

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 0690H.05C
Bill No.: HCS for SS for SCS for SB 70
Subject: Professional Registration and Licensing; Counseling; Health Care Professionals;
Health Care; Physicians; Nurses; Social Workers; Physical Therapists
Type: Original
Date: Date

Bill Summary: This proposal modifies provisions relating to professions requiring licensure.

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2024	FY 2025	FY 2026
General Revenue Fund*	(Could exceed \$58,995)	(Could exceed \$35,831)	(Could exceed \$37,766)
Total Estimated Net Effect on General Revenue	(Could exceed \$58,995)	(Could exceed \$35,831)	(Could exceed \$37,766)

*The Health Professional Loan Incentive Program (§191.430 – §191.450) is subject to appropriation (therefore reflected as “\$0 or”) by the General Assembly. Along with the loss of revenue on forgiven loans, unknown costs for the program are assumed to exceed \$250,000 annually.

ESTIMATED NET EFFECT ON OTHER STATE FUNDS			
FUND AFFECTED	FY 2024	FY 2025	FY 2026
Board of Registration for the Healing Arts	\$0 or (Could be less than \$257,062)	\$0 or (Could be less than \$264,160)	\$0 or (Could be less than \$265,693)
Social Workers Fund	\$0 or (Unknown)	\$0 or (Unknown)	\$0 or (Unknown)
Health Professional Loan Incentive Fund*	\$0	\$0	\$0
Nurse Loan Fund	(\$66,000)	(\$1,300,000)	(\$66,000)
Board of Nursing Fund	\$56,120	\$1,211,515	\$57,465
Colleges and Universities	\$0 to Unknown	\$0 to Unknown	\$0 to Unknown
Committee of Professional Counselors Fund (0672)	\$0 or (\$3,000 - \$6,000)	\$0 or (\$3,000 - \$6,000)	\$0 or (\$3,000 - \$6,000)
Total Estimated Net Effect on <u>Other</u> State Funds	(\$9,880) to (Could exceed \$272,942)	(\$88,485) to (Could exceed \$358,645)	(\$8,535) to (Could exceed \$280,228)

Numbers within parentheses: () indicate costs or losses.

*Income/appropriations and costs of loans distributed net to \$0

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2024	FY 2025	FY 2026
Federal Funds*			
Total Estimated Net Effect on <u>All</u> Federal Funds	\$0	\$0	\$0

*Revenues and Expenses Net to Zero.

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)			
FUND AFFECTED	FY 2024	FY 2025	FY 2026
Board of Registration for the Healing Arts	Up to 3 FTE	Up to 3 FTE	Up to 3 FTE
Total Estimated Net Effect on FTE	Up to 3 FTE	Up to 3 FTE	Up to 3 FTE

- Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.
- Estimated Net Effect (savings or increased revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.

ESTIMATED NET EFFECT ON LOCAL FUNDS			
FUND AFFECTED	FY 2024	FY 2025	FY 2026
Local Government	\$0	\$0	\$0

FISCAL ANALYSIS

ASSUMPTION

§§191.430 - 191.831& 335.203 - 335.205 – Health professional loan repayment program

In response to a similar proposal from this year, (Perfected HB 542), officials from the **Department of Health and Senior Services (DHSS)** stated the proposed legislation was written in conjunction with a New Decision Item that would be necessary for successful implementation of the legislative changes. This proposed legislation will require General Revenue (GR) to run the Health Professional Loan Repayment Program, including funds for loan awards, based off regular appropriation process.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect fiscal impact as provided by DHSS.

DHSS stated in its FY2024 Budget Preview that it will transition fully to a loan repayment program funding professionals and practitioners with educational debt for the purpose of paying all or a portion of their existing educational loans.

The Primary Care Resource Initiative of Missouri (PRIMO) program addresses the needs of areas with a shortage of health professionals by assisting in the development and expansion of community-based health systems that provide medical, dental, and behavioral health services. In addition, the PRIMO program provides forgivable student loans to health care professional students who agree to work within shortage areas.

The Missouri Professional and Practical Nursing Student Loan (NSL) and Loan Repayment Program (LRP) provides forgivable student loans to nursing students in exchange for service in designated underserved communities and/or facilities that are experiencing nursing shortages upon completion of training. The program also provides loan repayment to practicing nurses in exchange for service in communities and/or facilities that are experiencing nursing shortages.

The Health Professional Loan and Health Professional Student Loan Repayment Program provides educational loan repayment to practicing primary care medical and dental health professionals in exchange for service in areas with a shortage of primary care medical and dental professionals.

