

By: Kolkhorst

S.B. No. 2695

A BILL TO BE ENTITLED

AN ACT

relating to education programs to enable certain students and advanced practice registered nurses to practice medicine in certain rural counties and physician delegation of certain medical acts to advanced practice registered nurses and physician assistants.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

ARTICLE 1. SHORT TITLE

SECTION 1.001. This Act may be cited as the Texas Critically Underserved Relief and Enhancement Act (Texas Cure Act).

ARTICLE 2. RURAL ADMISSION MEDICAL PROGRAM (RAMP)

SECTION 2.001. Chapter 51, Education Code, is amended by adding Subchapter X to read as follows:

SUBCHAPTER X. RURAL ADMISSION MEDICAL PROGRAM

Sec. 51.851. DEFINITIONS. In this subchapter:

(1) "Council" means the Rural Admission Medical Program Council established under Section 51.853.

(2) "General academic teaching institution" and "private or independent institution of higher education" have the meanings assigned to those terms by Section 61.003.

(3) "Participating medical school" has the meaning assigned by Section 51.821.

(4) "Participating student" means an eligible undergraduate student who is admitted to the program and who maintains eligibility for continued participation in the program.

1 (5) "Program" means the Rural Admission Medical
2 Program established under this subchapter.

3 Sec. 51.852. RURAL ADMISSION MEDICAL PROGRAM. The Rural
4 Admission Medical Program is a program administered by the Rural
5 Admission Medical Program Council to:

6 (1) provide services to support and encourage highly
7 qualified students from counties in this state with populations of
8 less than 25,000 who are pursuing a medical education;

9 (2) award undergraduate and graduate scholarships and
10 summer stipends to those students; and

11 (3) guarantee the admission of those students to at
12 least one participating medical school, subject to the conditions
13 under Section 51.827 and under other provisions of this subchapter.

14 Sec. 51.853. COMPOSITION OF COUNCIL. (a) The
15 participating medical schools shall jointly establish the Rural
16 Admission Medical Program Council consisting of one faculty member
17 employed by and representing each of the participating medical
18 schools.

19 (b) The council shall select one of its members to serve as
20 council chair for a term of two years.

21 Sec. 51.854. COUNCIL DUTIES. (a) The council shall:

22 (1) recruit eligible undergraduate students for
23 admission to the program;

24 (2) establish an application process for admitting
25 eligible undergraduate students to the program;

26 (3) evaluate applications for admission to the program
27 according to the procedures the council establishes for selecting

participating students;

(4) monitor the implementation of the program;

(5) assist in developing services to support and encourage the pursuit of a medical education by participating students and, as applicable, nontraditional students described by Section 51.861;

(6) establish a process for participating students to:

(A) be matched to an internship program as described by Subsection (b);

(B) be matched to any required undergraduate mentoring program as described by Subsection (c);

(C) apply for admission to participating medical schools;

(D) be matched to a participating medical school as described by Subsection (d); and

(E) enroll in that school;

(7) award to participating students undergraduate scholarships and summer stipends, including a summer stipend for a student who is required to participate in an internship program in the summer immediately following the student's senior year;

(8) award graduate scholarships to participating students and, as applicable, nontraditional students described by Section 51.861;

(9) enter into an agreement with each student admitted to the program, each participating medical school, and each general academic teaching institution or private or independent institution of higher education as required by this subchapter; and

1 (10) take any other action necessary to implement the
2 program.

3 (b) The council shall match each participating student with
4 appropriate internship programs offered by participating medical
5 schools during the summers immediately following the student's
6 sophomore and junior years.

7 (c) The council shall match each participating student with
8 any appropriate undergraduate mentoring program required of the
9 student by the council.

10 (d) During a participating student's senior year, the
11 council shall match the student with an appropriate participating
12 medical school as necessary to fill the percentage of enrollment
13 capacity set aside by each medical school under the program.

