

# Individual State Agency Fiscal Note

<b>Bill Number:</b> 5481 SB	<b>Title:</b> Uniform telemedicine act	<b>Agency:</b> 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				375,000	1,501,000
<b>Total \$</b>				375,000	1,501,000

### Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	4.2	3.2	3.7	3.7	6.4
<b>Account</b>					
Health Professions Account-State 02G-1	595,000	648,000	1,243,000	866,000	1,411,000
<b>Total \$</b>	595,000	648,000	1,243,000	866,000	1,411,000

### 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.*

This bill adds a new chapter to Title 18 RCW and establishes the ability for any patient in WA state to receive telehealth services by in-state and out-of-state practitioners.

Section 7: The department must register an out-of-state health care practitioner for the purpose of providing telemedicine. The health care practitioner must hold an active, unrestricted license or certification in another state that is substantially equivalent to a license or certification issued by the department, must not be subject to a pending disciplinary investigation or action or have been disciplined during the five-year period immediately before submitting the application, and must meet other requirements set forth in the bill. The registration must be renewed with the same frequency required for a practitioner licensed or registered to practice in this state. The department must create an application for registration and may establish a registration fee that reflects the expected cost of registration, investigation, disciplinary action, and other activity related to registered health care practitioners.

Section 8: The department may take disciplinary action against a registered health care practitioner.

Section 11: The department may adopt rules to administer, enforce, implement, or interpret this chapter

### 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.*

Section 7: Based on the anticipated timeline for rulemaking and updates to the department's licensing system, the department assumes the earliest it will begin receiving applications for out-of-state telehealth registrations will be July 1, 2025.

Current law, RCW 43.70.250 (License fees for professions, occupations, and businesses.), requires a licensing program be fully self-supporting and sufficient revenue be collected through fees to fund expenditures.

During their 2019 legislative session, Florida passed a telehealth law requiring out-of-state health care practitioners to be registered with the Florida Department of Health to perform telehealth services for patients in Florida. According to the last three annual reports of the Florida Health Division of Medical Quality Assurance, here is the licensing data for registered out-of-state telehealth providers:

Florida Out-of-State Telehealth Registration	2020	2021	2022
Initial Applications Received	2,185	5,578	8,449

According to 2020 Census data, Florida's population is 21.5 million and Washington's population is 7.7 million, making Washington's population 35.8% of Florida's. Based on the number of applications received by Florida in the first three years of registering out-of-state health practitioners to perform telehealth, and based on the difference in population between Florida and Washington, the department assumes it will receive 782 (2,185 x 35.8%) applications in FY 2026, 1,997 (5,578 x 35.8%) applications in FY 2027, and 3,026 (8,449 x 35.8%) applications in FY 2028. According to a study by GRG Health, the global telemedicine market is projected to grow by 18.9% each year through 2031. The department assumes the number of applications will continue to grow by this rate each year beginning in FY 2029.

According to Washington Administrative Code (WAC) 246-12-020 (3), a health care practitioner's credential expires on their birthday. To maintain an active license, out-of-state health care practitioners providing telehealth will be required to renew with the same frequency required for a practitioner licensed or registered to practice in this state. Currently, health

care practitioners renew annually, every two years, or every three years, depending on the credential, and pay the renewal fee on or before their birthday in their renewal year. Due to the large variety of health care practitioner types which may seek an out-of-state telehealth registration, it is difficult for the department to anticipate how many of the estimated registrants will fall within each renewal period requirements. Because the majority of health care professional credentials are required to be renewed annually, for the purpose of this fiscal note, the department estimates the total number of renewals each year based on an annual renewal cycle. Initial credentials issued within ninety days of the practitioner's birthday do not expire until the practitioner's birthday in their renewal year. Based on this WAC, the Department assumes 25% of initial credentials will require renewal within the same year as their application. Based on the department's experience with health profession renewals and Florida's renewal rate for out-of-state telehealth registrations, the department assumes licenses will be renewed at a rate of 98.5% starting in FY 2026.

