

**Nueces County Hospital District
Proposed Interim Charges
90th Texas Legislative Session
January 16, 2026**

Study of Physician and Mental Health Workforce Shortages in Rural Areas and Regional Population Centers of Texas, with Emphasis on the Coastal Bend and South Texas

Background

Texas continues to experience persistent and worsening shortages of physicians in **rural areas and regional population centers**, particularly in **the Coastal Bend and South Texas**, where large geographic catchment areas depend on a limited number of safety-net hospitals, regional health systems, and publicly supported facilities. These shortages affect access to primary care, specialty services, behavioral health, obstetrical care, and emergency services, with significant implications for population health, hospital sustainability, Medicaid access, workforce participation, and regional economic development.

In addition, **the Coastal Bend and South Texas face limited access to state-supported inpatient and outpatient mental health facilities**, resulting in prolonged emergency department boarding, increased pressure on county jails, law-enforcement involvement in behavioral health crises, and delayed or foregone treatment for individuals with serious mental illness. The Legislature should examine whether current state mental-health infrastructure, facility placement, and workforce capacity adequately serve regions with large rural catchment areas and growing behavioral-health needs.

During the interim, the Legislature should examine the scope, causes, and potential solutions to physician and mental-health workforce shortages outside of major metropolitan areas, with focused attention on regions that serve extensive rural populations.

HOUSE OF REPRESENTATIVES

Committee on Public Health

Interim Charge 1: Physician Workforce Distribution

Study the current supply, geographic distribution, and specialty mix of physicians practicing in **rural areas and regional population centers**, including those located in **the Coastal Bend and South Texas**. Analyze Health Professional Shortage Area (HPSA) designations, trends over the

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past decade, and projected workforce needs based on population growth, aging, physician retirement, and changing patterns of health-care delivery in these regions.

Interim Charge 2: Graduate Medical Education Expansion in Rural-Serving Regions

Examine opportunities to expand state-supported graduate medical education, including funding for additional primary care and high-need specialty residency positions at safety-net hospitals and teaching facilities that serve **the Coastal Bend, South Texas, and surrounding rural areas**. Review existing federal and state funding mechanisms and statutory authority under the Texas Health and Safety Code and Texas Government Code. Assess the workforce return on investment associated with placing residency programs in regional population centers that function as hubs for large rural catchment areas.

HOUSE OF REPRESENTATIVES

Committee on Higher Education

Interim Charge 3: Medical School Placement and Regional Training Capacity

Evaluate the feasibility and potential impact of establishing one or more new medical schools, branch campuses, or longitudinal clinical training hubs focused on primary care and high-need specialty physician training in **regional population centers serving the Coastal Bend and South Texas**. Assess coordination, approval, and oversight authority under the Texas Education Code, including the role of the Texas Higher Education Coordinating Board, and evaluate anticipated workforce outcomes, start-up and operating costs, and implementation timelines for these regions.

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SENATE

Committee on Health and Human Services

Interim Charge 4: Licensure, Access, and Care Delivery in Rural-Serving Regions

Review physician licensure requirements, alternative entry-to-practice pathways, and telemedicine policies affecting physician supply and patient access in **rural areas and regional population centers**, with particular emphasis on **the Coastal Bend and South Texas**. Evaluate regulatory barriers and opportunities related to licensure, supervision, telehealth, and reimbursement under the Texas Occupations Code, Texas Government Code, and Texas Health and Safety Code.

Interim Charge 5: State-Supported Mental Health Facility Capacity

Study the availability, geographic distribution, and capacity of **state-supported mental health facilities**, including state hospitals and community-based inpatient and outpatient services, serving **the Coastal Bend and South Texas**. Evaluate whether current facility placement, bed capacity, and staffing levels adequately meet regional demand, particularly for individuals experiencing acute psychiatric crises. Examine the impacts of limited state-supported capacity on emergency departments, county jails, law enforcement, and local health systems, and identify potential options to expand or realign mental-health infrastructure in rural-serving regions.