14 Sec. 51.855. ELIGIBILITY FOR ADMISSION TO PROGRAM. (a) To
15 be eligible for admission to the program, an undergraduate student
16 must:

17 (1) have enrolled at a general academic teaching
18 institution or a private or independent institution of higher
19 education not later than the first fall semester following the
20 student's graduation from high school;

21 (2) be a resident of this state for purposes of tuition
22 under Subchapter B, Chapter 54;

23 (3) successfully complete at least 15 semester credit
24 hours during the fall semester of the student's freshman year at the
25 general academic teaching institution or the private or independent
26 institution of higher education;

27 (4) apply for admission to the program not later than a

date, as designated by the council, that occurs at the beginning of the spring semester of the student's freshman year at the general academic teaching institution or the private or independent institution of higher education; and

(5) meet criteria established by the council regarding:

(A) minimum high school and undergraduate grade point averages;

(B) location in a county in this state with a population of less than 25,000; and

(C) any other matter the council considers appropriate.

(b) For purposes of Subsection (a)(2), a student is not a Texas resident as described by that subdivision solely because the student is eligible to pay tuition at the resident tuition rate.

Sec. 51.856. ELIGIBILITY TO CONTINUE PARTICIPATION IN PROGRAM. (a) To be eligible to continue participation in the rural program, an undergraduate student who is admitted to the program must:

(1) meet criteria established by the council regarding:

(A) courses taken and the minimum grade point average for those courses during enrollment at the general academic teaching institution or the private or independent institution of higher education;

(B) progress in those courses;

(C) achievement of an acceptable score on the

1 Medical College Admission Test or any equivalent examination taken
2 as a precondition for enrollment in or admission to a participating
3 medical school; and

4 (D) any other matter the council considers
5 appropriate;

6 (2) participate in:

7 (A) internship programs described by Section
8 51.854(b) in:

9 (i) the summers immediately following the
10 student's freshman, sophomore, and junior years; and

11 (ii) if required, the summer immediately
12 following the student's senior year; and

13 (B) any undergraduate or graduate mentoring
14 program required by the council; and

15 (3) exhibit intelligence, integrity, and personal and
16 emotional characteristics that are considered necessary for the
17 student to become an effective physician.

18 (b) If an undergraduate student who is admitted to the
19 program fails to meet the requirements of Subsection (a) without
20 good cause as determined by the council, the council may terminate
21 that student's participation in the program at the end of the
22 semester during which the student failed to meet the requirements
23 of that subsection. A student's participation in the program is
24 automatically terminated if the student fails to meet the
25 requirements of Subsection (a) for two consecutive semesters
26 without good cause.

27 Sec. 51.857. COUNCIL AGREEMENT WITH STUDENT ADMITTED TO

1 PROGRAM. (a) A student admitted to the program must enter into an
2 agreement with the council under which the student agrees to:

3 (1) maintain eligibility for continued participation
4 in the program; and

5 (2) repay any scholarship or stipend received under
6 the program if the student enrolls in a public or private medical
7 school in another state, other than temporary enrollment occurring
8 as a result of an exchange program.

9 (b) At the time the student enters into an agreement under
10 this section, the council shall provide the student with
11 information regarding:

12 (1) available program benefits, including
13 undergraduate and graduate scholarships and summer stipends; and

14 (2) repayment of scholarship and stipend benefits
15 received under the program.

16 Sec. 51.858. COUNCIL AGREEMENT WITH PARTICIPATING MEDICAL
17 SCHOOL. (a) Each participating medical school must enter into an
18 agreement with the council under which the medical school agrees
19 to:

20 (1) select a faculty member employed by the medical
21 school to serve on the council;

22 (2) commit faculty and administrative resources to the
23 program;

24 (3) set aside for participating students or, if
25 necessary, nontraditional students described by Section 51.861 at
26 least 10 percent of the medical school's enrollment capacity for
27 each entering class, except as provided by Subsection (b);

1 (4) admit participating students who are matched to
2 the medical school under the program;

3 (5) provide internship programs for participating
4 students who have been matched to or are required to participate in
5 those programs as described by Section 51.854(b) and coordinate the
6 administration of those programs with general academic teaching
7 institutions or private or independent institutions of higher
8 education as necessary;

9 (6) provide for participating students any mentoring
10 programs required by the council at the undergraduate level and
11 coordinate the administration of those programs with general
12 academic teaching institutions or private or independent
13 institutions of higher education as necessary; and

14 (7) provide support services, including
15 postbaccalaureate mentoring programs required by the council, to
16 participating students and, as applicable, nontraditional students
17 described by Section 51.861 who enroll in the medical school.

