

# HEALTHY VISION 2025

## Focus on Teamwork and Patient Safety

Texas needs more physicians and other health care professionals working in all parts of the state, especially in rural and border Texas. But the real gains in improving access to and coordination of patient care will come largely from **solidifying and expanding the use of physician-led teams.**

Team-based collaborative care capitalizes on the efficiencies of having the right professional providing the right services to the right patient at the right time ... with overall direction and coordination in the hands of physicians.

Unfortunately, nonphysician practitioners once again are asking lawmakers to expand their legal scope of practice beyond what their education, training, and skills **safely allow.**

## WE STRONGLY OPPOSE

- **HB 1792 by Klick.** Would grant advanced practice registered nurses (APRNs) “full practice authority” – their term for independent prescribing without delegation, supervision, or limitation.
- **HB 1798 by Goldman.** Would allow therapeutic optometrists to independently perform surgery up to and including corneal transplants, manage glaucoma (no need to collaborate with an ophthalmologist), and prescribe Schedule II drugs. The bill also would allow the Board of Optometry to define scope of practice for eye surgery, NOT the Texas Medical Board.
- **HB 927 by White.** Would grant APRNs “full practice authority” and independent prescribing in health professional shortage areas – not just rural but many urban areas as well.
- **HB 2733 by Stephenson.** Would expand chiropractors’ current statutory scope of “musculoskeletal” to “NEUROmusculoskeletal,” an unnecessary and unwise expansion. An appellate court recently ruled in TMA’s favor in an eight-year lawsuit challenging chiropractors’ authority to perform vestibular-ocular-nystagmus testing.
- **SB 732 by Hughes/HB 29 by Minjarez.** Would allow direct access to physical therapists without a referral by a physician and would allow physical therapists to treat for up to 30 days without the patient having a medical diagnosis or physician authorization for physical therapy.

*(continued)*



Physicians Caring for Texans



## WE SUPPORT BILLS THAT ARE GOOD FOR PATIENTS

- **HB 1622 by Oliverson.** Would permit physician dispensing of medications – but not controlled substances – provided at cost to the patient. These medications would be largely prepackaged, low-cost generics.

**Many benefits:**

- Lower out-of-pocket costs for patients, potentially lower than their pharmacy copays;
- Higher compliance in taking necessary maintenance medications; and
- Greater patient convenience.

This concept is gathering support among business and consumer groups.



Physicians Caring for Texans

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