

BILL ANALYSIS

Senate Research Center

S.B. 1066
By: Schwertner et al.
Higher Education
6/20/2017
Enrolled

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Studies have shown that physicians who complete their medical school and graduate medical education (also known as residency) in Texas are more likely to practice in the state permanently. However, unless the state can maintain an adequate number of graduate medical education slots to satisfy the number of Texas medical school graduates each year, some could be forced to leave the state in order to complete their residencies.

S.B. 1066 requires any future medical degree programs to submit to the Texas Higher Education Coordinating Board a plan regarding how the institution intends to address the additional residencies necessary to meet the needs of the new graduates. This will ensure that as medical school slots expand, residency slots expand with them, increasing the chance that those new doctors will continue to practice in Texas. (Original Author's / Sponsor's Statement of Intent)

S.B. 1066 amends current law relating to meeting the graduate medical education needs of new medical degree programs offered by public institutions of higher education and to the employment status of certain residents participating in certain graduate medical education programs.

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 Subchapter C, Chapter 61, Education Code, by adding Section 61.05122, as follows:

Sec. 61.05122. GRADUATE MEDICAL EDUCATION REQUIREMENT FOR NEW MEDICAL DEGREE PROGRAMS. (a) Defines "graduate medical education program."

(b) Requires an institution of higher education (IHE), as soon as practicable after the IHE completes preliminary planning for a new doctor of medicine (M.D.) or doctor of osteopathic medicine (D.O.) degree program, to promptly provide to the Texas Higher Education Coordinating Board (THECB) a specific plan regarding the addition of first-year residency positions for the graduate medical education program to be offered in connection with the new degree program. Requires that the plan propose an increase in the number of those first-year residency positions that, when combined with the total number of existing first-year residency positions in this state, will be sufficient to reasonably accommodate the number of anticipated graduates from all M.D. and D.O. degree programs that are offered in this state, including the degree program proposed by the IHE, and to provide adequate opportunity for those graduates to remain in this state for the clinical portion of their education.

(c) Provides that submission of a plan described by this section is a prerequisite for THECB's approval of the proposed degree program.

(d) Provides that an IHE's projected increase in first-year residency positions is presumed to be sufficient in its plan if the increase will achieve the purposes of this section with respect to all graduates from degree programs described by this section that are offered or will be offered by the IHE.

(e) Authorizes the IHE to consult with THECB as necessary to develop the required plan.

SECTION 2. Amends Section 312.003, Health and Safety Code, to provide that this chapter (Medical and Dental Clinical Education in Public Hospitals) applies only if the medical and dental unit or supported medical or dental school agrees to perform certain acts, including to perform or cause to be performed certain activities in a coordinated or cooperative manner in a public or nonprofit hospital, rather than provides that this chapter applies only if a medical and dental unit and a supported medical or dental school agree to perform certain acts, including to perform or cause to be performed certain activities in a coordinated or cooperative manner in a public hospital.

SECTION 3. Amends Section 312.007, Health and Safety Code, by adding Subsection (c), to provide that a resident engaged in graduate medical education in a public or nonprofit hospital in association with a medical and dental unit is an employee of a state agency regardless of whether the resident receives a stipend or other payment from the medical and dental unit for services performed as a resident.

SECTION 4. Effective date: upon passage or September 1, 2017.