

Office of Regulatory Management
Economic Review Form

Agency name	State Board of Health
Virginia Administrative Code (VAC) Chapter citation(s)	12 VAC5-67
VAC Chapter title(s)	Advance Health Care Directive Registry
Action title	Amend Regulations following 2024 Periodic Review
Date this document prepared	7/29/2025
Regulatory Stage (including Issuance of Guidance Documents)	Fast Track

Cost Benefit Analysis

Complete Tables 1a and 1b for all regulatory actions. You do not need to complete Table 1c if the regulatory action is required by state statute or federal statute or regulation and leaves no discretion in its implementation.

Table 1a should provide analysis for the regulatory approach you are taking. Table 1b should provide analysis for the approach of leaving the current regulations intact (i.e., no further change is implemented). Table 1c should provide analysis for at least one alternative approach. You should not limit yourself to one alternative, however, and can add additional charts as needed.

Report both direct and indirect costs and benefits that can be monetized in Boxes 1 and 2. Report direct and indirect costs and benefits that cannot be monetized in Box 4. See the ORM Regulatory Economic Analysis Manual for additional guidance.

Table 1a: Costs and Benefits of the Proposed Changes (Primary Option)

<p>(1) Direct & Indirect Costs & Benefits (Monetized)</p>	<p>Direct Costs: The proposed amendments are anticipated to increase annual costs associated with registry updates to allow providers to search the database for registrant documents:</p> <ul style="list-style-type: none"> • Administrative costs would increase from \$22,338 (FY26) to \$37,230 (+\$14,892) • An anticipated cost of approximately \$45,000 for onboarding of health care providers (e.g., hospitals, freestanding emergency departments, physician offices and other locations) at a rate of \$1,800 per new provider (budgeted for x25 new providers) for the first year. • An anticipated cost of approximately \$30,000 for onboarding of health care providers (e.g., hospitals, freestanding emergency departments, physician offices and other locations) at a rate of \$1,200 per new provider (budgeted for x25 new providers) for the subsequent years. <p>Indirect Costs: There are no anticipated indirect monetized costs resulting from this regulatory action.</p> <p>Direct Benefits: There are no anticipated direct monetized benefits resulting from this regulatory action.</p> <p>Indirect Benefits: There are no anticipated indirect monetized benefits resulting from this regulatory action.</p>	
<p>(2) Present Monetized Values</p>	<p>Direct & Indirect Costs</p> <p>FY26:</p> <ul style="list-style-type: none"> • Data access and maintenance – \$47,616 • Administration of the registry – \$22,338 • New registrant (1,500 annually) – \$4.95/registrant = \$7,425 	<p>Direct & Indirect Benefits</p> <p>(b) \$0.00</p>
<p>(3) Net Monetized Benefit</p>	<p>N/A</p>	
<p>(4) Other Costs & Benefits (Non-Monetized)</p>	<p>System modifications to comply with 12VAC5-67-30 authorizing licensed health care providers to query the Registry will provide the opportunity for licensed health care providers to make better informed medical decisions on behalf of patients by using the patient’s advance health care planning documentation on file in the Registry.</p>	

(5) Information Sources	Virginia Health Information confirmed the anticipated cost increases for FY2026 directly with the VDH on 5/14/2025.
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Table 1b: Costs and Benefits under the Status Quo (No change to the regulation)

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>Direct Costs: Direct monetized costs associated with maintaining the status quo would not increase from the present costs described in Table 1(a) (2).</p> <p>Indirect Costs: No indirect monetized costs have been identified as a result of maintaining the status quo.</p> <p>Direct Benefits: Direct monetized benefits associated with maintaining the status quo would be realized by not increasing present costs described in Table 1(a) (2).</p> <p>Indirect Benefits: No indirect monetized benefits have been identified as a result of maintaining the status quo.</p>	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	<p>FY26:</p> <ul style="list-style-type: none"> • Data access and maintenance – \$47,616 • Administration of the registry – \$22,338 • New registrant (1,500 annually) – \$4.95/registrant = \$7,425 	(b) N/A
(3) Net Monetized Benefit	N/A	
(4) Other Costs & Benefits (Non-Monetized)	N/A	
(5) Information Sources	Chapters 231 and 274 of the 2024 Acts of Assembly.	

Table 1c: Costs and Benefits under Alternative Approach(es)

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>Direct Costs: Anticipated costs associated with this action result from mandatory statutory requirements in Chapters 231 & 274 of the 2024 Acts of Assembly. No direct monetized costs associated with alternative approaches have been identified.</p> <p>Indirect Costs: No indirect monetized costs associated with alternative approaches have been identified.</p> <p>Direct Benefits: No direct monetized benefits associated with alternative approaches have been identified.</p> <p>Indirect Benefits: No indirect monetized benefits associated with alternative approaches have been identified.</p>	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a) N/A	(b) N/A
(3) Net Monetized Benefit	N/A	
(4) Other Costs & Benefits (Non-Monetized)	N/A	
(5) Information Sources	Chapters 231 & 274 of the 2024 Acts of Assembly.	

