

Department of Planning and Budget 2024 Session Fiscal Impact Statement

1. Bill Number: SB35

House of Origin X Introduced Substitute Engrossed
 Second House In Committee Substitute Enrolled

2. Patron: Locke

3. Committee: Education and Health

4. Title: Board of Medicine; Board of Nursing; continuing education; continuing competency; unconscious bias.

5. Summary: Directs the Board of Medicine and the Board of Nursing to require unconscious bias and cultural competency training as part of the continuing education and continuing competency requirements for renewal of licensure. The bill specifies requirements for the training and requires the Board of Medicine and Board of Nursing to report on the training to the Department of Health and the Neonatal Perinatal Collaborative.

6. Budget Amendment Necessary: Yes, item 285

7. Fiscal Impact Estimates: Indeterminate, preliminary. Identified costs do not represent the full expected impact of this legislation.

7a. Expenditure Impact:

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
2025	\$663,000	4	Nongeneral funds
2026	\$563,000	4	Nongeneral funds
2027	\$563,000	4	Nongeneral funds
2028	\$563,000	4	Nongeneral funds
2029	\$563,000	4	Nongeneral funds
2030	\$563,000	4	Nongeneral funds

8. Fiscal Implications: The bill places specific requirements on the Boards of Medicine and Nursing, including:

- Identify and designate organizations to provide training.
- update training based on ongoing research.
- study the impact of training on practitioners.
- develop a method of testing for effectiveness of the training.
- record the number of practitioners that complete the training, and,
- make recommendations on future training improvements.

There are currently nearly 320,000 practitioners licensed by the Boards of Nursing and Medicine that would be impacted by this legislation. Licensees under the Board of Nursing must renew licenses on an annual basis. This includes Registered Nurses, Advanced Practice Registered Nurses, and Licensed Nurse Practitioners, totaling 165,068 licensees using 2022 data. (It is assumed that Certified Nurses Aides, being certified and not licensed, are not subject to the requirements of this bill.) Physicians must renew licenses every two years. In 2022 there were 51,082 licensed physicians in Virginia. On average, this represents 190,609 renewed licenses per year between these two boards. Tracking, validating, and analyzing compliance with the requirements of this bill represent new responsibilities for each of these renewals.

Currently, the Boards of Nursing and Medicine rely on practitioner self-reporting of compliance with continuing education requirements. The bill would require not only compliance with training requirements but for the agency to assess the effectiveness of the training. As such, reliance on self-reporting would not be appropriate. The agency's data system would need to be modified to capture details related to the specific training each licensee has attended and to allow for some analysis of the effectiveness of such training. There is no cost estimate for these modifications. For illustrative purposes only, adding additional fields to the VaCMS system at Department of Social Services was estimated to cost \$100,000 in 2022.

Metrics would be necessary to determine the effectiveness of training programs. Neither of the Boards currently has a method to investigate the effectiveness of training nor analyze and report such information. The agency would need to identify and develop appropriate metrics and indicates that external expertise would likely be necessary to accomplish this. To the extent such external expertise is not available from academic or not-for-profit sources, a consultant may be needed to meet this requirement.

To meet the internal requirements of this legislation, the agency indicates that each board will need two new pay band 5 FTEs at a cost of \$140,750 (salary + benefits + other costs related to operation, training, supplies, travel) for each position, totaling \$563,000 for the agency for all four positions.

The bill also would require inclusion of data in the Virginia Department of Health's annual report, related to the number of successful completions of this training and recommendations for training improvement. It is assumed that any cost at Department of Health associated with this inclusion will be incidental.

9. Specific Agency or Political Subdivisions Affected: Department of Health Professions,
Virginia Department of Health

10. Technical Amendment Necessary:

11. Other Comments: