SUBJECT: Lower license fees and insurance for voluntary health care providers

COMMITTEE: Public Health — committee substitute recommended

VOTE: 8 ayes — Delisi, Laubenberg, Coleman, Dawson, Jackson, McReynolds,

Solis, Truitt

0 nays

1 absent — Zedler

WITNESSES: For — Robert Ellzey, Travis County Medical Society; Cindy Gunn,

Memorial Hermann Healthcare System; Fred Orr, Christ's Family Clinic; Clift Price, Texas Medical Association; (*Registered, but did not testify:* Myra Austin, Christ's Family Clinic; Jose Camacho, Texas Association of Community Health Centers; Gabriela Moreno, CHRISTUS Health; Jenny

Young, Texas Dental Association)

Against — None

On — Jaime Garanflo, Texas State Board of Medical Examiners; Debbie

Peterson, Department of State Health Services

BACKGROUND: Texas licenses health care professionals under the Occupations Code,

including physicians, who may obtain a license at a reduced charge if

engaged in voluntary charity care under sec. 156.002.

Insurance Code, sec. 21.49-3 and 4, establishes a joint underwriting

association (JUA), the insurer of last resort, and self-insured trusts through

which physicians and dentists may obtain liability insurance.

DIGEST: CSHB 2680 would permit each health licensing agency in Texas by rule to

set reduced licensure fees and continuing education requirements for retired health professionals whose only practice was voluntary charity care. It also would permit the licensing board to adopt rules to promote

health care in medically underserved areas.

The bill would require the JUA to make available liability insurance to a voluntary health care provider who served as a volunteer of a charitable

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organization. The term "voluntary health care provider" would include licensed physicians, physician assistants, registered nurses, pharmacists, podiatrists, dentists, dental hygienists, and optometrists. It also would permit self-insured trusts to offer coverage. Both provisions would apply 181 days after the bill became effective.

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, 2005.

SUPPORTERS SAY:

CSHB 2680 would extend the option of offering a reduced-fee license to regulatory boards for all health professions in Texas. The requirements for licensure would not change, nor would the regulatory body's oversight authority. Paying licensure fees can be a barrier for a retired person who would like to volunteer but may have limited income. Reducing the fee would permit these practitioners to continue serving the public.

Even though HB 4 by Nixon, the medical liability revisions enacted by the 78th Legislature, added physicians who perform charity care to entities immune from civil liability, doctors still must carry some liability insurance to pay for the legal fees that a liability suit generates. It can be difficult for them to obtain defense coverage because few companies write these policies. This bill would permit them to obtain some form of liability insurance at the lower rates offered by the insurer of last resort or self-insured trusts.

OPPONENTS SAY:

No apparent opposition.

NOTES:

The bill as filed would not have required the JUA or a self-insured trust to make available liability insurance to a voluntary health care provider, but would have permitted a licensing entity to adopt rules about insurance requirements for voluntary health care providers.

The fiscal note attached to CSHB 2680 projects a cost of about \$61,000 in fiscal 2006-07, based on an estimated 50 percent reduction in licensing fees to approximately 3 percent of health care practitioners.

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HB 654 and HB 655, both by Goolsby, relate to professional liability and defense coverage for volunteer health care providers. HB 654 passed the House on April 12, and HB 655 passed the House on April 13. Both bills have been referred to the Senate State Affairs Committee.