Impact on Local Partners

Use this chart to describe impacts on local partners. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 2: Impact on Local Partners

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>Direct Costs: There are no direct monetized costs to local partners as a result of this fast track action.</p> <p>Indirect Costs: There are no indirect monetized costs to local partners as a result of this fast track action.</p> <p>Direct Benefits: There are no direct monetized benefits to local partners as a result of this fast track action.</p> <p>Indirect Benefits: There are no indirect monetized benefits to local partners as a result of this fast track action.</p>	
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(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a) N/A	(b) N/A
(3) Other Costs & Benefits (Non-Monetized)	N/A	
(4) Assistance	N/A	
(5) Information Sources	N/A	

Impacts on Families

Use this chart to describe impacts on families. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 3: Impact on Families

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>Direct Costs: There are no direct monetized costs to families as a result of this fast track action.</p> <p>Indirect Costs: There are no indirect monetized costs to families as a result of this fast track action.</p> <p>Direct Benefits: There are no direct monetized benefits to families as a result of this fast track action.</p> <p>Indirect Benefits: There are no indirect monetized benefits to families as a result of this fast track action.</p>	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a) N/A	(b) N/A
(3) Other Costs & Benefits (Non-Monetized)	N/A	

(4) Information Sources	Virginia Health Information.
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Impacts on Small Businesses

Use this chart to describe impacts on small businesses. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 4: Impact on Small Businesses

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>Direct Costs: There are no direct monetized costs to small businesses as a result of this fast track action.</p> <p>Indirect Costs: There are no indirect monetized costs to small businesses as a result of this fast track action.</p> <p>Direct Benefits: There are no direct monetized benefits to small businesses as a result of this fast track action.</p> <p>Indirect Benefits: There are no indirect monetized benefits to small businesses as a result of this fast track action.</p>	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a) N/A	(b) N/A
(3) Other Costs & Benefits (Non-Monetized)	Registrants and health care providers are not responsible for payment of registrant registration fees and health care provider onboarding and annual Registry access fees.	
(4) Alternatives	N/A	
(5) Information Sources	<p>Chapters 231 & 274 of the 2024 Acts of Assembly.</p> <p>Virginia Health Information.</p>	

Changes to Number of Regulatory Requirements

Table 5: Regulatory Reduction

For each individual action, please fill out the appropriate chart to reflect any change in regulatory requirements, costs, regulatory stringency, or the overall length of any guidance documents.

Change in Regulatory Requirements

VAC Section(s) Involved*	Authority of Change	Initial Count	Additions	Subtractions	Total Net Change in Requirements
12VAC5-67-5	(M/A):	0	0	0	
	(D/A):	0	0	0	
	(M/R):	0	0	0	
	(D/R):	0	0	0	
12VAC5-10	(M/A):	2	0	0	
	(D/A):	1	0	0	
	(M/R):	0	0	0	
	(D/R):	0	0	0	
12VAC5-67-20	(M/A):	0	0	0	
	(D/A):	1	0	0	
	(M/R):	4	+1	0	+1
	(D/R):	1	0	0	
12VAC5-67-30	(M/A):	0	0	0	
	(D/A):	0	0	0	
	(M/R):	0	0	0	
	(D/R):	3	0	0	
Grand Total of Changes in Requirements:					(M/A): 0 (D/A): 0 (M/R): +1 (D/R): 0

Key:

Please use the following coding if change is mandatory or discretionary and whether it affects externally regulated parties or only the agency itself:

(M/A): Mandatory requirements mandated by federal and/or state statute affecting the agency itself

(D/A): Discretionary requirements affecting agency itself

(M/R): Mandatory requirements mandated by federal and/or state statute affecting external parties, including other agencies

(D/R): Discretionary requirements affecting external parties, including other agencies

Cost Reductions or Increases (if applicable)

VAC Section(s) Involved*	Description of Regulatory Requirement	Initial Cost	New Cost	Overall Cost Savings/Increases

12VAC5-67	Registry update to allow providers to query the registry	N/A	Administrative cost increase - \$14,892 Provider query updates - \$45,000 (year 1) \$30,000 (subsequent years)	

Other Decreases or Increases in Regulatory Stringency (if applicable)

VAC Section(s) Involved*	Description of Regulatory Change	Overview of How It Reduces or Increases Regulatory Burden
12VAC5-67-30	Removes restriction limiting health care provider queries of the Advance Health Care Planning Registry only for patients who are comatose, incapacitated, or unable to communicate, and instead permits health care providers to query advance health care planning documentation for any patient with which a health care provider has a treatment relationship.	Expands the ability of health care providers to access and query the Advance Health Care Planning Registry on behalf of any patient with which a treatment relationship is established.

Length of Guidance Documents (only applicable if guidance document is being revised)

Title of Guidance Document	Original Word Count	New Word Count	Net Change in Word Count

*If the agency is modifying a guidance document that has regulatory requirements, it should report any change in requirements in the appropriate chart(s).