

BILL ANALYSIS

C.S.H.B. 2546
By: Zerwas
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Currently the state's growing population coupled with increased longevity, greater availability of specialty medical services, and medical advancements, is creating an accelerating demand for physicians, specifically those in emergency and trauma care.

A shortage of graduate medical education programs forces many prospective medical students to leave the state. It is likely that these students will choose to go into practice where they received medical training, rather than returning to Texas after graduation. Interested parties assert that incentives, specifically financial incentives, are necessary to encourage students to stay in Texas to receive medical training.

C.S.H.B. 2546 seeks to increase enrollment and graduation rates of Texas doctors and registered nurses by establishing the Texas emergency and trauma care education partnership program to offer fellowships to certain students enrolled in graduate professional nursing or graduate medical education programs and by establishing grants to assist those partnerships to meet the state's needs for doctors and registered nurses.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Texas Higher Education Coordinating Board in SECTIONS 1 and 2 of this bill.

ANALYSIS

C.S.H.B. 2546 amends the Education Code to establish the Texas emergency and trauma care education partnership program. The bill defines "emergency and trauma care education partnership" and "participating education program."

C.S.H.B. 2546 requires the Texas Higher Education Coordinating Board to administer the program in accordance with the bill's provisions and the rules adopted under the bill's provisions. The bill requires the coordinating board, to the extent funds are available, to make grants under the program to emergency and trauma care education partnerships to assist those partnerships to meet the state's needs for doctors and registered nurses with training in emergency and trauma care by offering one-year or two-year fellowships to students enrolled in graduate professional nursing or graduate medical education programs through collaboration between hospitals and graduate professional nursing or graduate medical education programs and the use of the existing expertise and facilities of those hospitals and programs.

C.S.H.B. 2546 authorizes the coordinating board to make a grant to an emergency and trauma care education partnership only if the board makes certain determinations specified by the bill.

C.S.H.B. 2546 authorizes a grant under the bill's provisions to be spent only on costs related to the development or operation of an emergency and trauma care education partnership that prepares a student to complete a graduate professional nursing program with a specialty focus on

emergency and trauma care or earn board certification by the American Board of Medical Specialties.

C.S.H.B. 2546 requires the coordinating board, in awarding a grant under the Texas emergency and trauma care education partnership program, to give priority to an emergency and trauma care education partnership that submits a proposal containing certain information and characteristics specified by the bill's provisions.

C.S.H.B. 2546 authorizes the coordinating board, in addition to money appropriated by the legislature, to solicit, accept, and spend grants, gifts, and donations from any public or private source for the purposes of the program.

C.S.H.B. 2546 requires the coordinating board to adopt rules for the administration of the Texas emergency and trauma care education partnership program. The bill requires the rules to include provisions relating to applying for a grant under the program and standards of accountability consistent with other graduate professional nursing and graduate medical education programs to be met by any emergency and trauma care education partnership awarded a grant under the program.

C.S.H.B. 2546 authorizes a reasonable amount, not to exceed three percent, of any money appropriated for purposes of the program to be used to pay the costs of administering the program.

C.S.H.B. 2546 requires the coordinating board, as soon as practicable after the bill's effective date, to adopt rules for the implementation and administration of the Texas emergency and trauma care education partnership program established under the bill's provisions. The bill authorizes the coordinating board to adopt the initial rules in the manner provided by law for emergency rules.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2011.

COMPARISON OF ORIGINAL AND SUBSTITUTE

C.S.H.B. 2546 differs from the original by defining "emergency and trauma care education partnership" as a partnership that consists of one or more hospitals in Texas and one or more graduate professional nursing or graduate medical education programs in Texas and serves to increase training opportunities in emergency and trauma care for doctors and registered nurses at participating graduate medical education and graduate professional nursing programs, whereas the original defines "emergency and trauma care education partnership" as a partnership that consists of one or more hospitals in Texas that are not owned, maintained, or operated by the federal or state government or an agency of the federal or state government and one or more nursing or medical education programs in Texas and serves to increase enrollment and graduation rates for doctors and registered nurses training in emergency and trauma care at participating medical and nursing education programs.

C.S.H.B. 2546 differs from the original by defining "participating education program" as a graduate professional nursing program as that term is defined by state law or a graduate medical education program leading to board certification by the American Board of Medical Specialties that participates in an emergency and trauma care education partnership, whereas the original defines "participating education program" as an undergraduate professional nursing program or graduate professional nursing program as those terms are defined by state law or a professional program leading to a degree required for licensure as a doctor of medicine or osteopathy that participates in an emergency and trauma care education partnership.

C.S.H.B. 2546 differs from the original by specifying that coordinating board grants are for offering one-year or two-year fellowships to students in graduate professional nursing or graduate medical education programs, whereas the original specifies two-year residency fellowships to students in nursing or medical education programs with a focus in the area of family medicine. The substitute differs from the original by specifying that the fellowships are offered through collaboration between hospitals and graduate professional nursing or graduate medical education programs, whereas the original specifies that the fellowships are offered through collaboration between hospitals and nursing or medical education programs.

C.S.H.B. 2546 omits provisions included in the original requiring the coordinating board, as a condition of making a grant, to determine that the marginal cost to the state of producing a graduate of a participating education program will be comparable, as determined under criteria established by coordinating board rule, to the marginal cost to the state of producing a comparable graduate of a nursing or medical education program not participating in a partnership and requiring the coordinating board, in establishing the cost-comparison criteria, to exclude reasonable development and initial implementation costs for infrastructure necessary to support a partnership.

C.S.H.B. 2546 omits a provision included in the original requiring an emergency and trauma care education partnership to return to the coordinating board money granted to the partnership under the program that the partnership does not spend on eligible costs. The substitute omits a provision included in the original authorizing the coordinating board, as the board determines appropriate to best achieve the purposes of these programs, to use the money to make grants to other emergency and trauma care education partnerships, use the money to make grants under the professional nursing shortage reduction program, or transfer the money to the permanent fund for higher education nursing, allied health, and other health-related programs for use in making grants under that fund.

C.S.H.B. 2546 differs from the original, in a bill provision requiring the coordinating board to give priority to a partnership that submits a proposal that meets certain criteria, to specify as a criterion that the proposal indicates the availability of money to match a portion of the grant money, including matching money or in-kind services approved by the board from certain entities, whereas the original specifies as a criterion that the proposal indicates the availability of money to match all or a portion of the grant money, including matching money from such entities.

C.S.H.B. 2546 differs from the original, in a bill provision requiring the coordinating board to adopt rules for the administration of the program that include standards of accountability to be met by any partnership awarded a grant under the program, by specifying that the coordinating board is required to adopt standards of accountability that are consistent with other graduate professional nursing and graduate medical education programs, whereas the original contains no such specification.

C.S.H.B. 2546 omits provisions included in the original requiring each partnership that receives a grant under the program to submit to the coordinating board narrative and financial reports that include certain information and requiring the coordinating board to submit a report to the governor, lieutenant governor, and speaker of the house of representatives that includes a list and description of partnerships created under the program and the number of new nursing and medical student enrollees. The substitute differs from the original by making conforming changes.