

BILL ANALYSIS

C.S.S.B. 1066
By: Schwertner
Higher Education
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties note that, without an adequate number of graduate medical education slots to satisfy the number of Texas medical school graduates each year, some graduates could be forced to leave the state to complete their residencies. C.S.S.B. 1066 seeks to address this issue by requiring a public institution of higher education to provide a specific plan regarding the addition of first-year residency positions for the graduate medical education program to be offered in connection with certain new degree programs.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.S.B. 1066 amends the Education Code to require a public institution of higher education, as soon as practicable after the institution completes preliminary planning for a new doctor of medicine (M.D.) or doctor of osteopathic medicine (D.O.) degree program, to provide promptly to the Texas Higher Education Coordinating Board 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. The bill requires the plan to 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 Texas, will be sufficient to reasonably accommodate the number of anticipated graduates from all M.D. or D.O. degree programs that are offered in Texas, including the degree program proposed by the institution, and to provide adequate opportunity for those graduates to remain in Texas for the clinical portion of their education. The bill makes submission of such a plan a prerequisite for the coordinating board's approval of the proposed degree program and authorizes the institution to consult with the coordinating board as necessary to develop the plan. The bill establishes that an institution's projected increase in first-year residency positions is presumed to be sufficient in its plan if the increase will achieve the bill's purposes relating to residency positions with respect to all graduates from M.D. or D.O. degree programs that are offered or will be offered by the institution.

C.S.S.B. 1066 amends the Health and Safety Code to revise the agreement required for the applicability of statutory provisions relating to the coordination of medical and dental clinical education in public hospitals such that the agreement may provide for that education in a nonprofit hospital. The bill also clarifies that the agreement may be made by a medical and dental unit or a supported medical or dental school independent of one another. The bill

establishes 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 for purposes of individual liability, regardless of whether the resident receives a stipend or other payment from the medical and dental unit for services performed as a resident.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2017.

COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE

While C.S.S.B. 1066 may differ from the engrossed in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the engrossed and committee substitute versions of the bill.

SENATE ENGROSSED

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Subchapter C, Chapter 61, Education Code, is amended.

SECTION 1. Same as engrossed version.

No equivalent provision.

SECTION 2. Section 312.003, Health and Safety Code, is amended to read as follows:
Sec. 312.003. AGREEMENT REQUIRED. This chapter applies only if the [a] medical and dental unit or [and a] supported medical or dental school agrees [agree], either directly or through a coordinating entity, to provide or cause to be provided medical, dental, or other patient care or services or to perform or cause to be performed medical, dental, or clinical education, training, or research activities in a coordinated or cooperative manner in a public or nonprofit hospital.

No equivalent provision.

SECTION 3. Section 312.007, Health and Safety Code, is amended by adding Subsection (c) to read as follows:
(c) 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 2. This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2017.

SECTION 4. Same as engrossed version.