BILL ANALYSIS

Senate Research Center

H.B. 2420 By: Chavez (Lucio) International Relations & Trade 5/17/2005 Engrossed

AUTHOR'S/SPONSOR'S STATEMENT OF INTENT

Currently, due to a lack of residency positions, the area along the Texas/Mexico border is unable to develop and maintain programs that will provide access for patients and reduce costs associated with the lack of access to health care.

H.B. 2420 addresses this problem by amending Section 32.0315, Human Resources Code, to require the development of a separate formula for Graduate Medical Education reimbursement to support the training of resident physicians in an accredited residency program with a primary field of allopathic or osteopathic medicine meeting certain criteria, including being sponsored by or affiliated with a public university, providing clinical training in federally-qualified health centers and in hospitals near the Mexico border serving patients in a rural area.

H.B. 2420 allows teaching hospitals along the border to sustain and expand their training programs. Ultimately, this provides for more physicians to receive training and set up their practices along the border, which are critical steps toward creating a sustained supply of physicians along the border.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 32.0315(b), Human Resources Code, to require the Health and Human Services Commission (HHSC), in determining the needs of the sate for graduate medical education, to give primary emphasis to graduate medical education primary care specialties and to also recognize the growth in residency training slots since 1997 in the Lower Rio Grande Valley and other health care shortage areas of this state.

SECTION 2. Authorizes delay of implementation until any federal waivers or authorizations are obtained.

SECTION 3. Effective date: September 1, 2005.