FY 2024 Governor’s Recommended Program funding for PRIMO, NSL and Loan Repayment Programs:

GR	\$700,000
Fed	\$425,000
Other	<u>\$2,256,790</u>
Total	\$3,381,790

FY 2020 Actual appropriations	\$3,131,542
FY 2021 Actual appropriation	\$3,310,292
FY 2022 Actual appropriations	\$3,060,540
FY 2023 Actual appropriations	\$3,181,790

Oversight notes that forgiveness of student loans includes the forgiveness of any accrued interest associated with those loans while the health professional meets the service obligations determined by DHSS.

Oversight assumes appropriations to the Health Professional Loan Repayment Program and loans/expenses incurred by the program will net to \$0.

In response to a similar proposal from this year, (Perfected HB 542), officials from the **Department of Revenue (DOR)** stated this proposal will create a Health Professional Loan Repayment Program that would provide certain taxpayers a loan. The loans are to be used to pay off a qualified taxpayer's student loan debt. The loans offered under this program are eligible for forgiveness if certain criteria are met.

The Department of Health and Senior Services is the administrator of this program and has the authority to set criteria for receipt of the loans.

It should be noted that under current federal law IRC Section 108(f)(1)-(2), income from the discharge/forgiveness of a student loan from December 31, 2020 to January 1, 2026 is not taxable. However, after January 1, 2026, such income may potentially be taxable. At this time, DOR cannot determine how many students may receive these loans, how much of these loans will be distributed, or if any of the loans received will be discharged/forgiven or when and, therefore, the DOR is unable to determine an impact from this portion of the proposal. Any loss would be unknown and would be considered foregone revenue.

This does not have an administrative impact on DOR.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect no fiscal impact for this agency.

Officials from the **University of Central Missouri (UCM)** state this proposal would have an indeterminate fiscal impact on UCM.

Oversight notes, in response to the previous version of this proposal, UCM indicated the proposal could potentially increase revenue if it leads to increased enrollment. Therefore, Oversight will reflect a \$0 to Unknown increase in revenues for Colleges and Universities for fiscal note purposes.

In response to a similar proposal from this year, (Perfected HB 542), officials from the **University of Missouri Health Care System** stated they had reviewed the proposed legislation and has determined that as written it should not create expenses in excess of \$100,000.

Oversight does not have any information to the contrary. Oversight assumes less than \$100,000 in expenses to the University of Missouri Health Care is an amount that can be absorbed within current funding levels and is not significant. Therefore, Oversight will reflect no fiscal impact for the University of Missouri Health Care System.

In response to a similar proposal from this year, (Perfected HB 542), officials from the **Office of Administration, St. Charles Community College** and the **Office of the State Courts Administrator** each assumed the proposal would have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

In response to a similar proposal from this year, (Perfected HB 542), officials from the **Office of Administration - Budget and Planning** deferred to the Department of Health and Senior Services for response relating to the fiscal impact of this proposal on their organization.

Oversight notes a standard monthly payment (at current rates) for \$100,000 in student loans would be approximately \$1,150, or \$13,800 annually. To reach the \$250,000 annual threshold, the program would only have to include 19 participants (19 x \$13,800 = \$262,200). Oversight assumes the \$250,000 threshold, subject to appropriation, could be met in any given year.

§§335.203 - 335.257 – Nursing Education

§335.203.2

Officials from the **Department of Health and Senior Services (DHSS)** assume §335.203.2, of the proposed legislation, proposes the removal of the \$150,000 grant limit for those awarded under the Nursing Education Incentive Program.

Oversight assumes removal of the \$150,000 grant limit for those awarded the Nursing Education Incentive Program in this subsection will have no fiscal impact on state or local government.

Oversight notes the Department of Commerce and Insurance (DCI) budget request included the following information: *The Nursing Education Incentive Program (NEIP) was established in 2011 through legislative action and appropriation of State Board of Nursing (Board) funds to increase the number of nursing graduates by expanding the physical and educational capacity of professional nursing programs in Missouri. This grant program is supported by nurse licensure fees and represents continued action by the Board to support nursing education. The board currently has the authority to award up to \$2,000,000 each fiscal year for the NEIP Program. This new decision item would allow the Board to award up to \$3,000,000 each fiscal year in*

NEIP funding. Oversight notes the DCI asked for a \$1,000,000 new decision item from the State Board of Nursing Fund (0635).

