



Commission on Women's Health

August 27, 2025, at 10:00 a.m.

General Assembly Building, House Committee Room C-206

<https://dls.virginia.gov/commissions/cwh.htm>

The Commission on Women's Health (the Commission) met for the first time in Richmond on August 27, 2025. Senator L. Louise Lucas was elected as chair¹ and Delegate Candi Mundon King was elected as vice-chair. The meeting began with opening remarks from the chair and the adoption of a virtual meeting policy, followed by presentations and discussion. Materials presented at the meeting are accessible through the [Commission's website](#). Video recording of the meeting is available [here](#).

Virtual Meeting Policy

Delegate Candi Mundon King

Delegate Mundon King provided an overview of the proposed virtual meeting policy for the Commission to adopt. She explained the options available to the Commission for remote participation during in-person meetings and all-virtual meetings. The policy encompasses all of the allowable provisions under the Virginia Freedom of Information Act (FOIA) as well as the House and Senate Rules for virtual voting. The Commission voted unanimously to adopt the policy.

Overview of HB 2617 (2025)

Sabrina Miller-Bryson, Senior Attorney, Division of Legislative Services

Ms. Miller-Bryson provided a brief overview of HB 2617 (Mundon King, 2025), which established the Commission as a permanent commission in the legislative branch for the purposes of studying and making recommendations on issues relating to women's health. The powers and duties of the Commission include: (i) studying and evaluating issues relating to women's health; (ii) examining the intersection of social determinants and their impact on women's health outcomes; (iii) conducting public hearings, facilitating stakeholder engagement, and consulting with subject-matter experts as necessary; (iv) identifying systemic barriers to equitable health care access for women and recommending policies to address these barriers; and (v) developing and making recommendations to the General Assembly for legislation, regulations, and budgetary changes or policies to improve women's health outcomes. The bill also directs the Commission to submit an executive summary regarding the work of the Commission and any recommendations to the General Assembly no later than December 1 of each year. The bill reported from each House and Senate Committee and passed both chambers

¹ **Members Present:** Senator L. Louise Lucas (chair), Delegate Candi Mundon King (vice-chair), Senator Lashrecse D. Aird, Senator Mamie E. Locke, Senator Russet W. Perry, Delegate Bonita G. Anthony, Delegate Kathy Tran, Delegate Shelly A. Simonds, Stacey Brayboy, Theresa Nicole Bremby, Denise Harris Proctor, MD, Natalie Shorter, Kenda Sutton-El,

Members Absent: Delegate Hillary Pugh Kent, Delegate Anne Ferrell H. Tata

unanimously during the 2025 Regular Session, was signed by the Governor on March 24, 2025, and went into effect on July 1, 2025.

Presentation: The Heart of The Matter: Advancing Women's Cardiovascular Health

Dr. Yvonne Commodore-Mensah, Professor and Associate Dean of Research, Johns Hopkins School of Nursing

Dr. Commodore-Mensah began her presentation by explaining information related to women's health and cardiovascular disease. Noting, that cardiovascular disease is the leading cause of death in women and that women are more likely to receive less aggressive forms of heart attack treatments. She continued by addressing hypertension and the disparities that exist in its prevalence between sex, age, and race. Dr. Commodore-Mensah then discussed implementing interventions to promote cardiovascular health beginning from early childhood and continuing through the postpartum and menopausal periods.

Dr. Commodore-Mensah continued the presentation by providing an overview of the Safe Heart Study that was created to research the social determinants of hypertension risk in women of reproductive age. The study has focused its recruitment on Black and Hispanic women and partnered with the American Heart Association Research Goes Red registry. The study has been working in two phases, the first of which focuses on health education and the second of which conducts physical health screenings. She then explained key findings from the study and how phase three will be conducted in the Northern Virginia region to engage postpartum women at risk of hypertension and also acknowledge psychological risk factors.

Dr. Commodore-Mensah concluded the presentation by explaining community-clinical pathways. Which provide a way to engage patients by first conducting community outreach and providing screenings and education. Then directing patients to health care centers for ongoing care and follow-ups.

Presentation: A Heartfelt Call: Prioritizing Women's Heart Health Today

Dr. Sharmaine M. McCoy, Nurse Practitioner, Women's Cardiovascular Health, Inova Schar Heart and Vascular, Inova Fairfax Medical Campus

Dr. McCoy began by explaining details of the Inova Cardio-Obstetrics program. Which provides comprehensive cardiovascular care for at-risk patients during and following pregnancy. She then explained the growing need for cardio obstetrics programs, and the impact they can have on maternal and fetal health outcomes, and she reinforced the importance of funding for maternal cardiovascular research and training.

Dr. McCoy then discussed the progress of the program's community outreach efforts. The collaboration includes a comprehensive selection of stakeholders, including faith-based organizations, Inova care clinics, community organizations, civic organizations, health departments, and the Inova Action Committees. Dr. McCoy also explained that in addition to the program's current outreach methods, they will be utilizing digital technology in ongoing efforts to create a patient portal to track outcomes.

Lastly, Dr. McCoy discussed a three-sector based approach for prioritizing women's heart health. She explained that healthcare organizations should integrate gender-specific cardiovascular care into routine practice, expand access to cardio-obstetrics and preventative cardiology services, and invest in provider training on atypical symptoms and risk factors in women. Faith-based and community-based organizations can partner with hospitals and clinics to host screenings and education events, mobilize volunteers to serve as Heart Health Ambassadors,



and support outreach to underserved and high-risk populations. She also proposed that policymakers may fund maternal cardiovascular health programs and research and encourage collaboration across sectors.

Work Plan

Delegate Mundon King proposed dividing work of the Commission into four topic areas: preventative care, life experiences, growing in grace, and technology. Subcommittees for subject areas will be assigned at a later date. The Commission voted unanimously to adopt this recommendation.

Public Comment

Members of the public were given a chance to speak regarding the information presented at the meeting.

For more information, see the [Commission's website](#) or contact the Division of Legislative Services staff:

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