



Physicians Caring for Texans

House Committee on Public Health
Testimony by G. Ray Callas, MD, of the Texas Medical Association
House Bill 3794 by Rep. Drew Darby
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Thank you, Chair VanDeaver and Vice Chair Campos, for allowing me to testify today. My name is Dr. Ray Callas, and I am an anesthesiologist from Beaumont. I also am the president of the Texas Medical Association (TMA), representing more than 59,000 Texas physicians and medical students, and we are opposed to House Bill 3794.

I can tell you as an anesthesiologist who works with certified registered nurse anesthetists daily – and who also runs an infusion center where nurses are critical to the functionality of our patient care – I deeply value collaboration with these individual team members.

What they help me provide in the way of patient care allows for efficiency while not compromising the patient’s safety or the standard of care. The key to this collaboration is that at the end of the day there is a physician safety net that protects patients in planning for care, providing care, and when the unexpected occurs.

I will say we have heard repeatedly that nurses don’t like having a fee associated with a prescriptive authority/delegation agreement or that physicians are price-gouging them by charging such fees. While we have not seen any evidence of this and disagree with this claim, TMA does not support such “price gouging” in any way. In fact, TMA would have no issue with the legislature removing these fees altogether.

The claim of exorbitant fees is based on a 2019 national *Journal of Nursing Regulation* magazine article which surveyed 8,701 nurse practitioners across the 29 states including Texas; all such states had patient safety laws requiring nurses to have physician oversight for patient care.

Further examination of the study reveals a different picture.

In this survey: 80% of nurse practitioners paid ZERO fees for physician supervision of their patient care, 14.4% said their employers paid the physician oversight fee, and only 5.6% reported paying for physician oversight fees. The article also indicates the median fee to establish a collaborative practice agreement is \$650, and the median monthly to maintain it is \$500.

Simply put, if removing these fees is the path the legislature wanted to go, the legislature could enable the Texas Medical Board to retain physicians to provide state-regulated delegation and supervision for advanced practice registered nurses in rural and underserved areas.

This is a solution to the claimed issues that enables delegation and supervision while minimizing costs and ensuring you have a physician safety net for patients for when the unexpected occurs, or a question arises where non-physician training is not equipped to treat a patient appropriately in the most effective manner possible.

It shouldn't matter who you are or where you live, everyone deserves physician-led, team-based care, that provides the best, most cost-effective short-term and long-term outcomes for Texas patients.

Thank you and I am happy to answer any questions.