18 (b) The Baylor College of Medicine must agree under
19 Subsection (a) to set aside under Subsection (a)(3) not less than 10
20 percent of its enrollment capacity set aside for students who are
21 entitled to pay tuition at the rate provided by Chapter 54 for
22 resident students.

23 Sec. 51.859. COUNCIL AGREEMENT WITH GENERAL ACADEMIC
24 TEACHING INSTITUTION. Each general academic teaching institution
25 must enter into an agreement with the council under which the
26 institution agrees to:

27 (1) provide academic counseling to a participating

1 student enrolled at that institution;

2 (2) as soon as practicable after entering into the
3 agreement, implement or expand appropriate degree programs as
4 necessary to provide participating students with sufficient
5 preparation for enrollment in participating medical schools; and

6 (3) select a faculty director or an academic or health
7 professions advisor to assist in implementing the program at the
8 institution and in implementing or expanding the institution's
9 degree programs as necessary under Subdivision (2).

10 Sec. 51.860. COUNCIL AGREEMENT WITH PRIVATE OR INDEPENDENT
11 INSTITUTION OF HIGHER EDUCATION. Each private or independent
12 institution of higher education must enter into an agreement with
13 the council under which the institution agrees to:

14 (1) provide academic counseling to a participating
15 student enrolled at the institution;

16 (2) as soon as practicable after entering into the
17 agreement, implement or expand appropriate degree programs as
18 necessary to provide participating students with sufficient
19 preparation for enrollment in participating medical schools;

20 (3) select a faculty director or an academic or health
21 professions advisor to assist in implementing the program at the
22 institution and in implementing or expanding the institution's
23 degree programs as necessary under Subdivision (2); and

24 (4) provide, in addition to any other scholarship
25 money awarded to the student, a scholarship to a participating
26 student in an amount equal to the amount awarded a participating
27 student attending a general academic teaching institution, except

1 that the amount of a scholarship award may not exceed the amount of
2 tuition and fees that the student is charged.

3 Sec. 51.861. NONTRADITIONAL STUDENTS. (a) If for any
4 reason a participating medical school does not fill the percentage
5 of enrollment capacity set aside for participating students under
6 the program, the medical school shall fill the remaining openings
7 with economically disadvantaged students who:

8 (1) are 25 years of age or older;

9 (2) have been admitted to the medical school
10 independently of the program;

11 (3) are referred by the medical school to the council
12 and admitted to the program by the council; and

13 (4) are entitled to pay tuition at the rate provided by
14 Chapter 54 for resident students.

15 (b) A nontraditional student admitted to the program under
16 this section is subject only to the program benefits and
17 requirements applicable to a participating student after
18 enrollment in a participating medical school. The nontraditional
19 student shall sign an agreement to that effect.

20 Sec. 51.862. FUNDING. (a) The council may accept a gift,
21 grant, devise, or bequest of money, securities, service, or
22 property to carry out any purpose of this subchapter, including
23 funds raised or services provided by a volunteer or volunteer group
24 to promote the work of the council.

25 (b) The legislature may appropriate money for the purposes
26 of this subchapter.

27 Sec. 51.863. REPORT. (a) The council shall deliver a

1 report on the program to the governor, the lieutenant governor, and
2 the speaker of the house of representatives not later than December
3 31 of each even-numbered year.

4 (b) The report must contain detailed information regarding:

5 (1) any problems the council identifies in
6 implementing the rural program, with recommended solutions for
7 those problems;

8 (2) the expenditure of any money received under this
9 subchapter, including legislative appropriations; and

10 (3) the number of students who are admitted to the
11 program and who are enrolled in each year of a baccalaureate,
12 graduate, or professional degree program offered by a general
13 academic teaching institution, a private or independent
14 institution of higher education, or a participating medical school,
15 as applicable.

16 ARTICLE 3. MEDICALLY EXTENDED GEOGRAPHIC ACCESS (MEGA) ADVANCED
17 PRACTICE REGISTERED NURSE TO PHYSICIAN PATHWAY PROGRAM

18 SECTION 3.001. Chapter 301, Occupations Code, is amended by
19 adding Subchapter O to read as follows:

20 SUBCHAPTER O. MEGA ADVANCED PRACTICE REGISTERED NURSE TO PHYSICIAN
21 PATHWAY PROGRAM

22 Sec. 301.701. DEFINITIONS. In this subchapter:

23 (1) "Coordinating board" means the Texas Higher
24 Education Coordinating Board.

