The Texas Medical Association’s

PRIORITIES FOR THE 2019 TEXAS LEGISLATURE

• Patient-friendly health insurance reforms
• Fair Medicaid payment rates and processes
• Patient protections from unqualified providers
• Patient care decisions made by doctors, not corporations
• Passage of the Texas Medical Board Sunset Bill
• Responsible maternal health, mental health, and public health reforms
• Funding for medical residency programs

See reverse for full descriptions

WHO DO TEXANS BLAME FOR THE HIGH COST OF HEALTH CARE?

Source: Texas Interested Citizens Survey, Sept. 15-24, 2018; 1,200 Texas Active Voters Interviewed; ±2.9% Margin of Error
• 95% Level of Confidence

18% The federal government
30% Pharmaceutical and drug companies
28% Insurance companies
10% Undecided
6% Lawyers
6% Hospitals
3% Doctors

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We Need to Make Texas Health Insurance Companies Put Patients Before Profit

The Texas health insurance industry is enjoying record profits at the expense of their enrollees, our patients, and the physicians who care for them. We need reforms to require health insurance companies to provide appropriate networks of physicians and providers (which they currently don’t); reduce red tape that takes physicians away from patient care; and eliminate road-blocks like prior authorization that make it difficult — and sometimes impossible — for patients to see specialists. Also, health insurance companies should not be allowed to discriminate against patients and Texas licensed doctors who use telemedicine.

We Need Fair Medicaid Payments and Processes for Texas Physicians

It’s time to modernize Medicaid, a program vital to improving the health of Texans of all ages. This starts with paying physicians at least as much as it costs us to care for patients in the Medicaid program. The Legislature should allocate funds to ensure competitive and appropriate Medicaid payments, prevent Medicaid payment rate cuts, and promote fair payment to match inflation and cost of practice increases. Medicaid also must reduce administrative burdens and bureaucracy surrounding physician participation in Medicaid and all other health benefit programs, reduce unnecessary prior authorization requirements, and integrate Medicaid and managed care enrollment and credentialing.

We Need to Protect Texas Patients From Unqualified Health Providers

The practice of medicine is reserved for those who have completed medical school and have appropriate and proper licensing. Other health providers have important skills that complement physicians’ in caring for our patients, but lowering the standards for medical training and physician oversight is unhealthy and dangerous.

We Need Medical Decisions for Texans Made by Doctors, Not Corporations

There is a growing trend across the state of health insurance and other corporate non-clinicians dictating to physicians how to provide medical care for our patients. We need to ensure additional accountability to protect patients by securing their physicians’ clinical autonomy.

We Need the Texas Medical Board (TMB)

In 2017, the Texas Legislature literally ran out of time before passing the Texas Medical Practice Act sunset bill. However, the TMB was continued, and this session we are hopeful lawmakers will authorize the TMB for 12 more years. The TMB is essential to licensing new Texas physicians (we still have one of the nation’s lowest ratios of doctors to population), protecting the public from bad-faith professional medical behavior, and providing fair and transparent medical disciplinary and investigation processes.

We Need to Responsibly Promote a Healthier State for All Texans

- Maternal Health: Even one woman dying during or after pregnancy and childbirth is one too many. We need to build on momentum from last session that authorized a study of the maternal health crisis in Texas; now we need to enact the study’s recommendations for maternal health reforms.
- Opioid Addiction: Texas has made tremendous progress using smart technology to identify opioid-seeking patients. Now, we need to continue this progress with better funding for the Pharmacy Board to enhance the power of that technology and integrate it into physicians’ electronic health records so that database inquiries become a seamless part of patient care.
- Mental Health/Public Health: We need to invest wisely in public health and mental health programs, services (including those in our public schools), and infrastructure. Additionally, by emphasizing primary care and prevention, the state can defend Texans from emerging infectious diseases, tackle the costly obesity epidemic, reduce tobacco’s deadly toll, and help our citizens escape the ravages of substance use disorders.

We Need to Keep Texas Medical School Graduates in Texas Residency Programs

It’s no secret that doctors tend to stay in the states where they receive their specialized medical residency training. As such, Texas needs to invest appropriately in graduate medical education (GME)—not just build more medical schools—to train our next generation of physicians. Otherwise, we are using Texas taxpayer funding to train doctors for other states.