

Ohio Legislative Service Commission

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Version: As Introduced

Primary Sponsors: Reps. Kelly and Carruthers

Local Impact Statement Procedure Required: No

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Highlights

- The bill requires the State Medical Board to establish surgical assistant licensing procedures and regulate the practice of surgical assistants. The Board will experience costs to regulate this profession. Initial costs include eLicense upgrades estimated to be approximately \$100,000, as well as rule promulgation costs. Ongoing costs will include processing applications and renewals and investigating complaints.
- The Board will experience a gain in license fee revenue. The amount collected will depend on the initial and renewal fee amounts established by the Board in rule, as well as the number of licensees. Any revenue collected will be deposited into the State Medical Board Operating Fund (Fund 5C60).

Detailed Analysis

Surgical assistant licensure

The bill authorizes an individual holding a current, valid license issued by the State Medical Board to practice as a surgical assistant. The bill outlines the scope of practice for surgical assistants, eligibility requirements, and application and renewal procedures. The bill specifies that a license is valid for two years. With certain exceptions, an individual is prohibited from knowingly practicing as a surgical assistant without a Board-issued license. The bill authorizes the Board to impose a civil penalty against any individuals judged to have violated this prohibition. The amount of this penalty shall be determined by the Board in accordance with rules the Board is required to adopt. An individual may practice as a surgical assistant without holding a license if the individual practices at a hospital or ambulatory surgical facility that has been granted a waiver by the Board. To be eligible for the waiver, the hospital or facility must be located in an area of the state that experiences special health problems and physician or podiatrist practice patterns that limit access to surgical care. Physicians, podiatrists, physician assistants, licensed practical nurses, registered nurses, and advanced practice registered nurses are also exempt from the bill's license requirements. The bill also requires the Board to adopt rules establishing standards and procedures for the regulation of surgical assistants, including the establishment of initial and renewal licensing fees.

Fiscal impact

The State Medical Board will experience both initial and ongoing costs related to the regulation of surgical assistants. The eLicense system will need to be updated to include surgical assistant licensure, which the Board estimates to cost about \$100,000. There may be additional minimal costs to promulgate rules. The Board will experience ongoing costs to process initial and renewal license applications and hospital waiver applications, respond to consumer and applicant inquiries, and to investigate complaints. These costs will depend on the number of surgical assistant license applications and hospital waiver applications. The Board is expecting between 200 and 300 individuals to apply for licensure. However, some of these costs may be at least partially offset by application and renewal fees, which are to be set in rule. The Board anticipates that an initial fee may be between \$125 and \$150, with a potential renewal fee of \$125. The estimated revenue would be between \$25,000 and \$37,500 (200 to 300 applicants x \$125) per renewal cycle, though revenue collected could be higher if initial fees are set at \$150. It is possible that the number of licensees could grow in future years if licensure resulted in an increased awareness of the profession. All revenues will be deposited into the State Medical Board Operating Fund (Fund 5C60).

The bill allows hospitals and ambulatory surgical facilities to be granted a waiver from this requirement if certain criteria are met. These waivers may limit the number of surgical assistant applications and thus, fee revenue received by the Board. Any impact will depend on the number of hospitals that meet waiver criteria and apply for the waiver, as well as the number of surgical assistants employed at the hospital. Government-owned hospitals could realize a minimal increase in costs if they apply for the waiver. If they do not apply, then they may realize some minimal costs if they need to ensure surgical assistants are licensed.