Appendix A. Detailed Feasibility Ratings by Domain

This appendix presents the complete feasibility ratings across all domains for each option assessed in this study. It is intended to provide full transparency into how each option performed against the established criteria and the reasoning supporting those assessments.

The appendix is organized by domain. Within each domain:

1. A summary chart displays all criteria and the corresponding High, Medium, or Low ratings for each option, allowing for a high level comparison across options.
2. Detailed option-by-option analysis follows. For each option, the full text of every criterion is presented along with its assigned rating and a narrative explanation describing the basis for that rating.

Together, these materials provide the underlying analytical support for the cross-domain synthesis and overall feasibility conclusions presented in the main body of the report.

Governance Feasibility Ratings

Comparative ratings across options in the governance domain are presented in the table below, followed by a narrative justification for each criterion rating by option.

Option	1 TexNCAS	2 TXHES CAS	3 Hybrid	4 Data
Domain Score	19	21	11	14
Criteria Ratings				
G.1 TXHES has clear and sufficient authority under existing statutes and regulations to implement and govern the option without requiring legislative or regulatory changes.				
G.2 Participating institutions can implement and participate in governance of the option within existing legal, accreditation, and institutional governance constraints.				
G.3 Clear, enforceable data ownership, access, privacy, and confidentiality frameworks can be established that meet legal, institutional, and stakeholder expectations.				
G.4 The option can be governed through a shared or advisory model that is viable across institution types, systems, and regions.				
G.5 Governance structures can meaningfully incorporate operational expertise (e.g., admissions and registrar perspectives) in decision-making.				
G.6 Governance processes can clearly define decision rights, change control mechanisms, and dispute resolution approaches to manage system evolution and conflicting institutional priorities.				
G.7 Governance processes can support transparent decision-making, accountability, and clear communication regarding system selection configuration, data use, and future enhancements.				

Option 1: Vendor-Supported TexNCAS

G.1 TXHES has clear and sufficient authority under existing statutes and regulations to implement and govern the option without requiring legislative or regulatory changes	**High**

Option 1 sits on strong statutory footing because HB 2851 explicitly directs TXHES to include nursing programs in a centralized application service, and TXHES already operates a statewide centralized application service (TMDSAS), which provides a direct operational precedent for administering a centralized intake model at scale. The governance question under this criterion is not whether TXHES can build and own a system, but whether TXHES has sufficient authority to stand up and govern a centralized application service (including participation rules, oversight, and policy enforcement) without further legislative change. The TMDSAS precedent is material because it demonstrates that TXHES can sustain multi-

institution governance for a centralized admissions service within existing Texas higher education governance structures.

In Option 1, TXHES's authority is exercised through a vendor contract establishing the platform and service expectations under Texas governing law, and participation agreements (MOUs/participation agreements) with nursing programs that preserve program admissions authority while standardizing intake. TXHES defines governance rules via configurable controls (access management, audit capabilities, and configurable workflow components) outlined in the vendor contract, retaining formal authority over governance decisions and using the contract to operationalize those decisions, consistent with typical state contracting models for legislatively-directed programs.

G.2 Participating institutions can implement and participate in governance of the option within existing legal, accreditation, and institutional governance constraints	**High**

Accreditation standards (ACEN, CCNE) and Texas Board of Nursing regulations require nursing programs to retain authority over admissions criteria, selection decisions, and outcomes. They further require that admissions policies be institutionally approved, mission-aligned, and auditable. Those constraints do not inherently conflict with a centralized application intake model. The key governance distinction is between centralizing the intake and presentation of application materials versus centralizing admissions decision authority or forcing uniform admissions criteria. Option 1 is feasible because it is designed as the former and can be governed to avoid the latter.

The strongest evidence that Option 1 is compatible with institutional governance constraints is that approximately 30 Texas nursing programs already participate in NursingCAS within their existing governance and accreditation frameworks. This is demonstrated feasibility. Nursing programs today receive and evaluate application data through a centralized portal while maintaining institutional control over admissions decisions. This addresses the stakeholder concern about the risk of eroding autonomy demonstrating that, when governance is properly scoped, CAS participation does not require transfer of admissions decision authority.

Nevertheless, the autonomy concern raised by stakeholders is a governance design requirement: TXHES must explicitly codify in participation agreements that programs retain control over admissions criteria and decisions; governance bodies are advisory (not prescriptive) on matters that would otherwise be institutional academic authority; and the platform configuration supports program-specific workflows (e.g., program-level requirements, communications, and evaluation processes) rather than imposing a single uniform process that could be perceived as inconsistent with accreditation expectations. The feasibility is therefore high, but it requires disciplined governance boundaries, a condition that TXHES can satisfy through documentation, agreements, and standing governance charters.

G.3 Clear, enforceable data ownership, access, privacy, and confidentiality frameworks can be established that meet legal, institutional, and stakeholder expectations	High

Stakeholders raised concerns about applicant data access and potential misuse of applicant pool information. Further, legal baselines (FERPA, Texas Education Code provisions, UT Regents Rules, and DIR cybersecurity expectations) create non-negotiable compliance requirements. Those concerns are governance-relevant because they go to trust: programs will not participate at scale if they believe applicant data could be used for competitive recruitment, shared inappropriately across institutions, or governed opaquely.

Option 1 is highly feasible because the draft vendor contract reviewed by the study team provides a concrete, enforceable data stewardship framework that can be layered with Texas-specific governance policy. In particular, the draft contract restricts the vendor from making applicant data available to third parties without TXHES's prior written consent and limits vendor use of identifiable data to providing and improving the software in a manner that does not identify individual applicants. It also allows only aggregate or de-identified disclosure of system performance/usage analytics, standard practice that does not dilute TXHES control over identifiable applicant data. These contract terms are the backbone of enforceability; they are not merely aspirational governance statements.

To fully address stakeholder concerns, TXHES must pair the contract framework with explicit governance policy on:

- Role-based access controls (who can see what, at what stage of the cycle)
- Permitted uses (evaluation vs. recruitment)
- Prohibitions on using CAS applicant pools to recruit away candidates in ways inconsistent with program expectations
- Audit and enforcement mechanisms (audit logs, periodic audits, escalation/discipline processes).

Because the platform supports access management and audit capabilities, these controls are operationally implementable, not just policy language. Option 1 is therefore highly feasible on data governance, provided TXHES adopts Texas-specific data use policies and enforcement procedures as part of participation requirements.

G.4 The option can be governed through a shared or advisory model that is viable across institution types, systems, and regions	High

Stakeholder feedback consistently showed support for a shared or advisory governance model with representation from diverse institution types (community colleges, universities, private institutions) and geographic regions. Option 1 is well-positioned to implement this because it can build directly on the Advisory Committee established under HB 2851 and can operationalize advisory input through TXHES-led governance structures.

The TMDSAS governance model is a critical precedent here: it demonstrates that TXHES can run an advisory governance structure across institutions with different missions and admissions models while maintaining statewide operational coherence. Option 1 also benefits from an existing base of NursingCAS users who can contribute experienced, operationally grounded governance input (as opposed to purely hypothetical design feedback). This strengthens feasibility because governance bodies can be staffed with people who have lived the platform realities (workflow, data, timelines, and stakeholder impacts) improving the quality of governance decisions.

G.5 Governance structures can meaningfully incorporate operational expertise (e.g., admissions and registrar perspectives) in decision-making	**High**

A recurring theme in stakeholder input was that governance cannot be 'IT-only.' Participants explicitly identified admissions leadership, admissions staff, registrar/registration staff, advisors, student services, and program directors as essential governance voices. Option 1 is structurally well-aligned to that expectation because the CAS platform directly affects operational admissions workflows (e.g., application cycle setup, evaluator workflows, document verification processes, communications, and reporting). These are governance decisions that inherently require frontline operational expertise.

Option 1's feasibility advantage is immediacy and specificity. The Texas nursing programs already using NursingCAS can provide detailed operational lessons about what works, what creates burden, and where platform configuration interacts with institutional prerequisites and verification practices. That provides TXHES a ready pool of operational experts to populate governance working groups (e.g., configuration/workflow workgroup; data dictionary and reporting workgroup; applicant experience workgroup). Because the governance issues are tied to daily system use, operational expertise has a meaningful role rather than a symbolic one.

G.6 Governance processes can clearly define decision rights, change control mechanisms, and dispute resolution approaches to manage system evolution and conflicting institutional priorities	**Med**

Option 1's primary governance constraint is structural. The vendor relationship introduces negotiated decision domains. Even if TXHES retains policy authority (such as over participation rules, data use policy, governance charters), system-level changes (such as platform enhancements, data model changes, feature priorities, and release timing) cannot be executed unilaterally by TXHES. They must be negotiated with the vendor, which controls the underlying architecture and product roadmap.

Nevertheless, the Option remains feasible so long as TXHES designs a robust change-control model that distinguishes Texas-controlled configuration changes (implemented by TXHES or within TXHES-authorized configuration authority) versus platform-level development changes (requiring vendor development). Governance must also establish

escalation pathways and dispute resolution processes that reflect state contracting realities. The draft vendor contract includes formal dispute resolution provisions (good faith negotiation, executive-level escalation, then litigation under Texas law), which creates a defined process but does not eliminate the dependency.

To address the risk of vendor lock-in and the need for exit strategies, TXHES should include contractually-defined change governance (e.g., governance calendar for release windows, backlog prioritization), service performance reporting, and a practical exit/transition strategy to reduce long-term governance risk. Institutions must also retain authority over admissions-related decisions even as configuration changes occur, meaning governance must guard against configuration changes that inadvertently standardize or constrain admissions policies in ways that conflict with accreditation or BON accountability expectations.

G.7 Governance processes can support transparent decision-making, accountability, and clear communication regarding system selection, configuration, data use, and future enhancements	**Med**

Stakeholders emphasized transparency around participation requirements, costs, data use, and system changes. The platform can support transparency through audit capabilities, reporting, and performance accountability mechanisms. The draft vendor contract contemplates regular reporting and service performance expectations. TXHES can further strengthen transparency through governance practices such as published governance charters, meeting minutes, decision logs, and clear communications about what is decided by TXHES versus what is decided by the vendor.