§335.205

DHSS also notes §335.205, of proposed legislation, proposes the collection of a nursing education incentive program surcharge in addition to the nurse licensure fees for any initial nurse license and license renewal application to be deposited into the state board of nursing fund.

Officials from the **Department of Commerce and Insurance (DCI)** state that the board projects a 2% increase in licensees each year.

DCI assumes the surcharge only applies to applicants for a license by endorsement. (Those numbers could decrease as more states join the nursing compact. Nurses will not need a Missouri license because they are able to practice in Missouri on the license from the other state.)

DCI assumes the following:

FY 2024

LPN – Renewal Surcharge - \$45,668
LPN – Initial License Surcharge \$252
RN – Renewal Surcharge - \$0
RN – Initial Licensure Surcharge - \$10,200
Total - \$56,120

FY 2025

LPN – Renewal Surcharge - \$0
LPN – Initial License Surcharge \$260
RN – Renewal Surcharge - \$1,200,850
RN – Initial Licensure Surcharge - \$10,405
Total - \$1,211,515

FY 2026

LPN – Renewal Surcharge - \$46,582
LPN – Initial License Surcharge \$268
RN – Renewal Surcharge - \$0
RN – Initial Licensure Surcharge - \$10,615
Total - \$57,465

DCI Notes:

RNs are currently in renewal so the 120,085 number could decrease for multiple reasons:

- Licensees that retire and do not renew their license.
- Not having to renew due to the added nurse licensure compact states.
- This is the first renewal period since Kansas joined the nursing compact. The board does not know how many RNs that are Kansas residents that will not renew their Missouri license because they do not have to.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect the revenues as estimated by the DCI to the Board of Nursing Fund (0635).

§335.212 - 353.242 (Removal)

DHSS also assumes HB 542, as amended proposes the removal of §§335.212 through 335.242 which would eliminate the Nursing Student Loan Program and §§335.245 through 335.257, which would eliminate the Nursing Student Loan Repayment Program.

Additionally, eliminating §§335.212 through 335.257 would eliminate the established Professional and Practical Nursing Student Loan and Nurse Loan Repayment Fund which is also used to collect repayment and fees on any defaulted contracts. This section also gives the authority to the DHSS to institute any action to recover any amount due. Therefore, **the Department may lose the authority to collect on bad debt** from nurses who defaulted on their loans.

Currently, the educational surcharge collected on nurse licensure and licensure renewal applications is expended on administering the Nurse Student Loan (NSL) program and Nurse Loan Repayment Program (NLRP). This fee is based on either the Registered Nurse (RN) or Licensed Practical Nurse (LPN) and the year; the program receives \$5 for each RN license during odd numbered years and then \$1 from each LPN license during even numbered years. The removal of these sections results in a loss of revenue that is utilized for the NSL program and NLRP. If these funds are not received by DHSS, this would result in a loss of approximately \$1,300,000 on odd numbered years and \$66,000 on even numbered years.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect the estimated loss provided by DHSS to the Nurse Loan Fund.

§§334.043 & 334.1600 -334.1720– Interstate Medical Licensure Compact

Officials from the **Department of Commerce and Insurance (DCI)** state that this legislative language establishes Missouri as a member of the Interstate Medical Licensure Compact.

DCI assumes the following:

Licensee/Revenue

225	State of principal licensure applications (Board Estimate)
\$75	License Fee
\$100	Renewal Fee
175	Applications for letters of qualification (Board Estimate)
\$300	(\$300 of the \$700 fee paid to the Compact for letters of qualification)

- In the current language of this proposed legislation, Professional Registration assumes 225 State of principal licensure applicants and 175 applications for letter of qualification.

- Projected revenue reflects fees collected for all categories of licensure
- A 3% growth rate has been estimated.
- It is estimated that the collection of license fees will begin in FY 2025
- Under some compacts, the compact keeps a percentage of the license fee. For instance, under the PT Compact the licensee pays \$25 for a license. The board receives \$19 and the Compact retains \$6. At this time, DCI does not know what percentage, if any, the Medical Compact will keep.
- Board licensure fees will have to be increased to cover the costs of the Compact.

In summary, DCI assumes a revenue of \$69,375 (225 applicants x \$75 fee + 175 applicants for letters of qualification x \$300 onetime fee) in FY 2025 and \$2,025 in FY 2026 to the Board of Registration for the Healing Arts Fund (0634) as a result of the changes in this proposal.

The following board-specific expenses are being calculated to determine the additional appropriation needed by the division to support the board and to assist in calculating the anticipated license and renewal fees.

