

**Department of Planning and Budget
2025 General Assembly Session
State Fiscal Impact Statement**

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ORIGINAL

Bill Number: HB1675

Patron: Hayes

Bill Title: Board of Medicine; continuing education; unconscious bias and cultural competency.

Bill Summary: Directs the Board of Medicine to require unconscious bias and cultural competency training as part of the continuing education requirements for renewal of licensure. The bill specifies requirements for the training and requires the Board of Medicine to report on the training to the Department of Health. This bill is a recommendation of the Joint Commission on Health Care.

Budget Amendment Necessary: Yes

Items Impacted: Item 285

Explanation: The Department of Health Professions will need funding and one full-time equivalent position to comply with the requirements of this legislation, attributable to Item 285 (Regulation of Professions and Occupations). See table and fiscal analysis below.

Fiscal Summary: The proposed legislation will require nongeneral fund expenditures and an additional position for the Department of Health Professions for which they are not currently appropriated. See table and fiscal analysis below.

Nongeneral Fund Expenditure Impact:

<u>Agency</u>	<u>FY2025</u>	<u>FY2026</u>	<u>FY2027</u>	<u>FY2028</u>	<u>FY2029</u>	<u>FY2030</u>
DHP	-	\$99,600	\$99,600	\$99,600	\$99,600	\$99,600
TOTAL	-	\$99,600	\$99,600	\$99,600	\$99,600	\$99,600

Position Impact:

<u>Agency</u>	<u>FY2025</u>	<u>FY2026</u>	<u>FY2027</u>	<u>FY2028</u>	<u>FY2029</u>	<u>FY2030</u>
DHP	-	1.0	1.0	1.0	1.0	1.0
TOTAL	-	1.0	1.0	1.0	1.0	1.0

Fiscal Analysis: This legislation requires that the Board of Medicine (the Board) promulgate new regulations requiring the completion of continuing learning activities on the topics of unconscious bias and cultural competency as a condition for licensure. The Board is also required to designate organizations providing and facilitating an evidence-based curriculum for such training and report the number of licensees annually completing such training to the Virginia Department of Health for inclusion in their annual report.

Data gathered from the Healthcare Workforce Data Center at the Virginia Department of Health Professions estimates that there are over 75,000 practitioners licensed by the Board. Physicians renew their licenses every two years; a 2022 report from the center identified 51,082 licensees. The Board will be required to track and

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validate the initial and ongoing compliance with the proposed training for each of these licensees, which is a significant addition to their existing workload.

Additionally, the Board will be required to designate organizations that can provide evidence-based unconscious bias and cultural competency training. This process is likely to be time-intensive and may possibly require collaboration with outside consult. The agency may find it necessary to engage in a procurement process and contract with a vendor as a means of “designating” a certain training or trainings. The actions and scope of work needed to support this requirement are unknown at this time; as such, any costs associated with this requirement are indeterminate and are not included in the fiscal impact statement.

To meet the requirements placed on the Board by this legislation, the Department of Health Professions estimates that they will need to hire one additional FTE employee at pay band 3, resulting in a cost of \$99,600 annually. This cost includes salary, fringe benefits, and non-personnel costs related to operation, training, supplies, and travel. Additionally, given that Board operations are wholly sustained by practitioner fee revenue, the increase in nongeneral fund appropriation required to sustain this position may need to be generated through a fee increase for professions regulated by the Board.

Beyond distribution of workload, the Board will be required to make large-scale technical updates to existing databases to comply with the requirements of this bill. Such updates include adding fields that would capture the completion of unconscious bias training programs, identify the designated organization that offered the training program, and assess completion of subsequent training programs in alignment with license renewal periods. Such fields would also need to be reflected in any online data entry systems used by licensees who are applying for a first-time license or pursuing license renewal. For illustrative purposes only, adding additional fields to the VaCMS system at the Department of Social Services (DSS) was estimated to cost \$100,000 in 2022. It has not yet been determined whether the cost or nature of the updates to the systems at the Department of Health Professions is comparable to that of DSS; as such, the exact amount necessary to complete these updates is indeterminate and is not included in the fiscal impact table.

This legislation will also require the Virginia Department of Health to incorporate new data into their annual report regarding the number of licensees who have successfully completed the required training. It is expected that this requirement can be handled using existing resources.

Other: HB 1675 is similar in nature to HB 1649 and its companion bill SB 740; the fiscal impact statements for these bills currently identify a need for one position and \$148,450 annually to accomplish similar tasks. However, HB 1675 is distinct from these two bills in that it does not require the Board of Medicine to perform regular reviews and updates of the unconscious bias trainings that are being offered by the designated organization(s). The duties of the requested position for HB 1675 are limited to tracking compliance with training requirements, designating organizations through which to complete training modules, and reporting annual data on the number of individuals successfully completing unconscious bias training to the Virginia Department of Health. On the other hand, SB 740 and HB 1649 require additional responsibilities of the Board, including reviewing training content, analyzing training quality and effectiveness, and implementing necessary

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updates. Such responsibilities are significant and may require the Board to recruit an employee with specialized knowledge, leading to the difference in pay bands and recommended appropriation amounts.