However, transparency is partially constrained because some governance-relevant decisions sit within vendor-controlled domains: platform processing logic, roadmap prioritization, and certain implementation choices may not be fully visible or directly influenceable by all institutional stakeholders. Even when the vendor provides strong reporting and auditability, stakeholders may still perceive ‘black box’ risk if they cannot see how certain platform decisions were reached or why certain enhancements are or are not prioritized.

To manage this, governance must explicitly define accountability boundaries and communication protocols: a clear responsibility assignment matrix for TXHES, the vendor, and institutions; predictable cadence for change notices; transparent publication of Texas-specific configuration decisions; and routine reporting on data use and access. This criterion remains Medium because vendor-mediated domains require intentional governance communication and do not allow the same end-to-end transparency as a fully state-owned system. But with disciplined governance design, the transparency requirement is feasible.

Option 2: TXHES-Built TexNCAS

G.1 TXHES has clear and sufficient authority under existing statutes and regulations to implement and govern the option without requiring legislative or regulatory changes	High

Option 2 presents the most direct expression of TXHES authority contemplated under HB 2851 because both governance responsibility and system ownership reside with TXHES. A TXHES-developed system is fully within the agency's legal authority provided it achieves the statutory objectives of centralized intake, standardized processes, and statewide access.

The relevance of the TMDSAS precedent is particularly strong under this option. TXHES already operates a centralized application platform across multiple institutions, professional schools, and governing boards. That experience establishes both legal and administrative legitimacy for the agency to build and govern an analogous nursing platform. In contrast to a vendor-supported model, in which authority is implemented through a contract, Option 2 enables TXHES to exercise authority directly through internal policy, administrative rule, and operational control.

Because no new delegation of power is required, and because centralized application governance already sits squarely within TXHES's functional mandate, implementation of this option would not require statutory amendment.

G.2 Participating institutions can implement and participate in governance of the option within existing legal, accreditation, and institutional governance constraints	High

As noted above for Option 1, accreditation bodies and the Texas Board of Nursing require that institutions retain authority over admissions standards, selection, and outcomes. These constraints are foundational and cannot be displaced by centralized infrastructure. The feasibility question is therefore whether TXHES can design and govern a state-owned platform that centralizes intake while preserving institutional academic authority.

The TMDSAS model again provides material evidence that this is achievable. Institutions currently operating within TMDSAS maintain control over admissions criteria, interview processes, and final decisions while using a shared intake and verification structure. This demonstrates that centralization of infrastructure is not inherently incompatible with institutional governance or accreditation accountability.

However, Option 2 introduces a dependency that is less pronounced in the vendor model: the burden of correctly translating governance boundaries into system architecture rests entirely with TXHES. Where a vendor platform arrives with configurable pathways proven across jurisdictions, a state-built system must design those flexibilities from the outset. If workflows, data structures, or timelines inadvertently embed uniformity that institutions perceive as constraining autonomy, resistance could emerge even if policy language says otherwise. Therefore, feasibility is contingent on TXHES successfully embedding

institutional variation, program-specific requirements, and independent decision authority into the technical and operational design from the beginning.

G.3 Clear, enforceable data ownership, access, privacy, and confidentiality frameworks can be established that meet legal, institutional, and stakeholder expectations	**High**

Option 2 provides the strongest structural position for data governance because TXHES is both steward and operator of the platform. TXHES would control storage architecture, access provisioning, audit design, and permitted uses directly rather than through contractual enforcement of a third party.

This structure simplifies accountability. If questions arise regarding applicant visibility, inter-institutional access, or permissible analytics, TXHES can resolve them through policy and system configuration without negotiating external limitations. Alignment with FERPA, DIR security expectations, and institutional data governance rules can be achieved through direct administrative authority.

The principal challenge under this option is not enforceability but capacity: TXHES must maintain the cybersecurity, compliance monitoring, and audit infrastructure necessary to support that authority. Provided those operational supports exist, feasibility for this criterion is high.

G.4 The option can be governed through a shared or advisory model that is viable across institution types, systems, and regions	**High**

Full system ownership provides TXHES maximum flexibility to design advisory bodies, working groups, and escalation pathways without vendor mediation. Representation structures can be tailored to ensure participation from community colleges, universities, private institutions, and workforce interests.

The existence of TMDSAS again demonstrates that statewide advisory governance across diverse institutions is administratively achievable. Moreover, because TXHES would control prioritization and release planning, advisory recommendations could translate more directly into action than in vendor-constrained environments. Feasibility therefore turns primarily on TXHES's willingness and capacity to maintain sustained engagement, not on structural barriers.

G.5 Governance structures can meaningfully incorporate operational expertise in decision-making	**High**

Because TXHES would own both policy and platform, program operational experts could influence governance decisions at the point where they matter most: system design and enhancement. Admissions officers, registrars, evaluators, and advisors could be integrated into standing governance workgroups responsible for workflow, reporting, and applicant experience.

This model may offer deeper integration than vendor approaches, where some decisions ultimately depend on external product development priorities. Here, TXHES could align operational insight directly with implementation schedules. Again, the constraint is resource intensity rather than structural incompatibility. With sustained engagement mechanisms, feasibility is high.

G.6 Governance processes can clearly define decision rights, change control mechanisms, and dispute resolution approaches	**High**

Unlike a vendor-supported option, TXHES would retain unilateral authority over system modifications, timelines, and priorities. Decision rights can therefore be codified internally without negotiation over proprietary architecture or roadmap alignment.

Disputes would center on policy rather than feasibility of execution. While institutions may disagree with decisions, TXHES would have clear authority to implement them. This concentration of authority simplifies governance mechanics and supports a high feasibility rating.

G.7 Governance processes can support transparent decision-making, accountability, and clear communication	**High**

Public ownership enables the strongest transparency framework. Governance charters, decision logs, enhancement roadmaps, performance metrics, and audit findings can be published or shared without contractual constraint. Stakeholders can see who decided what, when, and why.

The principal risk is execution: maintaining disciplined communication and documentation practices requires ongoing administrative effort. But structurally, nothing impedes transparency.

Option 3: Hybrid

G.1 TXHES has clear and sufficient authority under existing statutes and regulations to implement and govern the option without requiring legislative or regulatory changes	**Med**

Option 3 can be implemented within TXHES's existing authority because HB 2851 directs the establishment of a centralized application service but does not explicitly require universal participation or prohibit alternative pathways. Under a permissive reading, TXHES could create a statewide CAS while allowing institutions to opt out and maintain separate application mechanisms.

However, the governance feasibility question is not limited to legality. It also concerns fidelity to legislative intent. HB 2851 and the Task Force discussions emphasized simplification, transparency, and reduction of applicant confusion. An opt-out structure inherently produces a mixed environment in which some programs participate in centralized intake while others maintain separate systems. That fragmentation weakens the coherence of the centralized model the Legislature sought to promote.

Therefore, while Option 3 is legally permissible, its alignment with statutory objectives is partial. TXHES would be acting within its authority, but the governance framework would be built on compromise rather than uniformity.

G.2 Participating institutions can implement and participate in governance of the option within existing legal, accreditation, and institutional governance constraints	**Med**

Option 3 appears attractive from an autonomy perspective: institutions that are uncomfortable with centralized intake can simply remain outside the system. In that sense, accreditation and Board of Nursing authority are preserved.

Yet this apparent advantage introduces a deeper governance complication. A shared governance body is most effective when its decisions apply to a coherent operational environment. In Option 3, participating institutions operate under CAS rules, timelines, and data definitions, while non-participating institutions do not. Governance decisions about process standardization, reporting definitions, applicant communications, or cycle management therefore affect only a subset of programs.

This produces two persistent challenges. First, incentives for engagement weaken. Institutions outside the CAS may see little value in sustained governance participation. Second, even within the CAS cohort, participants may hesitate to support policies that create divergence from peer institutions operating outside the system.

The result is that while autonomy is protected, collective governance becomes harder. Institutions can comply with accreditation requirements, but building durable, statewide governance alignment becomes significantly more complex.

G.3 Clear, enforceable data ownership, access, privacy, and confidentiality frameworks can be established that meet legal, institutional, and stakeholder expectations	**Low**

Option 3 fundamentally lacks a single system of record. Some applicant data would reside within the CAS environment, governed by TXHES policy, while other applicant flows would remain entirely within institutional systems. This fragmentation complicates nearly every aspect of data governance.

TXHES can establish strong controls within the CAS itself (e.g., role-based access, permitted uses, audit processes) but it cannot impose comparable controls on institutions operating outside the system without additional statutory authority. As a result, statewide assurances about applicant privacy, comparability of reporting, or equity of access become impossible to deliver.

Stakeholders concerned about uneven information availability may view the dual-system structure as inherently less trustworthy. Even if CAS participants operate under rigorous rules, the existence of parallel processes weakens the perception of fairness and consistency.

G.4 The option can be governed through a shared or advisory model that is viable across institution types, systems, and regions	Med

Advisory governance depends on shared stakes. Option 3 divides those stakes. Participants and non-participants face different operational realities, resource burdens, and policy implications.

As a result, governance forums risk bifurcation: CAS institutions may dominate technical discussions, while others participate intermittently or focus on broader workforce topics. Recommendations emerging from such bodies may lack legitimacy across the full community because they are not universally applicable.

TXHES could attempt to mitigate this through representation rules or communication strategies, but the structural divide would remain. Governance is possible, but its authority and cohesion are inherently diluted relative to a universal model.

G.5 Governance structures can meaningfully incorporate operational expertise in decision-making	Med

Operational expertise would be strong within the CAS cohort. Those institutions would have direct experience with workflows, verification timelines, evaluator tools, and applicant interactions. However, institutions outside the system would have limited ability to contribute to those discussions, and their operational priorities might differ substantially.

This imbalance creates a representational challenge. Governance decisions might improve CAS functionality while offering little relevance to others, reinforcing disengagement and reducing statewide integration. Therefore, while meaningful operational governance is achievable for participating institutions, it is not uniformly achievable across the state.

