

Individual State Agency Fiscal Note

Bill Number: 5389 S SB AMH ENGR H1821.E	Title: Optometry	Agency: 303-Department of Health
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.4	0.2	0.3	0.1	0.0
Account					
Health Professions Account-State 02G-1	55,000	52,000	107,000	19,000	14,000
Total \$	55,000	52,000	107,000	19,000	14,000

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

- If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
- If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
- Capital budget impact, complete Part IV.
- Requires new rule making, complete Part V.

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Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

This amendment adds section 4 requiring the board (board of optometry) in coordination with the department of health (department) to collect, analyze, and report on the outcomes of the advanced procedures authorized in RCW 18.53.010. The fiscal impact has changed from the previous fiscal note on SB 5389 as a result of this addition.

Section 1: Amends RCW 18.53.010 (Definition – Scope of practice), expanding the definition of the practice of optometry to include limited ophthalmic surgical procedures and injections as authorized by the board through regulations. The bill adds drug prescribing and administering rights. The Board of Optometry (Board) must designate what postgraduate courses may be accepted in order to provide advanced ophthalmic procedures, and the Board must determine a date by which all licensed optometrists must meet the new education, training, and examination requirements to perform advanced procedures. The bill permits optometrists to purchase pharmaceuticals.

Section 3: Amends RCW 18.54.070 (Powers and duties – Examinations – Rules), expanding the Board’s powers and duties to include sole authority to determine what constitutes the practice of optometry within the confines of this chapter and chapter 18.53 RCW (Optometry).

Section 4: Requires the board in coordination with the department to collect, analyze, and report on the outcomes of the advanced procedures authorized in RCW 18.53.010.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

RCW 43.70.250 (License fees for professions, occupations, and businesses) requires the Department of Health (department) to charge a fee to generate sufficient revenue to fully support the costs of administering its optometrist licensing activities. The department does not anticipate the need to increase licensing fees to support the changes proposed in this bill. Depending on the impact of this and other new legislation, the programs current fee may not be sufficient and a fee increases may be required in the future. The department will monitor the program fund balance and adjust fees over a six (6) year period to ensure that fees are sufficient to cover all program expenditures.

As of July 1, 2022, the Optometry program has a sufficient fund balance to cover costs of implementing this bill.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

Rulemaking

Sections 1 and 3: This bill requires the Board to adopt rules to define authorized procedures, additional drug privileges and guidelines, and required education, training, and examination to ensure optometrists are qualified to practice under the expanded scope. The Board must also adopt rules to designate the date by which all licensees must meet the new education, training, and examination requirements. The Board anticipates utilizing a team of subject matter experts to implement this bill. This team will consist of the program manager and a community engagement specialist to identify underreached communities and engage them in the rulemaking process. Based on the department’s experience with expanding scope of practitioners and determining increased training, education and examination requirements, the Board anticipates rulemaking to be complex. Complex rulemaking will require a rules project coordinator to support subject matter experts and ensure timely completion of rulemaking. This rule package is extended to identify specific groups who have

previously had access barrier to engagement with the department as well as giving the Board the ability to expand community engagement and conduct additional workshops and listening sessions. This process will include six meetings with interested parties as well as one formal rules hearing, all held virtually, and will take approximately 18 months to complete. The Board anticipates providing the rules hearing announcement and materials in both English and Spanish and providing ASL and Spanish interpretation services at the rules hearing.

Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$9,000.

FY 2024 costs will be 0.4 FTE and \$55,000 (02G)

FY 2025 costs will be 0.2 FTE and \$30,000 (02G)

Reporting

Section 4: The Board, in coordination with the department will collect, analyze, and report on the outcomes of the advanced procedures authorized in RCW 18.53.010 which will include any complications to patients receiving advanced procedures and the report will be made available on the department's website by December 1, 2026. The Board assumes work will include pulling data, analyzing, formatting, interpreting, providing narrative, and uploading to the department's website. The Board assumes that half (850) of the 1,700 licensed optometrists will apply for the endorsement and that information will be collected using a survey system used by other programs in the department. The Board assumes that information will be collected during the licensee's renewal period but not be a requirement for prelicensure and while not required, the Board assumes it will continue to collect and report out on this information for a period of four years.

FY 2026 costs will be 0.1 FTE and \$12,000 (02G)

FY 2027 costs will be \$7,000 (02G)

FY 2028 costs will be \$7,000 (02G)

FY 2029 costs will be \$7,000 (02G)

Office of Customer Service (OCS)

Section 1: Each current optometrist licensee will be required to submit verification of meeting the new training, education, and examination requirements established by the Board for the expanded scope of practice. The Department assumes those optometrists who have met the requirements for practicing under the expanded scope will submit verification documents to the Department beginning in FY 2026, following the rulemaking to adopt the new requirements. Based on the implementation timeline for the last optometrist expanded scope, the Department assumes the Board will require all licensees to meet the new education, training, and education requirements, and submit verification documents to the Department, by FY 2030. This will require Credentialing staff time to receive and review education, training, and examination documentation from each of the current 1,795 optometrist licensees between FY 2026 and FY 2030. Additionally, minor updates will need to be made to the online and paper applications. These changes are minimal and will be accomplished by the department staff during their normal workload.

Health Technology Solutions (HTS)

Section 1 and 4: Configuration in department's Healthcare Enforcement and Licensing Modernization System will require 84 hours from the integration vendor at a rate of \$262.50 per hour. Work will include the initial vendor configuration of the endorsement and additional survey data collection at the time of renewal.

FY 2025 costs will be \$22,000 (02G).

Total costs to implement this bill:

FY 2024: 0.4 FTE and \$55,000 (02G)

FY 2025: 0.2 FTE and \$52,000 (02G)

FY 2026: 0.1 FTE and \$12,000 (02G)

FY 2027: \$7,000 (02G)

FY 2028: \$7,000 (02G)

FY 2029: \$7,000 (02G)

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
02G-1	Health Professions Account	State	55,000	52,000	107,000	19,000	14,000
Total \$			55,000	52,000	107,000	19,000	14,000

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.4	0.2	0.3	0.1	
A-Salaries and Wages	32,000	17,000	49,000	13,000	8,000
B-Employee Benefits	12,000	6,000	18,000	3,000	2,000
C-Professional Service Contracts		23,000	23,000		
E-Goods and Other Services	8,000	5,000	13,000	3,000	4,000
J-Capital Outlays	1,000		1,000		
T-Intra-Agency Reimbursements	2,000	1,000	3,000		
Total \$	55,000	52,000	107,000	19,000	14,000

III. C - Operating FTE Detail: *List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA*

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
EPIDEMIOLOGIST 2 (NON-MEDICAL)	98,592				0.1	
HEALTH SERVICES CONSULTANT 4	82,896	0.2	0.1	0.2		
MANAGEMENT ANALYST 4	82,896	0.2	0.1	0.2		
Total FTEs		0.4	0.2	0.3	0.1	0.0

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: *FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.*

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

Sections 1 and 3: The Board will adopt rules in 246-WAC as necessary to implement this bill.