25 (2) "Program" means the Medically Extended Geographic
26 Access (MEGA) Advanced Practice Registered Nurse to Physician
27 Pathway program established under this subchapter.

1 Sec. 301.702. PROGRAM ESTABLISHMENT AND GENERAL
2 ELIGIBILITY. The Medically Extended Geographic Access (MEGA)
3 Advanced Practice Registered Nurse to Physician Pathway program is
4 established under this subchapter. The coordinating board shall
5 accept into the program an individual licensed in this state as an
6 advanced practice registered nurse who:

7 (1) applies to the coordinating board in the manner
8 the board prescribes;

9 (2) is physically located in and actively engaged in
10 practice as an advanced practice registered nurse in a county with a
11 population of less than 25,000;

12 (3) has practiced as an advanced practice registered
13 nurse for at least seven years in primary care in this state under
14 physician delegation and supervision in a county with a population
15 of less than 25,000;

16 (4) signs an agreement attesting that, if the
17 individual participates in the program and ultimately obtains a
18 license to practice medicine in this state after completing medical
19 school in this state, the individual will return to practice in a
20 primary care specialty for at least five of the first eight years
21 after obtaining the license in a county with a population of less
22 than 25,000;

23 (5) meets other criteria as required by coordinating
24 board rule; and

25 (6) is not otherwise ineligible to participate in the
26 program under Section 301.703.

27 Sec. 301.703. INELIGIBILITY OF CERTAIN PROCEDURES AND TYPES

OF PRACTICE. An individual may not participate in the program if the individual:

(1) has been convicted of or placed on deferred adjudication community supervision or deferred disposition for any offense;

(2) has ever held a license authorizing the practice of nursing and been subject to discipline by a licensing agency in any state or a federal or foreign jurisdiction, excluding any action related to nonpayment of fees related to a license;

(3) has had a controlled substance license suspended or revoked by a state or the United States Drug Enforcement Administration;

(4) is under active investigation by a licensing agency or law enforcement authority in any state or a federal or foreign jurisdiction; or

(5) has a practice that is exclusively conducted virtually.

Sec. 301.704. ELIGIBILITY FOR MEDICAL SCHOOL ADMISSION AND ADVANCED COURSEWORK. (a) An individual who participates in the program is eligible to apply for admission to a medical school in this state as a third-year medical student if the individual:

(1) satisfies the requirements described by Section 301.702; and

(2) successfully completes step one of the United States Medical Licensing Examination.

(b) This subchapter does not require a medical school in this state to accept an applicant who participates in the program.

1 A medical school applicant who participates in the program must
2 complete the medical school's application and selection process in
3 addition to satisfying the criteria described by Subsection (a).

4 Sec. 301.705. ELIGIBILITY FOR MEDICAL LICENSING
5 EXAMINATION. An individual who participates in the program is
6 eligible to take step one of the United States Medical Licensing
7 Examination if the individual:

8 (1) has practiced as an advanced practice registered
9 nurse for at least seven years in primary care under physician
10 delegation and supervision in a county with a population of less
11 than 25,000; and

12 (2) meets all other requirements established by board
13 rule for continued participation in the program.

14 Sec. 301.706. ELIGIBILITY FOR MEDICAL SCHOOL LOAN
15 REPAYMENT. (a) An individual who participates in the program is
16 eligible for loan repayment to cover the full cost of the final two
17 years of medical school if the individual:

18 (1) was admitted to medical school after applying
19 under Section 301.704;

20 (2) graduates from medical school;

21 (3) graduates from residency from an accredited
22 residency training program in this state in a primary care
23 specialty;

24 (4) applies to the coordinating board for medical
25 school loan repayment assistance under Subchapter J, Chapter 61,
26 Education Code; and

27 (5) fulfills the individual's commitment under Section

1 301.702 to practice in a primary care specialty for at least five of
2 the first eight years after the individual becomes licensed in a
3 county in this state with a population of less than 25,000.