Estimated Washington Out-of-State Telehealth Registrations	2026	2027	2028	2029
Initial Applications	782	1,997	3,026	3,598
Renewals	193	770	2,725	5,665

For the purpose of this fiscal note, a registration fee is estimated between \$75 and \$125 per year to cover the registration and regulation of out-of-state health practitioners providing telehealth services. During the rulemaking process, a fee study will be prepared with proposed fees and provided for stakeholder input. The department will monitor program fund balances and adjust fees over a six (6) year period to ensure fees are sufficient to cover all program expenditures. Revenue collection will start July 1, 2025 and will be deposited to the Health Professions Account (02G).

**Estimated Revenue for Out-of-State Telehealth Registration:**

- FY 2026: \$98,000 (782 applications, 193 renewals)
- FY 2027: \$277,000 (1,997 applications, 770 renewals)
- FY 2028: \$575,000 (3,026 applications, 2,725 renewals)
- FY 2029: \$926,000 (3,598 applications, 5,665 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 7 and 11: There are 17 disciplining authorities which must adopt rules to provide out of state telehealth registrations.

The department will adopt cross-profession rules for all 26 health professions under the secretary's authority per RCW 18.130.040(2)(a). Due to the number of professions impacted and intentional collaboration with interested parties across multiple professions, the department anticipates this rulemaking will be complex and is expected to take 18 months to complete. Rulemaking will include the creation of a new WAC chapter to implement cross-profession rules for providing telehealth, including establishing a registration fee. A team of subject matter experts will be utilized to complete the rulemaking for professions under the secretary's authority, consisting of policy and program staff and a community engagement specialist to identify underreached communities and engage them in the rulemaking process. Complex rulemaking will also require a rules project coordinator to support subject matter experts and ensure timely completion of rulemaking. This rule package is extended to address the complex regulatory framework that must be created to register health professionals across 26 professions to engage in telehealth in Washington, identify specific groups who have previously had access barriers to engagement with the department, as well as to give the department the ability to expand community engagement and conduct additional workshops and listening sessions. This process will include 6 meetings with interested parties as well as 1 formal rules hearing, all held virtually. The department anticipates providing the rules hearing announcements and materials in both English and Spanish and providing ASL and Spanish interpretation services at the rules hearing. Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$8,000. In FY 2024 costs will be 0.4 FTE and \$54,000

(02G). In FY 2025 costs will be 0.2 FTE and \$30,000 (02G).

In addition to the department's cross-profession rules, each of the 16 boards and commissions having disciplining authority under RCW 18.130.040(2)(b) will adopt rules to implement this bill:

The Podiatric Medical Board will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Dental Quality Assurance Commission will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Hearing and Speech will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Nursing Home Administrators will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Optometry will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Osteopathic Medicine and Surgery will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General

support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Pharmacy Quality Assurance Commission will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Physical Therapy will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Occupational Therapy Practice will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Examining Board of Psychology and its disciplinary committee will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Veterinary Board of Governors will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Naturopathy will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Board of Denturists will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Nursing Care Quality Assurance Commission will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Chiropractic Quality Assurance Commission will develop and adopt rules to provide out of state telehealth registrations, utilizing a team of subject matter experts consisting of the program manager and a community engagement specialist. Rulemaking will include two meetings with interested parties and one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024, one-time costs for rulemaking will be 0.2 FTE and \$29,000 (02G).

The Washington Medical Commission (WMC) will adopt rules to provide out of state telehealth registrations for Physicians and Physician Assistants. Due to increased stakeholder involvement and efforts to engage in a collaborative model of rulemaking, WMC assumes this will be a complex rulemaking process taking approximately 20 months to complete. WMC rulemaking will include 3 stakeholder meetings, as well as 1 formal hearing which allows for stakeholder participation. The rules hearing announcement and hearing materials will be provided in both English and Spanish, and ASL and Spanish interpretation services will be provided at the rules hearing. Costs include staff, associated expenses (including goods and services, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000. In FY 2024 costs will be 0.1 FTE and \$14,000. In FY 2025 costs will be 0.1 FTE and 15,000.