Staffing

- 1 Legal Counsel (\$70,000/annually) needed to assist with implementation of the program by assisting with any rules that are deemed necessary, responding to legal questions pertaining to the qualifications for licensure, compact and investigations. Prepare documents for disqualified applicants who appeal the Board's decision and serve as legal advisors to the Board and its staff.
- 1 Customer Service Representative (\$35,000/annually) needed to provide technical support, process applications for licensure, and respond to inquiries related to the licensure law and/or rules and regulations.
- 1 Non Commissioned Investigator (\$38,000/annually) needed to conduct investigations and inspections, serve notices, and gather information required by the board.

Complaints and Investigations

It is estimated the board will receive approximately 7 complaints. The division does not anticipate receiving any complaints until FY 2025. It is estimated 30% of the complaints filed will require field investigations with 50% requiring overnight travel. One car is needed to conduct investigations and will need to be eventually replaced based upon usage. Therefore, the vehicle cost is considered an ongoing expense and appropriation need.

Interstate Commission Annual Fee

The commission may charge participating boards an assessment if the projected revenue shortfall is greater than 50% of the reserve fund at the time the budget is adopted. This amount is unknown.

In summary, DCI assumes a cost of \$257,062 in FY 2024, \$264,160 in FY 2025 and \$265,693 in FY 2026 to provide for the implementation of the changes in this proposal.

Oversight assumes DCI is provided with core funding to handle a certain amount of activity each year. Oversight assumes DCI could absorb some of the FTE costs related to this proposal. Therefore, Oversight will reflect the cost and the FTE as “up to” the estimate provided by DCI to the Professional Registration Fee Fund (0689).

Oversight will also reflect a possibility that not enough other states will join the Compact, therefore, Oversight will reflect a \$0 impact to Missouri until that threshold is reached.

Oversight notes that the balance in the Board of Registration for the Healing Arts Fund (0634) was \$8,663,267 as of December 2022.

Oversight notes the fiscal impact of this legislation differs from years past due to updated estimates. The Board of Healing Arts does not currently have a \$300 licensing fee, so it was updated to a \$75.00 License Fee and \$100.00 Renewal fee.

§§334.100 - 334.613 – Physical Therapist Scope of Practice

Officials from the **Department of Social Services (DSS)** assume this legislation revises Chapter 334, RSMo, by adding three sections that would allow physical therapists to treat patients without a prescription or referral from an approved health care provider. Since this legislation revises Chapter 334, RSMo, and since there is no specific exemption for physical therapists that contract with the Health Maintenance Organizations (HMOs) that contract with the state to provide health benefits to MO HealthNet managed Care members, it is assumed this will apply to them.

The HMOs that contract with the state have current policies and procedures that outline treatment guidelines for members for physical therapy services. This legislation revises current language to remove the requirement for a prescription or referral from an approved healthcare provider provided the physical therapist has a doctorate of physical therapy degree or has five years of clinical practice as a physical therapist. In addition, this legislation revises language that states consultation with an approved health care provider is not required if the course of physical therapy services or treatment is completed within ten visits or twenty-one business days. Providers enrolled with MO HealthNet must be licensed by the state in which they practice. In order to receive reimbursement for services provided to a MO HealthNet participant, providers must be enrolled with the state as a MO HealthNet provider. Physical therapy services must be prescribed by a primary care provider and is only a covered benefit for children. Additionally, any service included in the Individualized Education Program (IEP) developed through the public school is covered through Fee-For-Service.

Medicaid's requirement for medical necessity of physical therapy services would be impacted if the need for prescription and referral by a primary care provider (or specialist) were removed. By removing this connection to the primary care/specialist provider, utilization for these services will inevitably increase over time due to provider induced demand, potential for over treatment (due to lack of utilization controls), and difficulty in enforcement. In addition, utilization increases may be expected based on the use of in-office ancillary. Without the need for a script or other utilization control, utilization increases may be anticipated as clinicians have the ability to bill up to ten visits before they must seek further consult, and without an enforcement process, it is assumed this type of behavior will increase.

It is assumed that the Managed Care capitation rates would increase at least \$100,000 based on this legislation. For FY25 and FY26, a 5.4% medical inflation rate was used. They estimate the actuarial cost to evaluate this program change to the Managed Care capitation rates to be no more than \$50,000.

