

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 0557S.01I
Bill No.: SB 144
Subject: Contracts and Contractors; Health Care; Health Care Professionals; Medical
Procedures and Personnel; Nurses; Physicians; Professional Registration and
Licensing
Type: Original
Date: February 23, 2025

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

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2026	FY 2027	FY 2028
General Revenue	(\$34,020)	(\$6,974)	(\$7,148)
Total Estimated Net Effect on General Revenue	(\$34,020)	(\$6,974)	(\$7,148)

ESTIMATED NET EFFECT ON OTHER STATE FUNDS			
FUND AFFECTED	FY 2026	FY 2027	FY 2028
Total Estimated Net Effect on <u>Other</u> State Funds	\$0	\$0	\$0

Numbers within parentheses: () indicate costs or losses.

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2026	FY 2027	FY 2028
Total Estimated Net Effect on <u>All</u> Federal Funds	\$0	\$0	\$0

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)			
FUND AFFECTED	FY 2026	FY 2027	FY 2028
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 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 2026	FY 2027	FY 2028
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

ITSD states that the proposed legislation will require a database update to allow nurse practitioners to "exempt out" on providing their supervisor's name, as a result of the proposed legislation. ITSD will need to expand the Missouri Healthcare Workforce Registry and Exchange (MoHWoRx) application to add the Advanced Practice Registered Nurses as being able to dispense certain drugs. It is assumed that every new information technology project/system will be bid out because all ITSD resources are at full capacity.

The estimated cost for development, project management and consultants is \$34,020 in FY 2026 with ongoing cost of \$6,974 in FY 2027 and \$7,148 in FY 2028.

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.

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.

<u>FISCAL IMPACT – State Government</u>	FY 2026 (10 Mo.)	FY 2027	FY 2028
GENERAL REVENUE FUND			
<u>Cost – DHSS/ITSD §334.104.13</u> Amending current database	<u>(\$34,020)</u>	<u>(\$6,974)</u>	<u>(\$7,148)</u>
ESTIMATED NET EFFECT TO THE GENERAL REVENUE FUND	<u>(\$34,020)</u>	<u>(\$6,974)</u>	<u>(\$7,148)</u>

<u>FISCAL IMPACT – Local Government</u>	FY 2026 (10 Mo.)	FY 2027	FY 2028
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT – Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

FISCAL DESCRIPTION

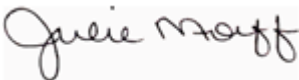
This act modifies provisions relating to the practice of advanced practice nursing. Under current law, collaborative practice arrangements between physicians and registered professional nurses may delegate to an advanced practice registered nurses ("APRNs") the authority to administer, dispense, or prescribe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

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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Director
February 23, 2025



Jessica Harris
Assistant Director
February 23, 2025