G.6 Governance processes can clearly define decision rights, change control mechanisms, and dispute resolution approaches	Low

Within the CAS environment, TXHES can define decision rights and change procedures. Outside it, TXHES has little leverage. If a governance decision creates tension (such as adjustments to timelines, documentation standards, or reporting definitions) non-participating institutions can simply remain unaffected.

This asymmetry weakens the force of governance. Decisions lack statewide reach, and dispute resolution becomes fragmented because parties are not operating under the same framework. In effect, TXHES can govern the system but not the ecosystem. That distinction materially constrains feasibility.

G.7 Governance processes can support transparent decision-making, accountability, and clear communication	Low

Transparency inside the CAS can be strong. TXHES can publish rules, changes, performance metrics, and governance outputs. But statewide transparency becomes harder because applicants encounter multiple pathways and potentially different standards depending on institutional participation.

Even if governance communications are clear, the applicant experience may remain inconsistent. Stakeholders may therefore perceive transparency as incomplete.

Option 4: Data Warehouse

G.1 TXHES has clear and sufficient authority under existing statutes and regulations to implement and govern the option without requiring legislative or regulatory changes	**Low**

Rather than centralizing intake of applications, Option 4 centralizes information about applicants and outcomes through reporting feeds from institutional systems. TXHES would therefore govern data aggregation, normalization, and reporting standards while leaving application submission processes within institutional environments.

From a strict legal standpoint, TXHES likely possesses authority to implement such a model. The agency routinely collects, manages, and reports education data, and nothing in statute prohibits fulfillment of HB 2851 through an approach that emphasizes statewide visibility rather than shared infrastructure.

The governance challenge is one of statutory fidelity rather than legal permissibility. Stakeholders confirmed that the intent of HB 2851, based as it was on Task Force Recommendation 8, included simplification of the applicant journey, reduction of duplicative effort, and greater transparency for prospective students. A reporting warehouse can improve transparency, but it does not create a unified application pathway. Therefore, while TXHES could implement this option within its authority, the option does not align with the overall intent of the legislation.

G.2 Participating institutions can implement and participate in governance of the option within existing legal, accreditation, and institutional governance constraints	**High**

Option 4 creates the least friction with institutional governance because it does not alter admissions operations. Programs continue to set criteria, receive applications, evaluate candidates, and render decisions within their own systems. Accreditation responsibilities and Board of Nursing accountability remain exactly where they sit today.

Because the option does not require workflow changes, institutions face minimal risk of unintentionally transferring authority or appearing to cede control. Participation in governance therefore concerns data definitions, reporting schedules, and validation practices rather than admissions mechanics. This limited scope makes institutional participation straightforward and feasible.

G.3 Clear, enforceable data ownership, access, privacy, and confidentiality frameworks can be established that meet legal, institutional, and stakeholder expectations	**Med**

Under this option, TXHES would have authority over the warehouse once data are submitted, but it would not control upstream collection practices. Institutions would

remain responsible for obtaining applicant consent, managing record accuracy, and securing their own systems prior to transmission.

This arrangement allows TXHES to create strong governance over aggregated datasets (e.g., role-based access, analytic permissions, publication rules) yet limits its ability to guarantee uniformity across the full lifecycle of applicant information. If inconsistencies or disputes arise about what was collected or how it was defined, resolution may require negotiation with individual institutions rather than direct correction within a common platform.

Stakeholders may accept this limitation because institutional control is preserved, but the absence of a single operational environment reduces the strength of enforceability relative to CAS-based options.

G.4 The option can be governed through a shared or advisory model that is viable across institution types, systems, and regions	**Med**

A statewide advisory body can function under Option 4, but its mandate would be significantly narrower. Rather than shaping applicant experience, workflow design, or operational timelines, governance would focus on reporting standards, data elements, quality assurance, and interpretation.

This narrower agenda may reduce conflict, since institutions are not being asked to modify admissions processes. At the same time, it may dampen engagement because the decisions are less central to daily operations. Participation could become episodic, with interest peaking during reporting cycles and declining otherwise. Thus, governance is viable, but its influence and cohesion are more limited than in models where stakeholders share infrastructure.

G.5 Governance structures can meaningfully incorporate operational expertise in decision-making	**Med**

Operational leaders would still contribute valuable insight, particularly regarding how institutional data map to statewide definitions and how reporting timelines interact with admissions calendars. However, because the platform does not shape intake, many operational complexities that animate CAS governance (e.g., document verification, evaluator workflows, communication triggers) fall outside scope.

As a result, governance would rely more heavily on institutional research and data management expertise than on admissions practitioners. Operational input remains important, but its influence is indirect.

G.6 Governance processes can clearly define decision rights, change control mechanisms, and dispute resolution approaches	**Med**

TXHES can define requirements for data submission, file formats, validation procedures, and reporting outputs. Within that domain, decision rights are clear. However, TXHES cannot mandate how institutions structure their admissions systems or internal processes to generate those data.

When disputes occur, they are likely to revolve around feasibility of compliance rather than authority to require reporting. Institutions may argue that local systems cannot produce particular fields without significant cost or redesign. Thus, governance can set expectations, but enforcement leverage is weaker than in a shared platform.

G.7 Governance processes can support transparent decision-making, accountability, and clear communication	**Med**

Option 4 may significantly improve transparency about aggregate demand, capacity, and outcomes. TXHES could publish dashboards, definitions, and performance indicators that illuminate statewide patterns.

However, from an applicant perspective, transparency about how to apply would remain decentralized. Students would still navigate multiple institutional portals, deadlines, and requirements. Governance communication can clarify reporting, but it cannot standardize the lived application experience. Therefore, while accountability for data may improve, accountability for process remains dispersed.

Stakeholder Feasibility Ratings

Comparative ratings across options in the stakeholder domain are presented in the table below, followed by a narrative justification for each criterion rating by option.

Option	1 TexNCAS	2 TXHES CAS	3 Hybrid	4 Data
Domain Score	**18**	**18**	**15**	**15**
Criteria Ratings				
S.1 Delivers clear value to community colleges, universities, private institutions, and programs with varying demand				
S.2 Preserves institutional autonomy over admissions criteria and decision-making				
S.3 Delivers transparency to applicants on seat availability, costs (total cost of attendance, not just tuition), graduation and NCLEX pass rates				
S.4 Minimizes process burden on applicants through redundant data entry, navigation of multiple portals, or complex workflows.				
S.5 Minimizes application fees and related costs to applicants.				
S.6 Maintains access to individualized navigation and advising support				
S.7 Engages stakeholders in all implementation and operational phases				

through small groups, pilots, ongoing feedback loops				

Option1: Vendor-Supported TexNCAS

S.1 Delivers clear value to community colleges, universities, private institutions, and programs with varying demand	Med

Stakeholder discussions consistently return to a pragmatic test: will participation leave institutions and applicants better positioned than they are under the current decentralized environment? Option 1 enters this conversation with an important evidentiary base: many Texas programs already use a CAS. Continued voluntary use suggests that value can be realized under certain conditions. However, stakeholder feedback indicates that value has not been uniform across institution types or applicant populations.

Institutions described benefits similar to those reflected in the prior analysis: expanded applicant reach, standardized presentation of prerequisites and deadlines, and improved visibility into application volume patterns. For programs with limited marketing infrastructure or highly variable demand, a shared channel can meaningfully broaden exposure and reduce staff time spent clarifying requirements.

At the same time, both student respondents and institutional participants identified concerns that temper the conclusion that value is consistently delivered. Students raised issues related to user experience and clarity of requirements. Some programs reported prior participation but transitioned away due to concerns about data accuracy, reporting consistency, or alignment with internal workflows. Other programs noted no issues filling open seats and questioned the value a CAS would deliver to their institution. This feedback suggests that while the model can generate value, it does not do so automatically or evenly across stakeholders. Sustained and broad-based value will depend on how implementation addresses user experience, data integrity, institutional customization needs, and clear communication about benefits relative to cost and process change.

S.2 Preserves institutional autonomy over admissions criteria and decision-making	High

Across all stakeholder conversations, institutional autonomy is the non-negotiable baseline. Programs are accountable to accreditation bodies, governing boards, and the Texas Board of Nursing for who is admitted and under what standards. Any perception that a centralized model substitutes external judgment for institutional authority would immediately undermine stakeholder feasibility.

Option 1 preserves institutional autonomy over admissions. The platform aggregates materials, standardizes presentation, and may facilitate verification, but programs would continue to set prerequisites, determine competitiveness, conduct interviews where applicable, and render final decisions. Current Texas NursingCAS participants provide

proof that this separation between intake and decision authority can function without accreditation conflict.

Stakeholders want explicit affirmation embedded in participation agreements, governance documentation, and ongoing communications that admissions authority remains local. The model can preserve autonomy in both policy and practice through governance and stakeholder structures.

S.3 Delivers transparency to applicants on seat availability, costs (total cost of attendance, not just tuition), graduation and NCLEX pass rates	**High**

The legislative and Task Force record makes clear that transparency is central to the purpose of centralization. Prospective students frequently struggle to compare programs because information is scattered, inconsistently defined, or difficult to locate. A unified platform can standardize how core metrics are presented and thereby reduce reliance on informal or inaccurate sources.

Institutions often support transparency in principle because better-informed applicants are more likely to apply where they are competitive and financially prepared. This can improve both yield and student success. Moreover, many of the data elements referenced (e.g., cost of attendance, completion rates, licensure outcomes) are already reported through other mechanisms. The CAS environment becomes a point of assembly and presentation rather than a novel reporting burden. An agreed set of transparency indicators must be defined but this is a governance issue rather than a feasibility barrier.

S.4 Does not increase process burden on applicants through redundant data entry, navigation of multiple portals, or complex workflows	**Med**

This criterion produces some of the most nuanced stakeholder reactions. On one hand, centralized systems can require comprehensive academic history entry and structured documentation, which may feel more demanding to applicants than simplified program-specific forms. On the other hand, applicants pursuing multiple programs repeat similar data entry across separate portals, each with its own formatting and requirements.

