

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. No.: 4987S.01I  
Bill No.: SB 1016  
Subject: Contracts and Contractors; Health Care; Health Care Professionals; Medical  
Procedures and Personnel; Nurses; Physicians; Professional Registration and  
Licensing  
Type: Original  
Date: January 21, 2026

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

**FISCAL SUMMARY**

**ESTIMATED NET EFFECT ON GENERAL REVENUE FUND**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
General Revenue	(\$34,020)	\$0	\$0
<b>Total Estimated Net Effect on General Revenue</b>	<b>(\$34,020)</b>	<b>\$0</b>	<b>\$0</b>

**ESTIMATED NET EFFECT ON OTHER STATE FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on <u>Other</u> State Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Numbers within parentheses: () indicate costs or losses.

**ESTIMATED NET EFFECT ON FEDERAL FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on <u>All</u> Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on FTE</b>	<b>0</b>	<b>0</b>	<b>0</b>

☐ 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 2027	FY 2028	FY 2029
<b>Local Government</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## FISCAL ANALYSIS

### ASSUMPTION

§§195.070, 334.104 and 335.019 – Advance Practice Registered Nurses Provisions

#### §334.104.13

Officials from the **Department of Health and Senior Services (DHSS)** assume this section 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 # 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 \$34,020 in FY 2027.

#### IT Consultants’ Breakdown of cost:

##### FY 2027

Requirements Gathering: 30 hours at \$105 per hour = \$3,150

Analysis: 30 hours at \$105 per hour = \$3,150

Design: 20 hours at \$105 per hour = \$2,100

Development: 200 hours at \$105 per hour = \$21,000

Test: 19 hours at \$105 per hour = \$1,995

Implementation: 1 hour at \$105 per hour = \$105

Project Management: 24 hours at \$105 per hour = \$2,520

**Section Total IT Consultants: 324 hours at \$105 per hour = \$34,020**

##### Total General Revenue Expenditures

\$34,020 in FY 2027

**Oversight** does not have any information to the contrary. Therefore, Oversight will reflect the estimated ITSD cost 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 2027 (10 Mo.)	FY 2028	FY 2029
<b>GENERAL REVENUE</b>			
<u>Cost – DHSS/ITSD (\$334.104.13)</u> Amending current database p.3	<u>(\$34,020)</u>	<u>\$0</u>	<u>\$0</u>
<b>ESTIMATED NET EFFECT ON GENERAL REVENUE</b>	<b><u>(\$34,020)</u></b>	<b><u>\$0</u></b>	<b><u>\$0</u></b>

<u>FISCAL IMPACT – Local Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
	<b><u>\$0</u></b>	<b><u>\$0</u></b>	<b><u>\$0</u></b>

### 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 registered nursing. Specifically, prescription medications prescribed by advanced practice registered nurses ("APRNs") may include Schedule II stimulants for behavioral health patients.

Under current law, collaborative practice arrangements between physicians and registered professional nurses may delegate to an APRN 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 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 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 2000 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 Health and Senior Services  
Department of Commerce and Insurance  
Department of Social Services  
Office of the Secretary of State  
Joint Committee on Administrative Rules



Julie Morff  
Director  
January 21, 2026



Jessica Harris  
Assistant Director  
January 21, 2026