

**SUBJECT:** Establishing a medical school at Prairie View A&M University

**COMMITTEE:** Higher Education — committee substitute recommended

**VOTE:** 7 ayes — Rangel, F. Brown, Farabee, J. Jones, Morrison, E. Reyna  
0 nays  
2 absent — Uher, West

**WITNESSES:** None

**DIGEST:** CSHB 3469 would require the Texas A&M University System board of regents to establish a medical school at Prairie View A&M University (PVAMU) that would train and teach medical students, medical technicians, and other technicians in the practice of medicine. The board could prescribe courses leading to degrees customarily offered by medical schools and could adopt rules on the school's operation and enrollment.

The board could enter into affiliation or coordinating agreements with other entities or institutions to operate the school. It could accept grants or gifts from public or private entities and could make joint appointments in the school and other institutions under the board's governance. The salary of a person who received a joint appointment would have to be apportioned to the institutions on the basis of services rendered.

Before establishing the school, the board would have to develop a plan that included a proposed budget, requirements and source of financial support, a timeline for establishing the school, recommended curriculum, and other provisions. The board would have to take the necessary steps to establish the school no later than January 1, 2007, and would have to begin admitting students by the fall semester of 2008.

The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2001.

SUPPORTERS  
SAY:

CSHB 3469 would help the state address current and projected shortages of physicians, especially primary-care physicians, in rural areas, as well as the critical lack of health care in those areas by establishing a new medical school at Prairie View A&M in rural Waller County.

Many small communities have no hospital or access to professional medical care. Almost 15 percent of Texas' population lives in 196 rural counties, and only 11 percent of practicing primary-care physicians are located in those areas. Statewide, Texas has about one primary-care physician for every 1,700 people. In rural areas, however, the ratio is about one physician for every 2,300 people.

In comparison to urban populations, a relatively large proportion of the rural population is elderly, and the need for medical services in rural communities is growing. Also, since the average age of physicians in rural communities is 55 or older, the shortage of rural physicians is expected to become even more acute if Texas does not take affirmative steps to target physician recruitment and retention in rural areas.

CSHB 3469 would be a positive first step toward addressing the needs of underserved rural areas. Attracting qualified medical students to a rural area would encourage them to develop ties to the region and remain in the area upon graduation from medical school.

Establishing a medical school at PVAMU would be consistent with the Texas Higher Education Coordinating Board's (THECB) goals and with those outlined in the Priority Plan for Strengthening Education at PVAMU and Texas Southern University (TSU). The priority plan was developed by the Governor's Office, THECB, higher education and community leaders, the two institutions, and the the U.S. Department of Education's Office of Civil Rights in response to findings that disparities traceable to *de jure* segregation still existed at TSU and PVAMU, Texas' two historically African-American public universities.

The bill also would be consistent with PVAMU's general purpose as outlined in the Education Code and would build on existing infrastructure at PVAMU. In addition to its designation as a statewide general-purpose institution of higher education and a land-grant institution, PVAMU also is

designated as a statewide special-purpose institution of higher education dedicated to teaching, research, and public service.

PVAMU's community outreach already is well established. The institution has existing capabilities in place sufficient to merit a medical school. Through the Owens-Franklin Health Center, PVAMU already practices rural medicine in Waller County and surrounding areas. The closest hospital is 25 miles away, and PVAMU provides the only X-ray laboratory in Waller County. PVAMU has a history of graduating qualified students who go on to attend and graduate from medical schools in Texas and throughout the nation. Furthermore, PVAMU has the infrastructure in place to support the formation of a medical school. PVAMU has a new state-of-the-art science building, the most credentialed nursing faculty in the state, and the support of the Texas A&M Health Science system. Although medical schools and hospitals already exist within at least a 40-mile radius of PVAMU, none adequately addresses the needs of Waller County residents, nor those of the residents of other rural counties.

The Texas Medical Association has recommended establishing a medical school at PVAMU to combat the lack of access to medical care in rural areas and to increase the number of physicians prepared for rural practice.

OPPONENTS  
SAY:

Before establishing a medical school at PVAMU, the state should complete a feasibility study of establishing a doctor of medicine degree program there, as proposed by HB 42 by McClendon. While PVAMU has taken on worthwhile initiatives in the community, it does not have the appropriate infrastructure to establish a medical school. PVAMU has limited degree programs in the field of allied health and in the sciences (not including PVAMU's engineering programs), no degree programs in pharmacy, no dental school, and a nursing program that, though noteworthy, is located in Houston, not Waller County. Although PVAMU has a new science building, the establishment of a medical school most likely would carry additional infrastructure costs.

The shortage of physicians in rural areas of Texas is not due to the lack of medical schools in rural areas, but to quality-of-life issues and the disparity in pay offered to rural versus urban physicians. Medical school graduates,

even those originally from rural areas, when given the choice, typically prefer to live and practice medicine in urban rather than rural settings.

A better approach to addressing physician shortages in rural areas would be for the state to study the effectiveness of providing financial incentives to medical school graduates to move to rural areas and remain in those areas. These financial incentives could come in the form of loan-forgiveness programs tied to a certain amount of service provided to the area.

OTHER  
OPPONENTS  
SAY:

Establishing a medical school at PVAMU is unnecessary, since at least four existing medical schools are relatively near PVAMU (two in Houston, one in Galveston, and one in College Station).

NOTES:

According to the bill's fiscal note, the board of regents would require \$500,000 in fiscal 2002 to complete the developmental plan. The cost of establishing and operating the medical school would be \$1.5 million in fiscal 2004, \$9.8 million in fiscal 2005, and \$12.1 million in fiscal 2006. Building a 21,050-square-foot library would cost an estimated \$4.6 million, and building a 281,300-square-foot medical building would cost about \$70.3 million. Combined debt service for the two buildings, \$6.5 million, would begin in fiscal 2005 and be paid over 20 years.

The committee substitute modified the filed version by removing a provision that would have established the medical school account as a separate account in the general fund. It also removed language relating to the Public Utility Commission and access rates. The substitute added the provision that would require the board to develop a plan for establishing the school no later than January 1, 2007, and to begin admitting students no later than the fall of 2008, and it modified the bill's effective date.

HB 42 by McClendon would authorize THECB to conduct a feasibility study of an affiliation or coordinating agreement between the Texas A&M system board of regents and any higher education institution to provide clinical education necessary to support a doctor of medicine degree program at PVAMU. HB 42 passed the House on March 20 by 147-0 and has been referred to the Senate Education Committee, which scheduled a public hearing for May 7.