Many stakeholders ultimately frame the issue as consolidation versus duplication. If a single detailed submission replaces several smaller ones, total burden may decline even if individual tasks appear more complex. The judgment therefore depends heavily on execution: clarity of instructions, availability of support resources, and intuitive system design.

S.5 Minimizes application fees and related costs to applicants	**Med**

Fee impact consistently emerges as a priority, particularly for community colleges and institutions serving economically vulnerable populations. Stakeholders worry that layering CAS fees on top of other admissions-related fees could deter otherwise qualified applicants.

At the same time, many programs already use a CAS that involves an applicant fee, demonstrating that a CAS fee is not a barrier for all applicants. In addition, there is broad recognition that any sustained statewide service must have a funding model. The question is how to distribute cost in a manner that is perceived as fair and that aligns with access objectives. Participants frequently mention potential mitigations: fee waivers, institutional sponsorship, sliding scales, or state subsidy mechanisms. TXHES can leverage governance mechanisms to work with programs to develop potential solutions but may need additional policy and/or financial authority to actually implement solutions.

S.6 Maintains access to individualized navigation and advising support	**High**

Institutions emphasize that advising is central to their identity and to student success, particularly for first-generation and nontraditional applicants. Some fear that a centralized interface could distance students from program staff or create the impression that support is automated.

While the transition will require communication strategies to ensure applicants know where to seek help, Option 1 supports continued one-on-one program assistance for applicants through vendor capability to create program-specific landing pages within the platform and links for applicants to request personalized advising and support from individual programs. In addition, many Texas nursing programs use a CAS and maintain individualized applicant support, demonstrating the feasibility of this criterion under a CAS.

S.7 Engages stakeholders in all implementation and operational phases through small groups, pilots, ongoing feedback loops	**High**

Stakeholders consistently request continuing influence over how the system operates, not merely consultation during initial selection. Option 1 is well suited to this expectation because platform configuration, policy development, and release planning can be structured to incorporate stakeholder involvement across implementation and operations. TXHES already incorporates stakeholders similarly in operation of TMDSAS.

Institutions have incentive to participate when they believe governance engagement can shape real outcomes affecting workload, timelines, or applicant experience. Sustaining engagement will require structure and transparency, and stakeholders expressed interest in participating in meaningful roles to design, implement, and ensure successful operation of a CAS.

Option 2: TXHES-Built CAS

S.1 Delivers clear value to community colleges, universities, private institutions, and programs with varying demand	**Med**

Stakeholders generally express conceptual support for a Texas-controlled system. Many see potential value in a platform designed specifically around state program structures, regional workforce needs, and alignment with Texas higher education data practices. A system built by TXHES could, in theory, avoid compromises associated with a vendor-supported CAS and incorporate Texas-specific reporting, terminology, and policy

expectations from the outset. However, the same concerns expressed by students and institutions that yielded a Medium feasibility rating for Option 1 apply to this option as well.

S.2 Preserves institutional autonomy over admissions criteria and decision-making	High

As with Option 1, preservation of academic authority is the essential baseline. Stakeholders would not accept transfer of admissions judgment to a CAS or TXHES.

In a state-built model, TXHES has the ability to codify this boundary clearly within system design. Because the agency controls architecture, it can ensure that tools support program-specific criteria, independent review processes, and locally determined outcomes.

S.3 Delivers transparency to applicants on seat availability, costs (total cost of attendance, not just tuition), graduation and NCLEX pass rates	High

Stakeholders broadly endorse the goal of clearer, standardized information for applicants. A TXHES-built system could integrate existing state reporting streams and definitions, potentially improving consistency across programs. TXHES would have the ability to ensure shared data definitions, timely updates, and understandable presentation to applicants. Because TXHES already maintains relationships with institutions for data submission, there are established administrative pathways for populating transparency elements.

S.4 Does not increase process burden on applicants through redundant data entry, navigation of multiple portals, or complex workflows	Med

Stakeholders expect that a single statewide application could reduce duplication over time. Yet because Option 2 would involve development of a new platform, there would be a period during which processes may be less predictable. Applicants and programs could encounter evolving interfaces, changing requirements, or temporary workarounds as the system matures.

Unlike an established vendor product, there is no operational history to reassure users about stability. Institutions therefore have higher risk of reputational exposure if applicants experience frustration during early cycles.

S.5 Minimizes application fees and related costs to applicants	Med

Many stakeholders see potential advantage in a publicly-owned model. A TXHES-owned and operated system might be able to incorporate legislative appropriations, institutional contributions, or cross-subsidies that reduce direct applicant charges.

However, as with Option 1, until financing mechanisms are defined, stakeholders cannot assume applicants will not shoulder more financial burden. Development and maintenance costs for state systems are substantial and absent external funding they may still land, at least in part, on applicants.

S.6 Maintains access to individualized navigation and advising support	High

As with Option 1, the transition will require communication strategies to ensure applicants know where to seek help. Option 2 can be built to support continued one-on-one program assistance for applicants through creation of mechanisms that link applicants directly to specific programs for personalized advising and support from individual programs.

S.7 Engages stakeholders in all implementation and operational phases through small groups, pilots, ongoing feedback loops	High

A state-built system offers broad opportunity for stakeholder involvement. Institutions can participate in requirements development, user testing, phased rollouts, and continuous improvement. Many stakeholders welcome the chance to shape a Texas solution from inception.

Engagement will require sustained coordination and facilitation by TXHES, but there is little doubt that institutions would participate actively if invited into meaningful roles. Indeed, some may expect deeper involvement than under vendor-managed arrangements.

Option 3: Hybrid

S.1 Delivers clear value to community colleges, universities, private institutions, and programs with varying demand	Med

Option 3 attempts to reconcile two competing stakeholder impulses: interest in the potential efficiencies of centralized intake and desire to preserve institutional choice. Programs that believe they would benefit from shared infrastructure may opt in, while others can remain outside. From an individual institutional perspective, this flexibility can appear attractive.

However, value in a centralized environment is partly collective. Discoverability, comparability, and applicant mobility improve most when participation is broad. If a substantial portion of programs remains outside the system, applicants must still navigate multiple pathways, and institutions may see reduced benefit from being present in the CAS marketplace.

Some stakeholders may still prefer optionality, but they also recognize that diluted participation can weaken the network effects that make centralization powerful. Thus, while value can exist for participating institutions, it may not be uniformly compelling across all types and regions.

S.2 Preserves institutional autonomy over admissions criteria and decision-making	High

Option 3 strongly reassures institutions on autonomy because participation itself is voluntary. Programs that feel uncomfortable with centralized intake retain the ability to continue operating entirely within their own systems. For those that opt in, the same separation between application management and admissions judgment that exists in

Option 1 can apply. In either case, institutions retain ultimate authority both to participate and to define admissions outcomes.

S.3 Delivers transparency to applicants on seat availability, costs (total cost of attendance, not just tuition), graduation and NCLEX pass rates	**Med**

TXHES can build a CAS that provides standardized program information, enhancing visibility into comparative quality for a subset of programs. However, applicants interested in non-participating institutions would still need to locate and interpret information independently.

S.4 Does not increase process burden on applicants through redundant data entry, navigation of multiple portals, or complex workflows	**Low**

For applicants applying exclusively to CAS-participating programs, burden may decrease. For those considering a mix of participating and non-participating programs, complexity may actually increase, as they would manage both centralized and independent applications.

Stakeholders frequently note that many applicants apply broadly to maximize chances of admission. Under Option 3, these students could face parallel processes rather than consolidation.

S.5 Minimizes application fees and related costs to applicants	**Med**

Applicants who use the CAS may experience consolidated pricing structures or benefit from governance-designed waivers. However, those who also apply to non-CAS programs may incur additional fees. In such cases, total cost may not decline and could increase.

S.6 Maintains access to individualized navigation and advising support	**High**

Program-specific advising models can continue under Option 3. TXHES can build a CAS that connects applicants directly to programs for support. Current advising and support models would not change for programs opting out of CAS participation.

S.7 Engages stakeholders in all implementation and operational phases through small groups, pilots, ongoing feedback loops	**Med**

CAS participants would likely engage actively because governance decisions affect their daily operations. Non-participants, however, may see limited relevance and therefore limited reason to invest time in ongoing engagement. This divergence can affect representativeness and continuity. The CAS advisory body might skew toward the interests of participating institutions, reinforcing perceptions of separation, and programs that opt to join the CAS at a later point would miss early opportunities to shape the system. TXHES could attempt to maintain inclusive structures, but motivation between CAS participants and programs that opt out will vary.

Option 4: Data Warehouse

S.1 Delivers clear value to community colleges, universities, private institutions, and programs with varying demand	Med

Option 4 offers institutions value primarily through improved statewide visibility rather than operational efficiency in admissions. Programs may gain access to comparative information about demand patterns, applicant characteristics, and regional trends that can inform planning and resource allocation. For some institutions, particularly those focused on workforce alignment, this information could be meaningful.

However, because the option does not expand applicant reach through a shared intake channel, it does not create the recruitment or discoverability benefits often associated with centralized systems. Institutions would continue to rely on their own marketing and outreach infrastructure. As a result, the perceived return on participation may feel less immediate or less tangible.

S.2 Preserves institutional autonomy over admissions criteria and decision-making	High

Because this model focuses only on data collection rather than shared applicant intake, programs retain complete admissions autonomy.

S.3 Delivers transparency to applicants on seat availability, costs (total cost of attendance, not just tuition), graduation and NCLEX pass rates	Low

Option 4 centralizes reporting, not application processes. While TXHES could assemble program metrics within a statewide warehouse, the model does not control where or how applicants initiate their search, review requirements, or make submission decisions. Applicants would continue to encounter information primarily through institutional websites, marketing materials, and local advising channels. As a result, the warehouse becomes a supplementary reference point rather than the authoritative front door to program comparison.

Because participation in the reporting environment does not replace decentralized recruitment practices, there is no guarantee that applicants will encounter standardized definitions or side-by-side comparability at the moment of choice. Institutions may interpret or present metrics differently in their own materials, update them on different timelines, or emphasize different aspects of program performance. TXHES could publish normalized data, but it cannot ensure that programs present this data or availability of this data to applicants.