FY24: Total - \$150,000 (GR - \$58,995; Federal - \$91,005)
FY25: Total - \$105,400 (GR - \$35,831; Federal - \$69,569)
FY26: Total - \$111,092 (GR - \$37,766; Federal - \$73,326)

Oversight will reflect the cost as estimated by DSS.

§§337.510 - 337.550 - Counseling Interstate Compact

Oversight assumes this legislation enacts the Counseling Interstate Compact.

Officials from the **Department of Commerce and Insurance (DCI)** state it is uncertain if the compact would be enacted in FY24, FY25 or FY26. Once the compact is enacted the Division would have the following fiscal impact: \$3,000 to \$6,000 estimated annual fees to participate in the compact.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect the estimated fiscal impact as a range of \$0 (the compact is not enacted) to \$3,000 - \$6,000 (the compact is enacted) to the Committee of Professional Counselors Fund (0672).

§§337.615 - 337.1075 - Social Work Licensure Compact

Officials from the **Department of Commerce and Insurance** state it is uncertain if the compact would be enacted in FY2024, FY2025 or FY2026. Once the compact is enacted, the Committee for Social Workers would be required to pay fees charged to member states including an annual assessment to cover costs of operations and activities of the compact commission. Costs are unknown at this time.

Since the compact will only be effective once seven states have enacted legislation to join the compact, **Oversight** will reflect a \$0 (the compact is not enacted) to an unknown cost less than \$250,000 to the Social Worker Fund (0574).

Officials from the **Attorney General’s Office**, the **Department of Mental Health**, the **Department of Public Safety - Missouri Highway Patrol**, the **Missouri Department of Transportation**, the **Missouri Consolidated Health Care Plan** and the **Missouri Office of Prosecution Services** each assume the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

<u>FISCAL IMPACT – State Government</u>	FY 2024 (10 Mo.)	FY 2025	FY 2026
GENERAL REVENUE			
<u>Transfer to – Health Professional Loan Incentive Fund – appropriations</u> (\$191.430) p.3-4	\$0 to (Unknown)	\$0 to (Unknown)	\$0 to (Unknown)
<u>Cost – DSS</u> (§§334.100 - 334.613) p.10-11			
Increase in Managed Care Capitation Rates (state portion)	(\$33,995)	(\$35,831)	(\$37,766)
Actuarial Study (state portion)	(\$25,000)	\$0	\$0
ESTIMATED NET EFFECT TO THE GENERAL REVENUE FUND	<u>(Could exceed \$58,995)</u>	<u>(Could exceed \$35,831)</u>	<u>(Could exceed \$37,766)</u>
FEDERAL FUNDS			
<u>Revenue - DSS</u> (§§334.100 - 334.613) p.10-11			
Increase in Managed Care Capitation Rates	\$66,005	\$69,569	\$73,326
Actuarial Study	\$25,000	\$0	\$0
<u>Cost - DSS</u> (§§334.100-334.613) p.10-11			
Increase in Managed Care Capitation Rates (federal portion)	(\$66,005)	(\$69,569)	(\$73,326)
Actuarial Study (federal portion)	(\$25,000)	\$0	\$0
ESTIMATED NET EFFECT TO FEDERAL FUNDS	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

BOARD OF REGISTRATION FOR THE HEALING ARTS FUND (0634)			
<u>Revenue</u> – DCI §§334.1600 -334.1720 P.8-10 interstate medical licensure compact	\$0	\$0 or \$69,375	\$0 or \$2,025
<u>Cost</u> – DCI – §§334.1600 -334.1720 P.8-10	\$0 or	\$0 or....	\$0 or.....
Personal Service	(Up to \$119,167)	(Up to \$145,860)	(Up to \$148,777)
Fringe Benefits	(Up to \$83,545)	(Up to \$101,324)	(Up to \$102,416)
Equipment and Expense	(Up to \$42,500)	\$0	\$0
Other Fund Cost	(Up to \$11,850)	(Up to \$16,976)	(Up to \$14,500)
<u>Total Cost</u> – DCI	Up to (\$257,062)	(Up to \$264,160)	(Up to \$265,693)
FTE Change – DCI	Up to 3 FTE	Up to 9 FTE	Up to 9 FTE
ESTIMATED NET EFFECT ON BOARD OF REGISTRATION FOR THE HEALING ARTS FUND (0634)	<u>\$0 or (Could be less than \$257,062)</u>	<u>\$0 or (Could be less than \$264,160)</u>	<u>\$0 or (Could be less than \$265,693)</u>
Estimated Net FTE Change to the Board of Registration for the Healing Arts Fund (0634)	Up to 3 FTE	Up to 3 FTE	Up to 3 FTE
SOCIAL WORKER FUND (0574)			
<u>Cost</u> – DCI (§§337.615 - 337.1075) p.11 Compact Cost	\$0 or (Unknown)	\$0 or (Unknown)	\$0 or (Unknown)
ESTIMATED NET EFFECT TO THE SOCIAL WORKER FUND (0574)	<u>\$0 or (Unknown)</u>	<u>\$0 or (Unknown)</u>	<u>\$0 or (Unknown)</u>
HEALTH PROFESSIONAL LOAN INCENTIVE FUND			