#### Substantial Equivalent Assessment

Section 7: To determine whether an out-of-state health care practitioner satisfies the requirements for a registration to provide telemedicine services in this state, the department must assess the licenses and certifications issued by all other states to determine which licenses or certifications are substantially equivalent to those issued by the department. Due to the sheer number of licenses and certifications issued to health care practitioners across the United States, the many differences which exist among the education, training, experience, and examination requirements across states, and because states are continually updating these requirements, the determination of which licenses or certifications are substantially equivalent would require continual review and updates. Additionally, because this work is very technical in nature, requiring the examination of statutes and administrative rules, this work will require a high degree of expertise. Based on these factors, the department estimates an additional staff attorney will be required to be fully devoted to this work. The department must establish and hire for the new position, a process expected to take six months due to current labor market conditions.

Costs include staff and associated expenses (including goods and services, travel, intra-agency, and indirect charges).

FY 2024 costs will be 0.7 FTE and \$92,000 (02G)

FY 2025 and ongoing, costs will be 1.4 FTE and \$185,000 (02G)

## Health Technology Solutions

Section 7: Implementation of this bill will require the department to modify the Healthcare Enforcement and Licensing Modernization System (HELMS). Work will include creating 9 new applications, 9 new credentials, a new report, and performing database support for the new credentials. To accomplish this work, the department will require 816 hours of one-time technical consultation from the product vendor at a rate of \$262.50 per hour for a total of \$214,000.

Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and vendor charges.

FY 2025 costs will be 1.4 FTE and \$406,000 (02G)

FY 2026 and ongoing, costs will be: 0.4 FTE and \$58,000 (02G)

## Office of Customer Service

Section 7: In FY 2025 staff time will be required to perform one-time configuration and testing of new online applications, drafting and approving new paper applications and instructions, updating credential specific resources, and instructing staff on requirement changes. Starting in FY 2026, additional staff will be required to review and process initial applications, provide technical assistance, and issue registrations for qualified applicants. In subsequent years, the department will process more renewals than initial applications which typically take less time but will increase total workload due to volume. There is also impact to customer services operations, call center, revenue, and renewal units because of the increase in applications and renewals.

Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and vendor charges.

FY 2025 costs will be 0.1 FTE and \$12,000 (02G)

FY 2026 costs will be 0.9 FTE and \$92,000 (02G)

FY 2027 costs will be 2.6 FTE and \$256,000 (02G)

FY 2028 costs will be 4.0 FTE and \$397,000 (02G)

FY 2029 and ongoing, costs will be 4.9 FTE and \$478,000 (02G)

## Discipline

Sections 7 and 8: Based on the number of complaints Florida has received against health care practitioners holding an out-of-state telehealth registration (19) compared to Florida's the total active registrations (14,056), the department estimates a complaint rate of 0.14% ( $19/14,056 = 0.14\%$ ) for out-of-state telehealth registrations, resulting in an average of 7 additional complaints per year. Based on the average discipline rate for all health professions regulated by the department, the additional complaints will result in an estimated 1 discipline case in FY 2026 and 3 additional cases each year thereafter

The complaint response process includes five steps: 1) intake, 2) assessment, 3) investigation, 4) case disposition, and 5) adjudication. Staff review the complaint, identify the history of the person complained about, and help assess whether an investigation is needed. In more than half the cases, investigation is needed. The investigator obtains information about the complaint and the respondent and prepares a report detailing the findings. After investigation, the disciplining authority decides whether to pursue legal action. Staff attorneys, paralegals, assistant attorney general and other staff work to develop the legal documents and charge the violation. Most cases are settled, and the staff attorney manages that process. If the respondent asks for a hearing, staff must schedule the hearing, and the health law judge considers all legal motions, presides over the hearing, and drafts the final order. Also, the Office of the Attorney General will represent the department at hearing and may provide advice throughout the disciplinary process.

Cost estimates for the complaint response process associated with this bill were calculated using the department’s Disciplinary Workload Model. Estimated discipline costs include staff, associated costs (goods and services, intra-agency and indirect charges), and Office of Attorney General support in the amount of \$2,000 in FY 2026 and \$7,000 each year thereafter.