The transparency issue is not merely the existence of information but its accessibility, timing, and consistency. A data repository improves statewide analytic visibility, yet it does not fundamentally enhance the applicant's navigation experience. Applicants would still need to move across multiple sites and reconcile potentially conflicting representations.

S.4 Minimizes process burden on applicants through redundant data entry, navigation of multiple portals, or complex workflows	Low

Option 4 does not alter current application process. Applicants desiring to apply to more than one program may still be required to apply multiple times, potentially using multiple systems. Applicant burden does not change compared to the current state.

S.5 Minimizes application fees and related costs to applicants	High

Option 4 does not create new applicant-facing fees. Institutions may continue their current fee structures and TXHES's reporting role can be financed through mechanisms that do not involve applicant payment.

S.6 Maintains access to individualized navigation and advising support	High

Because Option 4 does not modify current application processes, advising relationships remain unchanged. Applicants interact with the same staff, use the same communication channels, and follow the same preparatory guidance structures currently in place.

S.7 Engages stakeholders in all implementation and operational phases through small groups, pilots, ongoing feedback loops	Med

TXHES can create advisory groups around data definitions, reporting cadence, and publication strategies. However, because the model does not reshape daily admissions operations, institutions may perceive participation as less immediately consequential. Engagement may therefore fluctuate, with strong interest during initial setup or major revisions but lighter involvement during routine operations. Sustaining momentum could require deliberate outreach and demonstration of how statewide insights benefit individual programs. Applicants may perceive participation as inconsequential.

Technical Feasibility Ratings

Comparative ratings across options in the technical domain are presented in the table below, followed by a narrative justification for each criterion rating by option.

Option	1 TexNCAS	2 TXHES CAS	3 Hybrid	4 Data
Domain Score	38	36	23	23
Criteria Ratings				
T.1 Ability to identify unique applicants and capture capacity-constrained denials				
T.2 Identify applicants via unique identifiers that can also be transmitted to NPs to follow the applicant through matriculation, and follow-on education history				

T.3 Ability to capture, update, and synchronize open seat status across institutions in a timely and reliable manner.				
T.4 Ability to support analytics related to applicant numbers, duplication rates (ratio of applications to applicants), system wide capacity, and related metrics that State, Nursing Program, and TXHES stakeholders need.				
T.5 Enables state, nursing programs, TXHES to access aggregated national data for benchmarking local applicant and application trends for comparative measures (e.g., demographics, applicant profiles, age mix, gender mix)				
T.6 Enables bi-directional data exchange with institutions' application platforms and related systems				
T.7 Provides role-based access to functions, data, and reporting (applicant, nursing program, evaluator, etc.)				
T.8 Supports efficient operations and application volumes via scalable architecture				
T.9 Ability to support configurable workflows, data fields, and rules without requiring institution-specific custom development.				
T.10 Has auditable change management capabilities				
T.11 Can be implemented within realistic timeframes using identified available resources and technologies				
T.12 Maximizes TXHES control over system architecture, data models, and future enhancements				
T.13 Ability to incorporate varied admissions criteria, prerequisites, and verification requirements				
T.14 Ability to meet all applicable federal and state data privacy, security, compliance requirements.				

Option 1: Vendor-Supported TexNCAS

T.1 Ability to identify unique applicants and capture capacity-constrained denials	**High**

Stakeholder feedback emphasized the need to measure applicants who are deemed qualified for a program but not admitted due to program capacity constraints. A necessary prerequisite for accurate tracking of capacity-constrained denials is the ability to distinguish unique *applicants* from *total number of applications*.

The vendor platform can capture decision outcomes and reasons. Technical discussions with the vendor indicate it is technically feasible to support a data feed interface from programs (e.g. their CRM systems) to TexNCAS for sharing data on qualified applicants denied admission due to capacity constraints. NursingCAS already maintains a single ten-digit identifier that can follow an applicant across multiple program submissions within the platform, demonstrating technical feasibility

The platform has the capability ability to support applicant-level tracking and structured decision and outcome capture, but feasibility also involves consistency of institutional decision coding and statewide data governance to make the capacity-denial measure analytically defensible. This will require a consistent statewide approach to de-duplication (e.g., what identifiers are used for matching, how name changes are handled, and how withdrawn/restarted applications are counted) so TXHES can generate a reliable denominator of unique number of applicants for demand and capacity analyses. TXHES will need to specify required required fields, definitions, and program user training to ensure that nursing programs code denials consistently (e.g., capacity constrained vs. missing prerequisite vs. competitiveness).

T.2 Ability to identify applicants via a unique applicant identifier that can also be transmitted to nursing programs and other authorized users to follow the applicant through his/her enrollment, matriculation, and follow-on education history.	**High**

Option 1 supports unique applicant identifiers that can be transmitted to nursing programs via standard exports and integration feeds, such as those used in existing NursingCAS Application Programming Interfaces (APIs). In practice, this criterion requires that the identifier be stable over time, interpretable by institutions, and consistently used as the key to link downstream events (admission decision, enrollment, matriculation) to the original application record.

Institutions may vary in their ability and willingness to store external identifiers alongside internal SIS identifiers. Survey and stakeholder discussions indicate uneven institutional technical capacity and concern about additional workflow burden. Therefore, feasibility hinges on TXHES implementing a common data dictionary and providing implementation guidance so institutions can map existing identifiers into local systems without creating duplicate identity records. TXHES experience implementing TMDSAS supports feasibility in establishing such institutional mapping and governance requirements for consistent identifier use across participating programs.

T.3 Ability to capture, update, and synchronize open seat status across institutions in a timely and reliable manner.	**High**

The vendor platform can capture seat counts and capacity-related fields but feasibility for this criterion involves more than a field in a system. In practice, it requires (a) a shared

definition of “open seat” (authorized capacity vs. available after offers, waitlist movement), (b) a consistent update cadence, and (c) either workflow enforcement or integration that updates seat status as offers are accepted/declined.

Stakeholder feedback reflects concerns about operational burden and the feasibility of keeping capacity information current across diverse program calendars and admissions processes. Vendor information indicates that configuration can represent seat status, but the timeliness and reliability depend on institutional participation and agreed-upon process rules. This will require TXHES to ensure tight CAS integration to institutional decision making/enrollment workflows (or disciplined manual updates with compliance monitoring) through governance, standardized definitions, and operational processes.

T.4 Ability to support analytics related to applicant numbers, duplication rates (ratio of applications to applicants), system wide capacity, and related metrics that State, nursing program, and TXHES stakeholders need.	**High**

Option 1 is structurally well-positioned to produce applicant volume, duplication rate, and capacity-related analytics because applications are captured in a single data model. In practice, this criterion requires TXHES to define metrics (e.g., applications per applicant, duplicate submissions across institutions, and capacity shortfalls by region/program type) and to ensure all participating programs capture the minimum data elements needed to compute those measures consistently.

Stakeholder feedback repeatedly emphasized the need for statewide transparency into demand and unmet capacity, but also signaled concerns about reporting burden and data interpretation. If programs do not consistently code outcomes (including capacity denials) and update seat status, analytics will exist but will be incomplete. Therefore, feasibility is high for the analytics platform capability, but dependent on governance and adoption to ensure statewide standard definitions and consistent data capture practices so metrics are comparable and defensible.

T.5 Supports ability of State, nursing program and TXHES stakeholders to access aggregated national data for purposes of benchmarking local applicant and application trends for comparative measures such as demographics, applicant profiles, age mix, gender mix, etc.	**High**

Stakeholders and the Task Force report emphasized the value of understanding Texas supply constraints relative to broader trends (demographics, applicant pools, program yield). Option 1 is the only option that offers an immediately available pathway to aggregated national benchmarking and requires comparatively low incremental technical effort. TexNCAS will build on a platform already in operation that supports comparative measures such as applicant demographics and profiles.

In practice, benchmarking requires (a) access to a national reference dataset, (b) harmonized definitions between Texas metrics and vendor metrics, and (c) contractual permission to view and use benchmark outputs. TXHES will need to validate that Texas-specific data collection aligns with the vendor's benchmarking schema and that privacy controls prevent re-identification in small cohorts.

T.6 Enables bi-directional data exchange with institutions' application platforms and related systems	**High**

Option 1 can enable bi-directional exchange through vendor-supported integration patterns (APIs/exports/imports). In practice, this criterion requires institutions to (a) accept inbound CAS data into their workflows and (b) send outbound status updates (decisions, offers, acceptances, enrollment confirmations) back to the CAS to keep records current for applicants and analytics.

Survey and stakeholder discussions indicate variation in institutional IT capacity and tolerance for additional integration work. Where institutions have limited integration capability, bi-directional exchange may degrade to one-way exports or periodic file transfers, reducing timeliness and increasing reconciliation effort. Feasibility is therefore high at the platform level, with caveats that effective bi-directionality will require TXHES to standardize interfaces and provide implementation support through governance structures.

T.7 Provides role-based access to functions, data, and reporting (applicant, nursing program, evaluator, etc.)	**High**

Stakeholder feedback reflects sensitivity around access to applicant information and fairness in evaluation processes. Role-based access controls (RBAC) are a direct technical control to address those concerns. RBAC enable limiting access to applicant data by function (reviewers vs. administrators) and by institutional scope. RBAC are a mature feature of NursingCAS, which supports configurable roles and permissions.

In practice, this criterion also requires consistent role taxonomy, least-privilege defaults, and the ability to audit access for compliance and dispute resolution. Through establishment of role definitions and access governance, TXHES can implement statewide role standards while allowing institutions to assign users locally within those role categories.

T.8 Supports efficient operations and application volumes via scalable architecture	**High**

Option 1 supports scalable operations, as demonstrated by NursingCAS running on a cloud-based architecture (Amazon Web Services; AWS) proven across national nursing admissions cycles. In practice, this criterion requires sufficient performance under peak load, reliable uptime during submission deadlines, and capacity for data retention and reporting without degrading applicant experience.

