COMMITTEE ON LEGISLATIVE RESEARCH OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 3517S.01I Bill No.: SB 809

Subject: Contracts and Contractors; Health Care; Health Care Professionals; Medical

Procedures and Personnel; Nurses; Physicians; Professional Registration and

Licensing

Type: Original

Date: January 15, 2024

Bill Summary: This proposal modifies provisions relating to advanced practice registered

nurses.

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND				
FUND AFFECTED	FY 2025	FY 2026	FY 2027	
General Revenue	(\$28,350)	\$0	\$0	
Total Estimated Net				
Effect on General				
Revenue	(\$28,350)	\$0	\$0	

ESTIMATED NET EFFECT ON OTHER STATE FUNDS					
FUND AFFECTED	FY 2025	FY 2026	FY 2027		
Total Estimated Net					
Effect on Other State					
Funds	\$0	\$0	\$0		

Numbers within parentheses: () indicate costs or losses.

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ESTIMATED NET EFFECT ON FEDERAL FUNDS					
FUND AFFECTED	FY 2025	FY 2026	FY 2027		
Total Estimated Net					
Effect on <u>All</u> Federal					
Funds	\$0	\$0	\$0		

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)					
FUND AFFECTED	FY 2025	FY 2026	FY 2027		
Total Estimated Net					
Effect on FTE	0	0	0		

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 Eff	fect (savings or increase	ed revenues) expected to	exceed \$250,000 in any of
the three fiscal ye	ars after implementation	n of the act or at full im	plementation of the act.

ESTIMATED NET EFFECT ON LOCAL FUNDS				
FUND AFFECTED	FY 2025	FY 2026	FY 2027	
Local Government	\$0	\$0	\$0	

FISCAL ANALYSIS

ASSUMPTION

Section 334.104.13 – Advance Practice Registered Nurses

Officials from the **Department of Health and Senior Services (DHSS)** state this proposal allows advanced practice registered nurses who have been in a collaborative practice arrangement for a cumulative 2,000-documented hours with a collaborating physician and whose license is in good standing to be exempt from entering into or remaining in a collaborative arrangement in order to practice in the state.

Currently, when an advanced practice registered nurse applies for certification through the Bureau of Narcotics and Dangerous Drugs (BNDD), they are required to submit the name and license number of their collaborating physician. The system will not issue without that data completed. BNDD will need to have ITSD amend the current database to allow nurse practitioners to be "exempted" and not be required to complete that information. The estimated cost is \$28,350.

IT Consultants – one-time costs in FY 2028

- Requirements Gathering = 25 hours at a rate of \$105 = \$2,625
- Analysis = 20 hours at a rate of \$105 = \$2,100
- Design = 40 hours at a rate of \$105 = \$4,200
- Development = 125 hours at a rate of 105 = 13,125
- Test = 20 hours at a rate of \$105 = \$2,100
- Implementation = 20 hours at a rate of \$105 = \$2,100
- Project Management = 20 hours at a rate of 105 = 2,100
- On-going Support = None required
- Section Total IT Consultants = 270 hours at a rate of \$105 = \$28,350

Total General Revenue Expenditures \$28,350

Oversight does not have any information to the contrary. Therefore, Oversight will reflect the estimated ITSD provided by DHSS to the General Revenue Fund in the fiscal note.

Officials from the **Department of Commerce and Insurance** and the **Department of Social 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.

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Rule Promulgation

Officials from the **Joint Committee on Administrative Rules** assume this proposal is not anticipated to cause a fiscal impact beyond its current appropriation.

Officials from the **Office of the Secretary of State (SOS)** note many bills considered by the General Assembly include provisions allowing or requiring agencies to submit rules and regulations to implement the act. The SOS is provided with core funding to handle a certain amount of normal activity resulting from each year's legislative session. The fiscal impact for this fiscal note to the SOS for Administrative Rules is less than \$5,000. The SOS recognizes that this is a small amount and does not expect that additional funding would be required to meet these costs. However, the SOS also recognizes that many such bills may be passed by the General Assembly in a given year and that collectively the costs may be in excess of what the office can sustain with its core budget. Therefore, the SOS reserves the right to request funding for the cost of supporting administrative rules requirements should the need arise based on a review of the finally approved bills signed by the governor.

FISCAL IMPACT – State Government	FY 2025	FY 2026	FY 2027
	(10 Mo.)		
GENERAL REVENUE FUND			
Cost – DHSS/ITSD	(\$28,350)	\$0	\$0
Amending current database			
ESTIMATED NET EFFECT TO			
THE GENERAL REVENUE FUND	<u>(\$28,350)</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT – Local Government	FY 2025	FY 2026	FY 2027
	(10 Mo.)		
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT – Small Business

Certain small medical businesses could be impacted by this proposal.

FISCAL DESCRIPTION

This act modifies provisions relating to the practice of advanced practice nursing. Under current law, collaborative practice arrangements between physicians and registered professional nurses may delegate to an advanced practice registered nurses ("APRNs") the authority to administer,

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dispense, or prescribe certain controlled substances. This act provides that the section of law providing for such agreements shall not apply to APRNs, excluding certified registered nurse anesthetists ("CRNAs"), who have been in a collaborative practice arrangement for a cumulative of 2000 documented hours with a collaborating physician and whose license is in good standing. APRNs applying for licensure by endorsement may demonstrate to the Missouri State Board of Nursing completion of such hours. Additionally, any such APRN shall not be required to enter into or remain in such arrangement to practice in this state.

This act further modifies the definition of "practice of advanced practice nursing" by providing that in addition to the practice of professional nursing and within the advanced practice registered nurse role and population focus, the term shall include certain actions and measures. This act also provides that an APRN's prescriptive authority shall include authority to prescribe, dispense, and administer controlled substances as provided in current law. Furthermore, the provision on prescriptive authority shall also apply to good-standing APRNs who have been in collaborative practice arrangements for a cumulative of 2,000 documented hours with collaborating physicians and who are no longer required to hold collaborative practice arrangements.

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

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Department of Commerce and Insurance Department of Health and Senior Services Department of Social Services Office of the Secretary of State Joint Committee on Administrative Rules

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Ross Strope Assistant Director January 15, 2024