

Individual State Agency Fiscal Note

Bill Number: 1503 HB	Title: Health care licenses/info.	Agency: 303-Department of Health
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	1.2	2.2	1.7	3.1	2.8
Account					
Health Professions Account-State 02G-1	1,091,000	350,000	1,441,000	840,000	798,000
Total \$	1,091,000	350,000	1,441,000	840,000	798,000

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.

Section 1: Adds a new section to chapter 18.130 RCW (REGULATION OF HEALTH PROFESSIONS - UNIFORM DISCIPLINARY ACT) stating 1) all applicants who submit applications for licensure on or after July 1, 2024, shall provide information with their application and 2) all license holder shall provide information when they renew their licenses on or after July 1, 2024.

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 that a business-licensing program be self-supporting and sufficient revenue be collected through fees to fund expenditures. The Department of Health (department) oversees over 90 licenses, certifications, and registrations which will be affected by this bill. The department will monitor the program fund balances and adjust fees over a six (6) year period to ensure that fees are sufficient to cover all program expenditures.

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.

Health Technology Solutions:

Configuration in department's Healthcare Enforcement and Licensing Modernization System (HELMS) will require 3,604 hours from the integration vendor at a rate of \$262.50 per hour. Work will include the initial vendor configuration and agency staff time for ongoing maintenance of 182 applications as well as updating reports, user defined fields, and workflows.

FY 2024 costs will be 0.1 FTE and \$955,000 (02G)

FY 2025 and ongoing costs will be 0.9 FTE and \$123,000 (02G)

Office of Customer Service (OCS):

Assumptions:

- The department will conduct follow-ups with licensees one time per year following their renewal.
- Follow-up will consist of a single email to licensees requesting the required information.
- Manually processed renewals will decrease 15% each year.
- Follow up will be required on 75% of manually processed first time renewals (based on the response rate to voluntary surveys currently published)
- Follow up will be required on 50% of manually processed second time renewals.
- Follow up will be required on 30% of manually processed third time renewals.
- Follow up will be required on 25% of manually processed fourth time renewals.

In FY 2024, OCS staff will draft and test user defined fields, 182 paper and online applications and instructions as well as updating existing procedures and protocols related to demographic information.

In 2022, the department manually processed 84,207 renewals. Based on the above assumptions the department anticipates

following up on 63,155 in FY 2025, 85,259 in FY 2026, 59,319 in FY 2027, and 48,482 in FY 2028. The department anticipates a 20% increase in the call center each year due to calls and emails regarding data collection.

- FY 2024 costs will be 1.2 FTE and \$136,000 (02G)
- FY 2025 costs will be 2.2 FTE and \$218,000 (02G)
- FY 2026 costs will be 3.2 FTE and \$311,000 (02G)
- FY 2027 costs will be 2.9 FTE and \$283,000 (02G)
- FY 2028 and ongoing costs will be 2.8 FTE and \$276,000 (02G)

Equity & Social Justice Collaborative:

The department will engage the public to garner support and cooperation with this bill by doing outreach through the Equity & Social Justice Collaborative. This work will impact stakeholder understanding and overall success of the intent of the bill, which is cooperation of health professionals in submitting their demographic data to the department. This work will involve the development of Culturally and Linguistically Appropriate Services (CLAS) appropriate documents, identifying impacted communities, listening sessions, sharing the outcomes of the listening sessions, emails, and website updates. The department anticipates hosting four 1-hour listening sessions during 2025.

FY 2025 costs will be 0.1 FTE and \$9,000 (02G)

TOTAL COSTS TO IMPLEMENT THIS BILL

- FY 2024: 1.3 FTE and \$1,091,000 (02G)
- FY 2025: 3.2 FTE and \$350,000 (02G)
- FY 2026: 4.0 FTE and \$434,000 (02G)
- FY 2027: 3.8 FTE and \$406,000 (02G)
- FY 2028 and ongoing: 3.7 FTE and \$399,000 (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	1,091,000	350,000	1,441,000	840,000	798,000
Total \$			1,091,000	350,000	1,441,000	840,000	798,000

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	1.2	2.2	1.7	3.1	2.8
A-Salaries and Wages	93,000	227,000	320,000	540,000	514,000
B-Employee Benefits	37,000	90,000	127,000	220,000	206,000
C-Professional Service Contracts	946,000		946,000		
E-Goods and Other Services	8,000	15,000	23,000	34,000	34,000
T-Intra-Agency Reimbursements	7,000	18,000	25,000	46,000	44,000
Total \$	1,091,000	350,000	1,441,000	840,000	798,000

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
Fiscal Analyst 2	53,000	0.2		0.1		
HEALTH SERVICES CONSULTAN 1	55,872		1.2	0.6	1.8	1.7
HEALTH SERVICES CONSULTAN 2	66,420	0.2	0.3	0.3	0.4	0.4
HEALTH SERVICES CONSULTAN 3	75,120	0.2	0.1	0.2	0.2	0.1
HEALTH SERVICES CONSULTAN 4	82,896	0.2		0.1		
Health Svcs Conslt 1	53,000	0.1		0.1	0.1	
IT APPLICATION DEVELOPMENT SENIOR/SPECIALIST	115,824		0.1	0.1	0.1	0.1
IT BUSINESS ANALYST - JOURNEI	100,032		0.2	0.1	0.2	0.2
IT QUALITY ASSURANCE - JOURNEY	100,032		0.1	0.1	0.1	0.1
IT SYSTEM ADMINISTRATION - JOURNEY	105,060		0.2	0.1	0.2	0.2
MANAGEMENT ANALYST 3	71,520	0.3		0.2		
WMS02	114,360				0.1	
Total FTEs		1.2	2.2	1.7	3.1	2.8

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.

None