Stakeholders did not flag system performance as a primary risk; their concerns concentrate on governance, workflow alignment, and institutional burden. That pattern suggests that the technical risk of the platform failing under volume is comparatively low relative to adoption and process risks. TXHES can translate scalability expectations into Service Level Agreements (SLAs) in the vendor contract and monitoring/reporting requirements to ensure performance is contractually enforceable.

T.9 Ability to support configurable workflows, data fields, and rules without requiring institution-specific custom development.	**Med**

Option 1 can support configurable workflows and fields, as demonstrated by NursingCAS configuration capabilities which currently accommodate many common variations across participating programs. However, Texas nursing programs have heterogeneous admissions pathways (different prerequisite structures, document verification practices, interviews, and ranking methods). As a result, there may be edge cases (complex prerequisite equivalencies, specialized verification rules, atypical seat-allocation logic) that could exceed what can be addressed purely through configuration. When that happens, institutions may need manual workarounds or TXHES may need to narrow the required workflow set to what is configurable, trading off flexibility for statewide consistency.

Feasibility depends on TXHES defining a realistic common workflow baseline and identifying which program-specific differences can be supported through configuration versus requiring process changes.

T.10 Has auditable change management capabilities	**Med**

This criterion requires the ability to reconstruct who changed what, when, and why, including program configuration changes (requirements, deadlines), user access changes, and updates to key data elements used in analytics. Option 1 supports auditability through vendor logging and administrative audit trails as demonstrated by the platform's proven auditing and change management functionality.

The constraint for TXHES is reliance on vendor-provided audit artifacts and release processes. Stakeholder concerns about transparency and trust in statewide systems elevate the importance of auditable configuration and change control. TXHES can address feasibility by requiring specific audit reports, change approval workflows, and notice periods through contract and governance processes, but the amount of direct control TXHES will have will remain less than in a state-built system.

T.11 Can be implemented within realistic timeframes using identified available resources and technologies	**High**

Option 1 is the most implementable within realistic timeframes because it leverages a production platform with established onboarding and configuration methods. This criterion requires sequencing participating institutions, configuring Texas-specific data elements, and integrating (or at least exporting) data to meet TXHES reporting needs.

Stakeholder feedback indicates varying readiness and concerns about operational burden. However, those are adoption risks rather than technical (software build) risks. The remaining risks require institutional change management and governance alignment. TXHES can mitigate timeline risk through phased rollout, pilot cohorts, and clear minimum requirements for participation.

T.12 Maximizes TXHES control over system architecture, data models, and future enhancements	**Med**

Option 1 does not maximize TXHES control over architecture, data models, and enhancements because those are primarily determined by the vendor's product roadmap and data schema. This criterion matters for Texas-specific needs that exceed available configuration parameters (e.g., new data structures for statewide longitudinal tracking, specialized analytics constructs, or novel integrations). Feasibility depends on TXHES developing a vendor contract that clearly defines its authority to make system design choices and escalation pathways for instances of disagreement with the vendor.

T.13 Ability to incorporate varied admissions criteria, prerequisites, and verification requirements	**Med**

This criterion requires the system to represent prerequisite verification, document checks, and program-specific ranking rules that adequately account for important program differences. Option 1 can incorporate varied admissions criteria and prerequisites through configurable program settings, supplemental questions, document requirements, and evaluator workflows.

While the platform has the technical ability to support diverse nursing program needs, it may require workarounds for complex rules, such as prerequisite equivalencies and verification requirements which can be very program-specific. Where rules are complex, programs may need manual review steps, which can still be feasible but reduces automation and increases workload. Stakeholder feedback indicates sensitivity to additional administrative burden. TXHES can mitigate this through configuration standards along with support and tools (templates, training), particularly for programs with lower administrative capacity.

T.14 Ability to meet all applicable federal and state data privacy, security, and compliance requirements.	**High**

This criterion requires FERPA-aligned disclosure controls, secure transmission for integrations, role-based restrictions, audit trails, and clear data retention/deletion policies. Option 1 is highly feasible for privacy, security, and compliance because centralized platforms can enforce consistent access controls, logging, and data-handling practices.

Stakeholder concerns about data use and sharing underscore the importance of demonstrable compliance controls and transparency. TXHES can align vendor requirements to Texas expectations through contractual security requirements, audit evidence provisions, and governance oversight. This includes ensuring that vendor controls

map to Texas compliance interpretations and that institutions understand their obligations when using the system.

Option 2: TXHES-Built CAS

T.1 Ability to identify unique applicants and capture capacity-constrained denials	**High**

A TXHES-built CAS can be engineered to identify unique applicants and to capture capacity-constrained denials as a standardized decision outcome at the point of adjudication. A state-built system can enforce required fields and validation rules to ensure capacity denials are captured consistently. Caveats relate to adoption and integration completeness (e.g. institutions reliably providing decision outcomes) rather than technical infeasibility.

T.2 Ability to identify applicants via a unique applicant identifiers that can also be transmitted to nursing programs and other authorized users to follow the applicant through his/her enrollment, matriculation, and follow-on education history.	**High**

Under Option 2, TXHES controls identifier design and thus can define a unique applicant identifier that is purpose-built to follow applicants from application through enrollment/matriculation and potentially into follow-on education history.

Feasibility is primarily contingent on development resource availability, implementation support and institutional adoption rather than technical limitations. For example, institutions differ in their internal identifier practices and technical capacity to store and exchange external IDs. Stakeholder feedback indicates uneven IT capability and limited appetite for complex integration work. To address these concerns, TXHES can provide clear implementation specifications and potentially a lightweight identity services layer to support institutions that cannot easily map IDs.

T.3 Ability to capture, update, and synchronize open seat status across institutions in a timely and reliable manner.	**High**

Option 2 provides the strongest technical pathway to capturing, updating, and synchronizing open seat status because seat management can be designed as a core function (capacity definitions, offer acceptance/decline states, waitlist movement). In a unified platform, synchronization is intrinsic: the system can compute open seats based on standardized state transitions.

In practice, this criterion also requires institutional workflow alignment. If institutions do not use the platform to issue offers and record acceptances, the platform must receive timely updates from institutional systems, creating integration and compliance requirements similar to those raised in stakeholder feedback. Nevertheless, Option 2 can be designed from the ground up for all business rules and validations that improve consistency once institutions participate.

T.4 Ability to support analytics related to applicant numbers, duplication rates (ratio of applications to applicants), system wide capacity, and related metrics that State, nursing program, and TXHES stakeholders need.	**High**

Under Option 2, analytics can be built to specification. TXHES can build in analytics on applicant numbers, duplication, systemwide capacity, and related metrics by designing the event model and reporting schema around TXHES stakeholder needs. In practice, this means implementing standardized event logs (submission, review milestones, decisions, offers, acceptances) and governance-defined metrics.

Stakeholder feedback emphasizes statewide transparency and consistent measurement. However, these concerns relate to disciplined implementation rather than technical possibility. For example, TXHES can build a system that enforces required fields and validation to improve analytic quality. But delivering useful, reliable analytics will require ongoing data governance.

T.5 Supports ability of State, nursing program and TXHES stakeholders to access aggregated national data for purposes of benchmarking local applicant and application trends for comparative measures such as demographics, applicant profiles, age mix, gender mix, etc.	**Low**

Option 2 can support benchmarking for Texas across institutions, regions, program types. But *national* benchmarking requires an external reference dataset. Obtaining national comparative measures would go beyond building a CAS to require data-sharing agreements, participation in multi-state consortia, or vendor partnerships to access aggregated national trends.

Stakeholders value comparative context, but a state-only build does not inherently create access to national benchmarks. TXHES could still benchmark against publicly available datasets where feasible, but those may not provide the same program-level admissions and applicant profile granularity available in vendor ecosystems.

T.6 Enables bi-directional data exchange with institutions' application platforms and related systems	**Med**

Bi-directional exchange is technically achievable under Option 2, but TXHES must integrate with a wide range of institutional platforms (SIS/CRMs, transcript ingestion, testing) and support error handling, reconciliation, and monitoring.

Stakeholder feedback reflects uneven institutional technical capacity, suggesting that building and sustaining integrations will be resource intensive and may require multiple integration patterns (APIs for mature institutions; secure file transfer for others). Achieving statewide bi-directionality therefore depends on substantial technical development and implementation resources and potentially phased adoption. The capability can be built, but real-world feasibility is constrained by integration scale, variability, and ongoing maintenance demands.

T.7 Provides role-based access to functions, data, and reporting (applicant, nursing program, evaluator, etc.)	High

Option 2 can implement role-based access controls (RBAC) in a way that aligns precisely with TXHES policy and institutional responsibilities, including least-privilege defaults, separation of duties, and periodic access review workflows. In practice, this supports compliance expectations and stakeholder concerns about data access and fairness.

Because TXHES controls the design, it can standardize roles across institutions while allowing local user assignment. This reduces variability and supports auditability compared to fragmented models. The main feasibility dependency is requirements definition and governance to keep role taxonomy stable over time.

T.8 Supports efficient operations and application volumes via scalable architecture	High

Option 2 can support scalable architecture by adopting cloud-native design, autoscaling, and load-testing aligned to Texas peak cycles. In practice, this requires engineering and operational maturity (monitoring, incident response, performance tuning) that a vendor platform already has. Option 2 would have the benefit of being architected for scalability by the University of Texas Health at Houston's IT department, which has experience in deploying enterprise scale systems, including cloud-based deployments.

Stakeholders did not surface performance as the primary risk. However, the feasibility risk for Option 2 is that Texas must build and prove scalability rather than inherit it. That introduces schedule and resource availability risk to meet implementation timelines, especially if scalability engineering competes with feature development.

T.9 Ability to support configurable workflows, data fields, and rules without requiring institution-specific custom development.	Med

TXHES can build a robust configuration layer (workflows, data fields, rule engines) capable of representing institutional diversity without institution-specific code. In practice, program variation and edge cases can drive pressure for institution-specific custom development.

TXHES would need to define a configurable baseline and decide which differences are supported via configuration versus requiring process standardization. Building broad configurability can be done, but it expands scope and can threaten timelines.