4 (b) In administering loan repayment under Subsection (a),
5 the coordinating board may disburse payments monthly or according
6 to any other schedule to allow physicians to participate in
7 existing federal student loan repayment plans.

8 ARTICLE 4. PROVISIONS APPLICABLE TO CERTAIN DELEGATION AGREEMENTS

9 SECTION 4.001. Subchapter A, Chapter 157, Occupations Code,
10 is amended by adding Section 157.008 to read as follows:

11 Sec. 157.008. FEE FOR DELEGATION AGREEMENT. (a) A
12 physician may not charge more than a reasonable fee to an advanced
13 practice registered nurse or physician assistant to enter into a
14 delegation agreement, including a prescriptive authority
15 agreement.

16 (b) The board by rule shall adopt criteria for consideration
17 in determining whether a fee is reasonable for purposes of
18 Subsection (a), including:

19 (1) the types of medical acts delegated and supervised
20 under the agreement;

21 (2) the time required of the physician to provide
22 adequate supervision of medical acts under the agreement; and

23 (3) the liability risks associated with the delegation
24 and supervision of medical acts under the agreement.

25 SECTION 4.002. Section 157.0512, Occupations Code, is
26 amended by amending Subsections (c), (d), and (f) and adding
27 Subsections (c-1) and (f-1) to read as follows:

(c) Except as provided by Subsection (c-1) and subject to Subsection (d), the combined number of advanced practice registered nurses and physician assistants with whom a physician may enter into a prescriptive authority agreement may not exceed seven advanced practice registered nurses and physician assistants or the full-time equivalent of seven advanced practice registered nurses and physician assistants.

(c-1) Notwithstanding Subsection (c) and subject to Subsection (d), if a physician delegates and supervises the exercise of prescriptive authority exclusively in a county with a population of less than 25,000, the combined number of advanced practice registered nurses and physician assistants with whom the physician may enter into a prescriptive authority agreement may not exceed:

(1) a total of nine advanced practice registered nurses and physician assistants; or

(2) the full-time equivalent of a total of nine advanced practice registered nurses and physician assistants.

(d) Subsections [Subsection] (c) and (c-1) do ~~does~~ not apply to a prescriptive authority agreement if the prescriptive authority is being exercised in:

(1) a practice serving a medically underserved population; or

(2) a facility-based practice in a hospital under Section 157.054.

(f) The periodic meetings described by Subsection (e)(9)(B) must:

(1) include:

(A) the sharing of information relating to patient treatment and care, needed changes in patient care plans, and issues relating to referrals; and

(B) discussion of patient care improvement;

(2) be documented; and

(3) except as provided by Subsection (f-1), take place at least once a month in a manner determined by the physician and the advanced practice registered nurse or physician assistant.

(f-1) Notwithstanding Subsection (f)(3), if a physician delegates and supervises the exercise of prescriptive authority exclusively in a county with a population of less than 25,000, the periodic meetings described by Subsection (e)(9)(B) must take place at least quarterly in a manner determined by the physician.

SECTION 4.003. Subchapter B, Chapter 157, Occupations Code, is amended by adding Section 157.061 to read as follows:

Sec. 157.061. ADDITIONAL LOAN REPAYMENT ASSISTANCE FOR CERTAIN PHYSICIANS WHO DELEGATE AND SUPERVISE. (a) A physician may apply to the Texas Higher Education Coordinating Board for an additional \$45,000 in medical school loan repayment assistance under Subchapter J, Chapter 61, Education Code, if the physician delegates and supervises the exercise of prescriptive authority exclusively in a county with a population of less than 25,000 under a prescriptive authority agreement that satisfies the requirements of this subchapter.

(b) In administering the loan repayment assistance under this section, the Texas Higher Education Coordinating Board may

1 disburse payments monthly or according to any other schedule to
2 allow physicians to participate in existing federal student loan
3 repayment plans.

4 ARTICLE 5. TRANSITION AND EFFECTIVE DATE

5 SECTION 5.001. Not later than February 1, 2026, the Texas
6 Higher Education Coordinating Board and the Texas Medical Board
7 shall adopt rules necessary to implement the changes in law made by
8 this Act.

9 SECTION 5.002. This Act takes effect September 1, 2025.