



Physicians Caring for Texans

Senate Committee on State Affairs
Testimony by G. Ray Callas, MD, Texas Medical Association
Opposing Senate Bill 3055
May 1, 2025

Mr. Chair, members, I am Dr. Ray Callas, president of the Texas Medical Association, speaking for over 59,000 Texas physicians in opposition to Senate Bill 3055.

Senate Bill 3055 would let advanced practice registered nurses (APRNs) act as licensed independent practitioners in every county with a population under 68,750 residents, and prescribe Schedule III-V controlled substances – without a physician anywhere in the chain of command.

Here is some proof of the inherent dangers in this bill:

- In 2022, a young patient, a registered nurse herself, felt a grape-sized lump in her breast. A nurse practitioner twice reassured this patient, ordered no imaging, and sent her home. Nine months later the cancer had spread to this patient's lymph nodes; she endured a double mastectomy and radiation. She ultimately won a \$18 million malpractice verdict against the clinic.
- Nationally, *Bloomberg News* chronicled Fred Bedell, a 60-year-old Florida father whose blood glucose was 582 mg/dL. A newly licensed nurse practitioner – no physician ever entered the room – discharged him. Mr. Bedell died days later of diabetic ketoacidosis.

When seconds separate a lump from a life, or hyperglycemia from a hearse, the depth of training is decisive. Most nurse practitioner programs finish in 500-750 clinical hours, and even the most rigorous top out near 5,300 hours. New family physicians log 12,000-16,000 supervised hours before practicing alone.

Predictably, studies show unsupervised nurse practitioners order more laboratory and imaging tests than physicians, driving up cost without proven gain. The training gap is not a rounding error; it is the fulcrum on which patient safety tips.

Let me end with this metaphor:

Texas health care is a suspension bridge over the Rio Grande; physicians are the steel cables bearing the full load; advanced practice clinicians are the planks beneath our feet. Cut the cables

and the bridge may stand – until the first hard wind. SB 3055 slices those cables for three million rural Texans.

There are safer ways to span the gap: Expand physician-led telemedicine, fund rural residency tracks for physicians, and strengthen loan-repayment programs that actually bring doctors home.

Do not trade safety for shortcuts. Vote NO on SB 3055.