

Department of Planning and Budget

2022 Fiscal Impact Statement

1. Bill Number: HB1187

House of Origin	<input type="checkbox"/> Introduced	<input checked="" type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

2. Patron: Helmer

3. Committee: Health, Welfare and Institutions

4. Title: Out-of-state health care practitioners; temporary authorization to practice; licensure.

5. Summary: Allows a health care practitioner licensed in another state or the District of Columbia who has submitted an application for licensure to the appropriate health regulatory board to temporarily practice for a period of 90 days pending licensure, provided that certain conditions are met. The bill directs the Department of Health Professions to pursue reciprocity agreements with jurisdictions that surround the Commonwealth to streamline the application process in order to facilitate the practice of medicine. The bill requires the Department of Health Professions to annually report to the Chairmen of the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions the number of out-of-state health care practitioners who have utilized the temporary authorization to practice pending licensure and have not subsequently been issued full licensure. The bill contains an emergency clause.

6. Budget Amendment Necessary: No.

7. Fiscal Impact Estimates: Minimal, see item 8.

8. Fiscal Implications: The provisions of this legislation, as amended, would have a minimal fiscal impact on the Board of Medicine. The Board, in conjunction with the Boards in another state or District of Columbia, will have to develop a tracking mechanism of those persons who are practicing under a temporary authorization for a 90-day period. Any costs associated with tracking or to pursue reciprocity agreements can be handled within existing resources.

9. Specific Agency or Political Subdivisions Affected: Department of Health Professions.

10. Technical Amendment Necessary: No.

11. Other Comments: None.