

- SUBJECT:** Texas Medical Board evaluation to reduce license processing delays
- COMMITTEE:** Public Health — favorable, without amendment
- VOTE:** 9 ayes — Delisi, Laubenberg, Jackson, Cohen, Coleman, Gonzales, S. King, Olivo, Truitt
- 0 nays
- WITNESSES:** For — (*Registered, but did not testify:* Michele O’Brien, Christus Santa Rosa Healthcare; David Pearson, Texas Organization of Rural Community Hospitals; Mathew Wall, Texas Hospital Association)
- Against — None
- On — Jamie Garanflo, Donald Patrick, Texas Medical Board
- BACKGROUND:** Occupations Code, ch. 155 governs the licensure of medical doctors in Texas. In order to receive a license, a doctor must submit an application to the Texas Medical Board, meet certain eligibility criteria, and pass a licensing examination. Sec. 155.007 describes the license application process, including the procedures an applicant must follow to appeal a determination of ineligibility.
- DIGEST:** HB 1973 would amend Occupations Code, sec. 155.007 to require the executive director of the Texas Medical Board to review the policies and procedures that the board uses to issue licenses. The board would identify performance goals that must be met to reasonably hasten the licensing process.
- No later than January 1 of each year, the board would publish a report on the state of its licensing process for distribution to the governor, Legislative Budget Board, and the relevant committees of the House and Senate. The report would have to include a projected yearly budget for staffing of the board and a budget for technology improvements.
- HB 1973 would require the board and executive director to ensure that any changes to licensing policies and procedures would be made only to

increase the number of licenses issued, reduce unreasonable delays in the licensing process, and maintain public safety.

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, 2007.

**SUPPORTERS
SAY:**

HB 1973 would help reduce the backlog of unprocessed license applications and improve access to health care in Texas. Currently, processing time for a new medical license is anywhere from six months to one year. Over the past six years, physician licensure applications have increased from an average of 204 applications per month to 336 per month in 2006, which has resulted in a backlog of more than 2,700 pending applications as of March 2007. This backlog critically impacts Texas' ability to competitively recruit and retain physicians, particularly in rural and medically underserved areas. It invites other states with less cumbersome licensing procedures to recruit Texas physicians. Furthermore, this backlog significantly reduces patient access to care and provider revenue. By requiring the Texas Medical Board to evaluate its licensure process and adopt performance goals to reduce unnecessary delays, the bill would help increase the supply of physicians and access to health care in Texas.

HB 1973 deliberately would not specify a time period in which the board would be required to issue a license because some cases take longer than others to determine whether an applicant meets eligibility requirements. The bill would require to board to identify process improvements to streamline unnecessary administrative delays in the licensing process, but any changes would be implemented in a way that did not endanger public health and safety. The goal is to reduce the time required to process a routine license application while allowing the board sufficient time to complete lengthy, complicated investigations when necessary.

**OPPONENTS
SAY:**

HB 1973 is vague as to what amount of time would qualify as "reasonable" in completing the licensing process. This lack of specificity could allow evaluation of a license application to take as long as it does now.

NOTES:

During floor consideration of HB 1973 on April 16, the House adopted an amendment by Rep. Hopson to require that the report required by the bill include any specialty certification information collected from applicants and the location where each applicant plans to practice. Further consideration of the bill was postponed until today.