

## **BILL ANALYSIS**

Senate Research Center

C.S.S.B. 913  
By: Sibley  
Health & Human Services  
4-7-97  
Committee Report (Substituted)

### **DIGEST**

Currently, Chapter 46, Health and Safety Code, sets forth the guidelines for the medically underserved community-state matching program. The program offers a matching grant to communities that have made a commitment to bring a primary care physician to a medically underserved community. Two of the guidelines provide that the new physician have to (1) conduct a full-time clinical practice in the community; and (2) have completed a primary care residency program within the past seven years. During the first round of applications for the grant money, applicant communities had a difficult time meeting these two guidelines. This bill would remove these guidelines in regard to the type of physician a medically underserved community may sponsor under the program. Additionally, this bill would remove Chapter 46, Health and Safety Code, and redesignate it under Chapter 106E, Health and Safety Code, under the auspices of the Center for Rural Health Initiatives, rather than the Texas Board of Health.

### **PURPOSE**

As proposed, C.S.S.B. 913 removes Chapter 46, Health and Safety Code, relating to the medically underserved community-state matching incentive program, and redesignates it under Chapter 106E, Health and Safety Code, under the auspices of the Center for Rural Health Initiatives, rather than the Texas Board of Health. This bill revises two of the guidelines relating to the incentive program.

### **RULEMAKING AUTHORITY**

Rulemaking authority is granted to the executive committee of the Center for Rural Health Initiatives in SECTION 1 (Section 106.104, Health and Safety Code) of this bill.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Chapter 46, Health and Safety Code, to redesignate it as Chapter 106E, Health and Safety Code, as follows:

#### **SUBCHAPTER E. New heading: MEDICALLY UNDESERVED COMMUNITY-STATE MATCHING INCENTIVE PROGRAM**

Sec. 106.101. DEFINITIONS. Redesignated from Section 46.001. Sets forth the definitions in this subchapter, rather than chapter.

Sec. 106.102. PROGRAM. Requires the executive committee of the Center for Rural Health Initiatives (executive committee), rather than the Texas Board of Health (board), to establish and administer a program under this subchapter to increase the number of physicians providing primary care in medically underserved communities. Deletes text limiting a medically underserved community to sponsoring a physician who has completed a primary care residency program within seven years of application to the medically underserved community-state matching incentive program. Makes conforming changes.

Sec. 106.103. ELIGIBILITY. Makes conforming changes.

Sec. 106.104. RULES. Requires the executive committee to adopt rules necessary for the administration of this subchapter. Deletes text requiring the executive committee to adopt rules regarding, among other items, the contents of an agreement to be entered into by the

parties to include a requirement of a full-time clinical practice for participating physicians. Makes conforming changes.

Sec. 106.105. FUNDING. Makes conforming changes.

SECTION 2. (a) Requires the board, by September 1, 1998, to transfer the obligations, property, and rights that the board had under former Chapter 46, Health and Safety Code, as redesignated by this Act, to the Center for Rural Health Initiatives (center). Provides that the center assumes all of the obligations, property, and rights of the board under Chapter 46, Health and Safety Code, as exercised by the board immediately before the effective date of this Act. Provides that all unexpended funds appropriated to the board under Chapter 46, Health and Safety Code, are transferred to the center. Requires the transfer of the obligations, property, and rights of the board under Chapter 46, Health and Safety Code, to be completed by September 1, 1998.

(b) Provides that all rules of the board relating to Chapter 46, Health and Safety Code, are continued in effect as rules of the center until superseded by a rule of the center.

SECTION 3. Effective date: September 1, 1997.

SECTION 4. Emergency clause.

### **SUMMARY OF COMMITTEE CHANGES**

Revises the proposed relating clause.

SECTION 1.

Amends Chapter 46, Health and Safety Code, by proposing changes in regard to the guidelines of the medically underserved community-state matching incentive program previously suggested in SECTIONS 1 and 2, and by transferring Chapter 46, Health and Safety Code, to Chapter 106, Health and Safety Code, setting forth regulations for the center.

SECTION 2.

Sets forth session law relating to the redesignation of Chapter 46, Health and Safety Code.