \*Benjamin E. Norfleet, MD, Newport News 1982-83
- \*J. Francis Amos, MD, Rocky Mount 1983-84
- \*G. Stanley Mitchell, Jr., MD, Newport News 1984-85
- \*F. Elliott Oglesby, Sr., MD, Richmond 1985-86
- \*Alvin J. Ciccone, MD, Norfolk 1986-87
- \*Robert F. Baxter, MD, Grundy 1987-88
- J. Albert Hagy, MD, Roanoke 1988-89
- Harold W. Markham, MD, Virginia Beach 1989-90
- \*Leroy S. McDaniel, MD, Richmond 1990-91
- \*T. P. Davis, MD, Christiansburg 1991-92
- \*Charles H. Crowder, Jr. MD, South Hill 1992-93
- Stuart M. Solan, MD, Richmond 1993-94
- J. Michael Ponder, MD, Franklin 1994-95
- Roger A. Hofford, MD, Roanoke 1995-96
- Michelle Whitehurst-Cook, MD, Highland Springs 1996-97
- Mitchell B. Miller, MD, Virginia Beach 1997-98
- Larry G. Mitchell, MD, Richlands 1998-99
- David A. Ellington, MD, Lexington 1999-00
- J. Douglas Smith, MD, Harrisonburg 2000-01
- Joseph Leming, MD, Colonial Heights 2001-02
- Shane J. Kraus, MD, Glen Allen 2002-03

# **PAST PRESIDENTS OF THE VAFP**

Cynthia C. Romero, MD, Virginia Beach 2003-04

Dena R. Hall, MD, Suffolk 2004-05

Kurtis S. Elward, MD, MPH, Charlottesville 2005-06

Wayne J. Reynolds, DO, Gloucester Point 2006-07

Sterling N. Ransone, Jr, MD, Deltaville 2007-08

E. Mark Watts, MD, Vinton 2008-09

Janice E. Ragland, MD, Herndon 2009-10

Jesus L. Lizarzaburu, MD Grafton 2010-11

Kent E. Willyard, MD, Newport News 2011-12

Mark H. Greenawald, MD, Roanoke 2012-13

Sean Reed, MD, Charlottesville 2013-14

Robert I. Elliott, MD, Hurt 2014-15

Charles O. Frazier, MD, Williamsburg 2015-16

Lindsey D. Vaughn, MD, Suffolk 2016-17

Rupen S. Amin, MD, MBA, Chicago 2017-18

Delmas J. Bolin, MD, PhD, FACSM, Salem 2018-19

Emmeline C. Gasink, MD, Newport News 2019-20

Jerome A. Provenzano, MD, Newport News 2020-21

Neeta Goel, MD, Ashburn 2021-22

David S. Gregory, MD, FAAFP, Roanoke, 2022-23

Denée J. Moore, MD, FAAFP, Dinwiddie, 2023-24

Timothy Yu, MD, FAAFP, Clifton, 2024-25

Robin N. Anderson, MD, FAAFP, Virginia Beach, 2025-26

\* Deceased