T.10 Has auditable change management capabilities	High

Option 2 can deliver strong auditable change management because TXHES can mandate software development lifecycle (SDLC) controls (versioning, change approvals, regression testing evidence, release windows) and embed administrative audit logs. TXHES can establish change governance and sustain it over time, as demonstrated by its experience with TMDSAS.

T.11 Can be implemented within realistic timeframes using identified available resources and technologies	Low

Custom system development typically requires extended phases for requirements, development and build, integrations, security certification, system documentation, training, pilots, and rollout. Readiness to implement a state-built CAS on a timeframe aligned with HB 2851 is unlikely.

Stakeholder feedback reflects urgency for improvements but also sensitivity to institutional burden. Long timelines risk losing stakeholder momentum and increasing parallel-process complexity. A phased approach can mitigate these concerns, but integration and configurability scope remain time drivers.

T.12 Maximizes TXHES control over system architecture, data models, and future enhancements	High

Option 2 maximizes TXHES control over architecture, data models, and enhancements because TXHES owns the system and can prioritize changes based on Texas policy and reporting needs. This is a technical advantage for long-term adaptability.

The tradeoff is technical responsibility: TXHES must develop and (in conjunction with UT of Houston) manage enhancements, modernization, security updates, and integration evolution. Stakeholder expectations for continued improvement would need to be matched by a sustainable technical operating model. However, these concerns relate to funding and operational limitations rather than technical limitations.

T.13 Ability to incorporate varied admissions criteria, prerequisites, and verification requirements	High

Option 2 can incorporate varied admissions criteria, prerequisites, and verification requirements by TXHES designing modular data models and rule engines tailored to Texas nursing program variation. This requires detailed requirements elicitation across program types and careful governance to prevent uncontrolled scope expansion.

A custom system can reduce manual work by embedding verification logic. Prerequisites and verification rules can be structured and standardized sufficiently to be encoded. Where programs require nuanced equivalency decisions, the system can be built to support manual workflows while still producing standardized data for analytics. The detailed requirements management and phased approach to complex rule implementation necessary to make the system effective are governance and operational issues rathe than technical ones.

T.14 Ability to meet all applicable federal and state data privacy, security, and compliance requirements.	High

Option 2 can be designed to meet applicable privacy, security, and compliance requirements by embedding FERPA-aligned access controls, secure data transmission, audit logging, and retention policies from inception. This includes producing audit evidence

and maintaining compliance over time. Option 2 has the advantage of being deployed through UT Houston, which has experience in deploying and operating HIPAA compliant systems, with a level of security compliance beyond those in FERPA.

The feasibility dependency is sustained cybersecurity capacity. TXHES and UT Houston must maintain security operations, address vulnerabilities, and evolve controls as standards change. A state-built system can meet these requirements, but it must budget for ongoing compliance activities rather than treating security as a one-time implementation task. However, these are governance, operational, and financial issues, not a lack of technical feasibility.

Option 3: Hybrid

T.1 Ability to identify unique applicants and capture capacity-constrained denials	**Med**

Option 3's multi-platform design makes unique applicant identification inherently harder because applicants may appear in multiple systems with different identifier schemas. This option requires cross-platform identity reconciliation (e.g., matching rules, probabilistic matching), creating technical complexity.

Capacity-constrained denial data is less reliable because denial outcomes and reason codes vary by platform and by institutional process. Stakeholder feedback highlights the need for consistent measurement of capacity denials. Under Option 3, TXHES would have limited ability to enforce consistent capture by non-participating programs. Thus this option creates persistent risks of undercounting, mismatching, and inconsistent denial categorization.

T.2 Ability to identify applicants via a unique applicant identifiers that can also be transmitted to nursing programs and other authorized users to follow the applicant through his/her enrollment, matriculation, and follow-on education history.	**Med**

Option 3 lacks a single statewide identifier that follows an applicant across systems and into education history. A statewide ID under this option would require an overlay identity service and institutional adoption of that service. Given stakeholder concerns about burden and uneven IT capacity, implementing and sustaining cross-platform identity reconciliation is a major feasibility risk. Even small reconciliation error rates can materially distort duplication metrics and longitudinal tracking.

T.3 Ability to capture, update, and synchronize open seat status across institutions in a timely and reliable manner.	**Low**

Synchronizing open seat status across institutions is least feasible under Option 3 because seat status would be maintained separately within multiple systems and institutional workflows. Synchronization requires a single authoritative transaction system or tightly governed, near real-time integrations across all systems.

Stakeholders expressed concerns about the practicality of timely seat updates. Multiplying platforms increases coordination and timeliness challenges. The result is likely periodic reporting rather than reliable synchronization.

T.4 Ability to support analytics related to applicant numbers, duplication rates (ratio of applications to applicants), system wide capacity, and related metrics that State, nursing program, and TXHES stakeholders need.	**Med**

Option 3 can produce desired analytics only by aggregating feeds across the CAS and the heterogeneous systems of those nursing programs opting to not use the CAS. This requires harmonizing a range of definitions (applicant, application, denial reasons, seat status) and resolving timing gaps and missing data.

Stakeholder interest in duplication and capacity metrics is high, but under Option 3, the metrics produced would be less defensible due to inconsistent schemas and incomplete capture. Considerable data normalization and reconciliation would be required and even then residual inconsistency is likely to remain.

T.5 Supports ability of State, nursing program and TXHES stakeholders to access aggregated national data for purposes of benchmarking local applicant and application trends for comparative measures such as demographics, applicant profiles, age mix, gender mix, etc.	**Low**

Option 3 can support benchmarking for Texas (across institutions, regions, program types), but *national* benchmarking requires an external reference dataset. Obtaining national comparative measures would require TXHES to develop data-sharing agreements, participate in multi-state consortia, or partner with CAS vendors to access aggregated national trends.

Stakeholders value comparative context, but a state-only build does not inherently create access to national benchmarks. TXHES could still benchmark against publicly available datasets where feasible, but those may not provide the same program-level admissions and applicant profile granularity available in vendor ecosystems.

T.6 Enables bi-directional data exchange with institutions' application platforms and related systems	**Low**

Bi-directional exchange under Option 3 multiplies integration points. This increases interface management, monitoring, and error reconciliation complexity. Stakeholder feedback about limited institutional IT capacity implies that many institutions would struggle with multi-platform integration, leading to uneven implementation and reduced data timeliness.

T.7 Provides role-based access to functions, data, and reporting (applicant, nursing program, evaluator, etc.)	**Med**

Role-based access exists within each platform, but TXHES would have limited ability to standardize roles and permissions across platforms for those nursing programs not opting to use the state-built CAS. Consistent RBAC across the ecosystem would potentially separate identity/access management overlays. Given stakeholder concerns about data access and trust, inconsistent RBAC practices could become a barrier. RBAC can exist on the CAS but would not be uniform statewide.

T.8 Supports efficient operations and application volumes via scalable architecture	**Med**

Scalability in Option 3 depends on the capacity of each non-participating program's platform. TXHES cannot manage performance holistically and bottlenecks may arise in aggregation layers for those nursing programs not opting to use the CAS (with potential impacts on ETL and reporting throughput). Because the architecture is fragmented in Option 3 (some programs on CAS, some only reporting data), even if each platform scales, statewide reporting and analytics may lag due to data collection and normalization pipelines.

T.9 Ability to support configurable workflows, data fields, and rules without requiring institution-specific custom development.	**Med**

Option 3 achieves some configurability feasibility by decentralization rather than configuration within a unified system. Option 3 preserves institutional workflows by allowing programs to remain on their preferred platforms and configure their own workflows, data fields, and rules as desired. However, preserving heterogeneous workflows reduces the ability to standardize data and synchronize capacity signals.

T.10 Has auditable change management capabilities	**Low**

Auditable change management becomes difficult because changes occur independently across multiple platforms and institutional processes for those programs that opt out of the state-built CAS. TXHES would need to obtain audit artifacts from multiple schools and reconcile them, often with differing log formats and retention policies.

T.11 Can be implemented within realistic timeframes using identified available resources and technologies	**Low**

Option 3 shares the feasibility risks of Option 2 with the additional risk associated with designing data interfaces for those programs not opting to use the state-built platform. Implementation within realistic timeframes, in alignment with HB 2851 intent, is unlikely. It requires building two systems (CAS and reporting warehouse), increasing development time and implementation risk.

T.12 Maximizes TXHES control over system architecture, data models, and future enhancements	**Low**

Option 3 provides limited to no TXHES control for those programs that opt out of the state-built CAS. TXHES can influence opt out programs only through separate contracts and governance mechanisms. This constraint directly affects Texas-specific enhancement

needs (analytics, capacity tracking). Without a single architecture under TXHES control, TXHES cannot centrally direct technical evolution of the overall system.

T.13 Ability to incorporate varied admissions criteria, prerequisites, and verification requirements	**High**

Option 3 incorporates varied program requirements because opt-out institutions retain their own criteria and workflows within their chosen platforms, while the CAS can be built to accommodate the varied requirements of opt-in programs. The tradeoff is reduced standardization for analytics and capacity tracking. Nevertheless, Option 3 achieves high feasibility because institutional variety is preserved.

T.14 Ability to meet all applicable federal and state data privacy, security, and compliance requirements.	**Med**

Compliance under Option 3 is feasible but more complex because privacy and security controls vary by platform and institutional process. While each non-participating program's platform may be FERPA-capable, TXHES must oversee multiple security postures, contracts, and audit evidence streams.

Option 4: Data Warehouse

T.1 Ability to identify unique applicants and capture capacity-constrained denials	**Med**

Option 4 relies on reporting feeds rather than transaction-level application processing. Identifying unique applicants and capturing capacity-constrained denials requires institutions to submit standardized applicant identifiers and standardized decision/denial reason data to the warehouse.

Stakeholder feedback indicates variability in current reporting practices. Without a centralized workflow to enforce required fields, capacity denials may not be captured consistently. The data warehouse can store and analyze the data provided, but feasibility depends on institutional reporting discipline and standardization that stakeholders flag as challenging. TXHES would need strong reporting standards, validation checks, and compliance monitoring.

