For the past two decades, Texas has led the nation in population growth, adding nearly half a million people a year. All of these new Texans need a lot more doctors. The state has 12 medical schools, and three more are scheduled to open by 2021.

But becoming a physician is a two-part process: four years of medical school, followed by three or more years in residency, or graduate medical education (GME). Too many Texas medical school graduates go out of state for GME and stay there to practice.

Thanks to strong, continued support from the Texas Legislature, the state has engaged in a steady expansion in the number of GME slots available. A much larger investment will be needed to keep up with all the new medical schools and to keep as many new doctors in Texas as possible.

Texas’ physician shortage is particularly acute in our state’s vast rural areas.

(continued)
DATA POINTS

• The number of physicians graduating from Texas medical schools will grow from about 1,800 per year in 2019 to more than 2,200 by 2024.

• Texas taxpayers spend about $180,000 to support each student over the course of his or her medical education.

• Eighty-four rural Texas counties have five or fewer physicians; 24 counties have none.

• Fifteen rural Texas hospitals have closed since the beginning of 2013.

• Of Texas’ 172 rural counties, 101 are designated as “primary care health professional shortage areas.”

TMA RECOMMENDS

• Fully fund GME to maintain the ratio of 1.1 entry-level residency positions for every Texas medical school graduate (in SB 1/HB 1).

• Restore funding for the primary care Physician Education Loan Repayment Program and the Family Medicine Residency Program (in SB 1/HB 1).

WE SUPPORT

• HB 1065 by Ashby/SB 1084 by Kolkhorst. Support the development of rural health GME tracks to produce more physicians for rural Texas.

• HB 2261 by Walle/SB 998 by Hinojosa. Increase Physician Education Loan Repayment Program maximum by $5,000 per year.