FY 2026 costs will be \$7,000 (02G)  
 FY 2027 and ongoing, costs will be 0.2 FTE and \$25,000 (02G)

**TOTAL COSTS TO IMPLEMENT THIS BILL:**

FY 2024: 4.2 FTE and \$595,000 (02G)  
 FY 2025: 3.2 FTE and \$648,000 (02G)  
 FY 2026: 2.8 FTE and \$342,000 (02G)  
 FY 2027: 4.6 FTE and \$524,000 (02G)  
 FY 2028: 6.0 FTE and \$665,000 (02G)  
 FY 2029: 6.8 FTE and \$746,000 (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	595,000	648,000	1,243,000	866,000	1,411,000
<b>Total \$</b>			595,000	648,000	1,243,000	866,000	1,411,000

**III. B - Expenditures by Object Or Purpose**

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	4.2	3.2	3.7	3.7	6.4
A-Salaries and Wages	340,000	287,000	627,000	559,000	900,000
B-Employee Benefits	126,000	101,000	227,000	215,000	360,000
C-Professional Service Contracts	15,000	216,000	231,000		
E-Goods and Other Services	90,000	25,000	115,000	49,000	74,000
J-Capital Outlays	2,000	1,000	3,000	2,000	2,000
T-Intra-Agency Reimbursements	22,000	18,000	40,000	41,000	75,000
<b>Total \$</b>	595,000	648,000	1,243,000	866,000	1,411,000



**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	0.7	0.6	0.7	0.6	1.0
FISCAL TECHNICIAN 2	43,800				0.2	0.5
FISCAL TECHNICIAN LEAD	46,980				0.1	0.1
FORMS & RECORDS ANALYST 1	45,852				0.3	0.7
HEALTH SERVICES CONSULTAN 1	55,872				0.4	1.0
HEALTH SERVICES CONSULTAN 2	66,420				0.3	0.7
HEALTH SERVICES CONSULTAN 3	75,120				0.2	0.6
HEALTH SERVICES CONSULTAN 4	82,896	1.7	0.1	0.9		
Health Svcs Conslt 1	53,000	0.4	0.5	0.5	0.4	0.6
HEARINGS EXAMINER 3	96,156	0.5	1.0	0.8	1.0	1.0
IT APPLICATION DEVELOPMENT SENIOR/SPECIALIST	115,824		0.3	0.2	0.1	0.1
IT BUSINESS ANALYST - JOURNEI	100,032		0.3	0.2	0.1	0.1
IT SYSTEM ADMINISTRATION - JOURNEY	105,060		0.3	0.2	0.1	0.1
MANAGEMENT ANALYST 4	82,896	0.9	0.1	0.5		
WMS02	114,360				0.1	0.2
<b>Total FTEs</b>		4.2	3.2	3.7	3.7	6.4

**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.*

As is necessary to implement this bill, the department will adopt cross-profession rules for all 26 health professions under the secretary's authority per RCW 18.130.040(2)(a) in chapter 246-12 WAC, and potentially amend or adopt rules in the WAC chapter corresponding to each profession.

Additionally, each of the 16 boards and commissions having disciplining authority under RCW 18.130.040(2)(b) will adopt

rules to implement this bill in the WAC chapter corresponding to each profession:

Podiatric Medical Board in chapter 246-922 WAC

Dental Quality Assurance Commission in chapter 246-817 WAC

The Board of Hearing and Speech in chapter 246-828 WAC

The Board of Nursing Home Administrators in chapter 246-843 WAC

The Board of Optometry in chapter 246-851 WAC

The Board of Osteopathic Medicine and Surgery in chapter 246-853 WAC

The Pharmacy Quality Assurance Commission in chapter 246-945 WAC

The Board of Physical Therapy in chapter 246-915 WAC

The Board of Occupational Therapy Practice in chapter 246-847 WAC

The Examining Board of Psychology in chapter 246-924 WAC

The Veterinary Board of Governors in chapter 246-933, 246-935, and 246-937 WAC

The Board of Naturopathy in chapter 246-836 WAC

The Board of Denturists in chapter 246-812 WAC

The Nursing Care Quality Assurance Commission in chapters 246-840 and 246-841 WAC

The Chiropractic Quality Assurance Commission chapter 246-808

The Washington Medical Commission in chapter 246-919 WAC