

Fiscal Analysis: Data gathered from the Healthcare Workforce Data Center at the Virginia Department of Health Professions estimates that as of 2024, there are over 50,000 physicians and 22,000 advanced practice registered nurses licensed by their respective governing boards. Additionally, current regulations require physicians and advanced practice registered nurses to renew their licenses every two years. This legislation places a requirement on the Boards of Medicine and Nursing, in collaboration with the Office of Vital Records,

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to establish a continuing education course on the electronic death registration system that is a requirement for licensure and licensure renewal. Establishing such a course as a requirement for licensure and licensure renewal suggests that the Boards must also employ a mechanism to validate and track training completion for each provider during their initial licensure application process, as well as for any subsequent renewals.

The Department of Health Professions suggests that one new full-time position at pay band 5 will be necessary to manage ongoing validation and completion tracking efforts for the continuing education course, resulting in a nongeneral fund impact of \$154,900. This cost will be shared between the Boards of Medicine and Nursing and includes salary, fringe benefits, and non-personnel costs related to operation, training, supplies, and travel. Given that operations of the Boards 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 one or both boards.

Any other costs to the Office of Vital Records and the Department of Health Professions associated with this legislation, including any collaborative development and publication of such course, the implementation of an attestation on licensure applications, and the promulgation of new regulations, are expected to be minimal and absorbable within existing appropriation.

Other: SB194 may be a companion to HB156.