<u>Transfer in</u> – from General Revenue – appropriations (§191.430) p.3-4	\$0 to Unknown	\$0 to Unknown	\$0 to Unknown
<u>Income</u> – DHSS (§§191.430 – 191.831) – Loan repayments/penalties for breach of contract p.3-5	\$0 to Unknown	\$0 to Unknown	\$0 to Unknown
<u>Costs</u> – DHSS – Loans to health professionals (§§191.430 - 191.831) p.3-5	\$0 to (Unknown)	\$0 to (Unknown)	\$0 to (Unknown)
ESTIMATED NET EFFECT ON THE HEALTH PROFESSIONAL LOAN INCENTIVE FUND*	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
*Income/appropriations and costs of loans distributed net to \$0			
NURSE LOAN FUND			
<u>Loss</u> – DHSS (§335.212 - 353.242) Loss of educational surcharge collection p.8	<u>(\$66,000)</u>	<u>(\$1,300,000)</u>	<u>(\$66,000)</u>
ESIMATED NET EFFECT ON THE NURSE LOAN FUND	<u>(\$66,000)</u>	<u>(\$1,300,000)</u>	<u>(\$66,000)</u>
BOARD OF NURSING FUND (0635)			
<u>Revenue</u> – DCI (§335.205) Nursing Education Incentive Program Surcharge p.7	<u>\$56,120</u>	<u>\$1,211,515</u>	<u>\$57,465</u>
ESTIMATED NET EFFECT TO THE BOARD OF NURSING FUND	<u>\$56,120</u>	<u>\$1,211,515</u>	<u>\$57,465</u>

COLLEGES AND UNIVERSITIES			
<u>Income</u> – Colleges & Universities – increase in tuition and fees (§§191.430 - 191.831) p.4-5	<u>\$0 to Unknown</u>	<u>\$0 to Unknown</u>	<u>\$0 to Unknown</u>
ESTIMATED NET EFFECT ON COLLEGES AND UNIVERSITIES	<u>\$0 to Unknown</u>	<u>\$0 to Unknown</u>	<u>\$0 to Unknown</u>
COMMITTEE OF PROFESSIONAL COUNSELORS FUND (0672)			
<u>Cost</u> – DCI §§337.510 - 337.550 (p.11) Counseling Interstate Compact fees	<u>\$0 or (\$3,000-\$6,000)</u>	<u>\$0 or (\$3,000-\$6,000)</u>	<u>\$0 or (\$3,000-\$6,000)</u>
ESTIMATED NET EFFECT TO THE COMMITTEE OF PROFESSIONAL COUNSELORS FUND (0672)	<u>\$0 or (\$3,000-\$6,000)</u>	<u>\$0 or (\$3,000-\$6,000)</u>	<u>\$0 or (\$3,000-\$6,000)</u>
<u>FISCAL IMPACT – Local Government</u>	FY 2024 (10 Mo.)	FY 2025	FY 2026
	\$0	\$0	\$0

FISCAL IMPACT – Small Business

Licensed Professional Counselors, health care providers and businesses who employ with physicians with an expedited license could have a direct fiscal impact as a result of this proposal.

FISCAL DESCRIPTION

This proposal modifies provisions relating to professions requiring licensure.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Attorney General's Office
Department of Commerce and Insurance
Department of Health and Senior Services
Department of Mental Health
Department of Public Safety
 Missouri Highway Patrol
Department of Social Services
Missouri Department of Transportation
Office of Administration - Budget and Planning
Department of Revenue
Missouri Department of Conservation
Office of Administration
Office of the Secretary of State
Joint Committee on Administrative Rules
Missouri Consolidated Health Care Plan
Missouri Office of Prosecution Services
St. Charles Committee College
University of Central Missouri
University of Missouri Health Care System

DIRSIGNATURE
Julie Morff
Director
Date

ASTDIRSIGNATURE
Ross Strobe
Assistant Director
Date