

Individual State Agency Fiscal Note

Bill Number: 5184 SB	Title: Anesthesiologist assistants	Agency: 303-Department of Health
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

ACCOUNT	FY 2024	FY 2025	2023-25	2025-27	2027-29
Health Professions Account-State 02G-1		12,000	12,000	42,000	66,000
Total \$		12,000	12,000	42,000	66,000

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.3	0.3	0.3	0.3	0.3
Account					
Health Professions Account-State 02G-1	49,000	74,000	123,000	28,000	28,000
Total \$	49,000	74,000	123,000	28,000	28,000

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.

Sections 2-7 directs the Washington Medical Commission (WMC) to adopt rules regarding education, training, examination, duties, responsibilities, protections, discipline, and limitations necessary to establish a new credential for Anesthesiology Assistants under Title 18 RCW, Businesses and Professions. The addition of this new credential will also necessitate adding new forms and applications to apply for and renew this license in the Healthcare Enforcement and Licensing Management System (HELMS).

Section 9 amends RCW 18.71 and 18.71A to add the Washington Medical Commission (WMC) as the oversight body for Anesthesiologist Assistants.

Section 11 creates a new chapter in Title 18 RCW for Anesthesiologist Assistants.

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.

Current law, RCW 43.70.250 (License fees for professions, occupations, and businesses.), requires the department to charge a fee to generate sufficient revenue to fully support the costs of administering its health professions licensing activities.

Sections 2-7: For the purpose of this fiscal note, a one-year certification fee is estimated between \$280 and \$330 to cover the regulation of Anesthesiologist Assistants. During the rulemaking process, a fee study will be prepared with proposed fees and provided for stakeholder input. 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. Revenue collection will start July 1, 2025, and renewals paid every year. The WMC anticipates there will be 40 credentials to start and 20 additional credentials thereafter as there are only 11-15 schools currently providing this training. The assumption is that there will be a 100% renewal rate.

FY 2025 - \$12,000 (40 applications)
FY 2026 - \$18,000 (20 applications, 40 renewals)
FY 2027 - \$24,000 (20 applications, 60 renewals)
FY 2028 - \$30,000 (20 applications, 80 renewals)
FY 2029 - \$36,000 (20 applications, 100 renewals)
FY 2030 - \$42,000 (20 applications, 120 renewals)

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 2-7: This bill requires the WMC to establish and adopt rules to create a new credential for Anesthesiology Assistants. The commission expects this to be an 18 month rulemaking effort in order to increase collaboration and stakeholder participation with the Health Care Authority (HCA), the Nursing Care Quality Assurance Commission (NCQAC), other stakeholders, and the community. Rulemaking will include six public meetings as well as one formal hearing. Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and Office of the Attorney General support in the amount of \$9,000.

FY 2024; 0.2 FTE and \$44,000 (02G)

FY 2025; 0.1 FTE and \$19,000 (02G)

Health Technology Solutions (HTS)

Sections 2-7: HTS staff costs (\$16,000) will be required to make a new application and create a new credential in the Healthcare Enforcement and Licensing Modernization Solution (HELMS) for Anesthesiologist Assistants. Configuration in HELMS, in FY 2025, will require approximately 137.5 additional hours from the integration vendor at a rate of \$262.50 per hour for a total of \$36,000.

FY 2024; \$5,000 (02G)

FY 2025; 0.1 FTE and \$47,000 (02G)

FY 2026 and ongoing; 0.1 FTE and \$10,000 (02G)

Office of Customer Service (OCS)

Sections 2-7: OCS staff will create new certification credentials to be issued for the new Anesthesiologist Assistant credential. This includes developing new paper and online application forms, configuration, testing, implementation, training, and updates for the new credential type. Additionally, this new credential will generate additional calls to the call center for assistance, increase the number of payments and renewals processed.

FY 2025 one-time cost; \$8,000 (02G)

Discipline

Sections 2-7: Based on the commission’s review of national association certificate program education requirements and on the assumption that the Washington Medical Commission would adopt training and education requirements similar to the national association standards, the department assumes a discipline rate similar to other credentials (such as the Certified Registered Nurse Anesthetist). With these assumptions, the department estimates 5 complaints per year.

FY 2026 and ongoing; \$4,000 (02G)

Total cost to implement this bill:

FY 2024; 0.3 FTE and \$49,000 (02G)

FY 2025; 0.3 FTE and \$74,000 (02G)

FY 2026 and ongoing; 0.1 FTE and \$14,000 (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	49,000	74,000	123,000	28,000	28,000
Total \$			49,000	74,000	123,000	28,000	28,000

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.3	0.3	0.3	0.3	0.3
A-Salaries and Wages	28,000	24,000	52,000	18,000	18,000
B-Employee Benefits	10,000	8,000	18,000	6,000	6,000
E-Goods and Other Services	9,000	5,000	14,000	4,000	4,000
T-Intra-Agency Reimbursements	2,000	1,000	3,000		
9-C		36,000	36,000		
Total \$	49,000	74,000	123,000	28,000	28,000

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
HEALTH SERVICE CONSULTANT	85,020	0.3	0.3	0.3	0.3	0.3
Total FTEs		0.3	0.3	0.3	0.3	0.3

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.

Section 2-7: The WMC will adopt rules in WAC 246-919 (Washington Medical Commission) and as necessary to implement this bill.