

**SUBJECT:** Creating a grant program for residency training in psychiatric fields

**COMMITTEE:** Higher Education — favorable, without amendment

**VOTE:** 8 ayes — Lozano, Raney, Alonzo, Alvarado, Button, Clardy, Howard, Turner

0 nays

1 present not voting — Morrison

**WITNESSES:** For — Tom Kleinworth, Baylor College of Medicine; Greg Hansch, National Alliance on Mental Illness, Texas; (*Registered, but did not testify*: Eric Woomer, Federation of Texas Psychiatry; Gyl Switzer, Mental Health America of Texas; Christine Yanas, Methodist Healthcare Ministries of South Texas; Marilyn Hartman, National Alliance on Mental Illness, Austin; Adriana Kohler, Texans Care for Children; Leela Rice, Texas Council of Community Centers; Sara Gonzalez, Texas Hospital Association; Michelle Romero, Texas Medical Association; Clayton Travis, Texas Pediatric Society; Tomeka Velazquez)

Against — None

On — (*Registered, but did not testify*: Mike Maples, Texas Department of State Health Services; Rex Peebles, Texas Higher Education Coordinating Board)

**BACKGROUND:** Observers suggest that there is a critical shortage of psychiatrists in Texas, especially in rural and underserved areas, and that the insufficient number of graduate medical educational residency slots exacerbates this shortage.

**DIGEST:** HB 2478 would require the Texas Higher Education Coordinating Board to establish a psychiatry specialty innovation grant program. The board would award incentive payments to medical schools that administered innovative residency training programs designed to increase the number of physicians specializing in pediatric or adult psychiatric care.

In addition to legislative appropriations, the coordinating board would be required to first seek and apply for any available federal funds and then to solicit and accept gifts, grants, and donations from public or private sources as necessary to implement the program effectively.

The bill would direct the board to consult with medical schools to adopt rules for program administration, including provisions on the awarding of grants, such as:

- eligibility criteria for medical schools;
- grant application procedures;
- guidelines relating to grant amounts;
- procedures for evaluating grant applications; and
- procedures for monitoring the use of grants.

The board also would have to adopt rules on methods for tracking the effectiveness of grants that considered relevant information on the career paths of medical school graduates during the four-year period after their graduation and evaluated whether and for how long those graduates practiced in a psychiatric specialty field in Texas.

HB 2478 would require the coordinating board to award 60 percent of the amount available in each program year to medical schools with innovative residency programs that trained physicians to specialize in pediatric psychiatric care. The remaining 40 percent would go to medical schools with innovative residency programs that trained physicians to specialize in adult psychiatric care. Priority for awarding grants would be given to medical schools with innovative residency programs based in rural or underserved areas. An amount not to exceed 3 percent of money appropriated for the program could be used for administrative costs.

The coordinating board would be required to adopt rules to implement the provisions of the bill as soon as practicable after the bill's effective date and to establish the psychiatric specialty innovation grant program by September 1, 2018.

The bill would take effect September 1, 2017.

**NOTES:**

According to the Legislative Budget Board's fiscal note, HB 2478 would have an estimated negative fiscal impact of \$2.1 million to general revenue related funds through fiscal 2018-19 and in each subsequent biennium.