T.2 Ability to identify applicants via a unique applicant identifiers that can also be transmitted to nursing programs and other authorized users to follow the applicant through his/her enrollment, matriculation, and follow-on education history.	**Low**

Transmitting unique applicant identifiers under Option 4 depends on institutions agreeing on (or adopting) a common identifier schema and including that identifier in reporting feeds. In practice, this requires a statewide identity standard and potentially an identity reconciliation service to avoid duplicates. Consistent statewide implementation is not automatic and is logistically difficult. Given institutional variation in systems and practices, achieving consistent identifier transmission is feasible but requires technical support.

Without it, longitudinal linkage (enrollment/matriculation/follow-on history) will be incomplete or inconsistent.

T.3 Ability to capture, update, and synchronize open seat status across institutions in a timely and reliable manner.	**Low**

Option 4 can capture and update seat status through voluntary periodic reporting, but timely, reliable synchronization is constrained because seat status remains managed locally. Timeliness would be bounded by program capability to meet (and compliance with) necessary reporting cadences rather than automatically captured within a unified system. Reliability would depend on program capability and willingness to implement standardized data elements and require TXHES validation of institutional submissions.

T.4 Ability to support analytics related to applicant numbers, duplication rates (ratio of applications to applicants), system wide capacity, and related metrics that State, nursing program, and TXHES stakeholders need	**Low**

Option 4 can support analytics on applicant numbers, duplication, and capacity constraints if institutions submit standardized data elements. However, issues around data completeness, consistent definitions, and TXHES ability to validate and reconcile discrepancies across institutions outside of a unified system reduce feasibility.

T.5 Supports ability of State, nursing program and TXHES stakeholders to access aggregated national data for purposes of benchmarking local applicant and application trends for comparative measures such as demographics, applicant profiles, age mix, gender mix, etc.	**Low**

Just as for Option 3, Option 4 can support benchmarking primarily within Texas and against external public datasets where available. It does not inherently provide access to aggregated national admissions benchmarking comparable to a vendor ecosystem. TXHES could negotiate access to external benchmark datasets or use published comparators, but those may not align with the same granularity (application-level trends, admissions outcomes).

T.6 Enables bi-directional data exchange with institutions' application platforms and related systems	**Low**

Option 4 does not exchange data with institutions' application platforms in timely, actionable fashion in order to drive workflow. Exchange is solely oriented to reporting and analytics. Institutions' ability to provide data feeds varies. Stakeholder feedback suggests capacity constraints for new reporting requirements, which can limit timeliness and completeness of exchange. Data exchange is feasible for reporting but does not achieve workflow-level bi-directionality envisioned by HB 2851 and the Task Force report.

T.7 Provides role-based access to functions, data, and reporting (applicant, nursing program, evaluator, etc.)	**Med**

Option 4 can provide role-based access within TXHES-controlled reporting environments (warehouse access, reporting dashboards) to support segmentation by user type (TXHES, institution, evaluator) and align with privacy controls. However the administration needed to keep track of provisioning user accounts for data feeds and profiles for online dashboard users increases complexity.

T.8 Supports efficient operations and application volumes via scalable architecture	**Med**

Option 4 scales well for reporting workloads, but as it is not a transaction-processing CAS, scalability relates to ingestion volume, storage, and analytics query performance rather than applicant-facing operations. If reporting ingestion is timely and standardized, the warehouse can support high volumes; however, scalability does not address applicant-facing peak-cycle workloads because those remain in institutional systems.

T.9 Ability to support configurable workflows, data fields, and rules without requiring institution-specific custom development.	**Low**

Option 4 avoids institution-specific custom development for workflows because institutions keep their own admissions systems and processes. The main technical work is building standardized reporting feeds rather than reengineering workflows. However, the lack of a unified workflow limits TXHES's ability to standardize data capture without imposing reporting standards that may still require local system modifications.

T.10 Has auditable change management capabilities	**Med**

Option 4 can support auditable change management within the warehouse (ETL versioning, schema change logs, dashboard version control) but auditable statewide change management is limited because upstream institutional system changes can alter data meaning without centralized visibility. TXHES would have no mechansim to detect and manage upstream changes (e.g., changes in local coding of denial reasons) and to maintain versioned data dictionaries.

T.11 Can be implemented within realistic timeframes using identified available resources and technologies	**Med**

Implementing Option 4 within realistic timeframes is more feasible than building a full CAS because the primary deliverable is a reporting warehouse and standardized data feeds. The critical path is onboarding institutions to provide consistent data extracts and validating those feeds.

Stakeholder feedback suggests variability in institutional capacity to implement new reporting requirements, which can stretch timelines. A phased rollout (core fields first) can improve feasibility but institutional feed development and compliance monitoring still drive schedule risk

T..12 Maximizes TXHES control over system architecture, data models, and future enhancements	**Med**

Option 4 provides TXHES control over the reporting architecture and data model within the warehouse, but not over upstream data from admissions platforms, data capture practices, or workflow changes at institutions. This partial control can still be valuable for analytics evolution, but it limits TXHES's ability to enforce end-to-end data integrity or to implement workflow-level enhancements.

T.13 Ability to incorporate varied admissions criteria, prerequisites, and verification requirements	**High**

Option 4 can incorporate varied admissions criteria and prerequisites because institutions continue to operate their own admissions criteria and verification processes. The warehouse collects standardized summary fields while allowing institutions to preserve differences. The trade-off is that richer analytics on prerequisites/verification may be limited unless institutions agree to report detailed, standardized prerequisite and verification elements.

T.14 Ability to meet all applicable federal and state data privacy, security, and compliance requirements.	**Med**

Option 4 can meet privacy, security, and compliance requirements for the TXHES reporting environment through FERPA-aligned controls, RBAC, encryption, and audit logging. The warehouse can be designed to align to privacy principles reflected in TMDSAS FERPA guidance. However, the broader compliance challenge is ensuring that data transmitted from institutions is handled consistently, transmitted securely, and that sharing/reporting outputs do not enable re-identification in small cohorts. In addition, there is a larger set of data interfaces that need to be secured.

Operational Feasibility Ratings

Comparative ratings across options in the operational domain are presented in the table below, followed by a narrative justification for each criterion rating by option.

Option	1 TexNCAS	2 TXHES CAS	3 Hybrid	4 Data
Domain Score	**20**	**14**	**10**	**11**
Criteria Ratings				
O.1 Ability to operate across varied admissions models, timelines, and program pathways (BSN, ABSN, RN-to-BSN, ADN, graduate programs) while minimizing impact on institutional cycles.				
O.2 Ability to support program-specific admissions requirements and workflows with minimal need for workarounds				

O.3 Delivers a common applicant-facing process that also accommodates individual program variation and branding				
O.4 Minimizes workflow complexity and the need for manual workload for admissions staff, registrars, and committees				
O.5 Offers support for training, onboarding, and user assistance				
O.6 Can be implemented within a reasonable timeframe and in phases based on institution readiness and program type				
O.7 Minimizes complexity in workflows requiring supplemental student application systems or parallel systems.				
O.8 Minimizes the effort required to reconcile CAS-verified data with institutional prerequisite, eligibility, and admissions requirements				

Option 1: Vendor-Supported TexNCAS

O.1 Ability to operate across varied admissions models, timelines, and program pathways (BSN, ABSN, RN-to-BSN, and graduate programs) while minimizing impact on institutional cycles	**High**

This criterion requires the platform to accommodate rolling, cohort-based, and competitive admissions models; varied prerequisite structures; and program-specific application windows without forcing institutions to restructure their calendars. Option 1 can operate across varied admissions models, timelines, and program pathways, as demonstrated by the fact that NursingCAS already supports BSN, ABSN, RN-to-BSN, and ADN pathways across its national user base. Approximately 30 Texas BSN programs currently use NursingCAS, providing an established operational baseline. Vendor information indicates that the platform supports configurable application windows and program-level settings that can align with institutional cycles.

O.2 Ability to support program-specific admissions requirements and workflows with minimal need for workarounds	**Med**

Option 1 supports program-specific admissions requirements through the vendor's administration portal, configurable program settings, supplemental questions, evaluator workflows, and document requirements. Current Texas NursingCAS users have demonstrated program-level configuration within the platform. However, variation in prerequisites, ranking methods, interview processes, and committee-based decision-making may exceed what is configurable without informal workarounds.

Stakeholders expressed concern that centralized platforms and services can be overly rigid and insufficiently adaptable to program-specific realities, including the inability to deactivate irrelevant application sections, tailor instructions, or fully align system features

with institutional practices. Several programs described prior experiences in which CAS limitations required supplemental processes or manual adjustments outside the platform. While the NursingCAS platform can accommodate many common variations, edge cases involving complex prerequisite equivalencies, specialized verification rules, or atypical seat-allocation logic may require manual workarounds or process standardization.

The platform supports program-specific configuration for common admissions requirements, but the breadth of Texas program variation means that some institutions will require workarounds for complex or non-standard workflows. This will require TXHES to establish a realistic common baseline and provide support for programs with lower administrative capacity.

O.3 Delivers a common applicant-facing process that also accommodates individual program variation and branding	**High**

Option 1 delivers a common applicant-facing process through an applicant portal which provides a standardized interface for submitting demographics, academic history, work experience, and program-specific materials. The platform also supports program-level branding, messaging, and requirements surfacing so that applicants can see program-specific information within a consistent navigation structure.

Stakeholder and applicant feedback reinforces the value of a common entry point that reduces fragmentation and applicant confusion. At the same time, stakeholders cautioned that the common process must not obscure important program-specific differences (e.g., admissions criteria, costs, clinical requirements) or eliminate the personalized navigation and advising support that institutions currently provide, particularly for first-generation and non-traditional students. The vendor's platform accommodates individual program variation through configurable home pages and program-specific content areas, which is a demonstrated capability in current Texas program deployments.

O.4 Minimizes workflow complexity and the need for manual workload for admissions staff, registrars, and committees	**Med**

Option 1 can reduce workflow complexity and manual workload for admissions staff by centralizing document collection, transcript management, applicant tracking, and routine communications within a single platform. The vendor's portal automates key admissions workflows including document management and evaluations, reducing the volume of manual tasks associated with paper-based or fragmented institutional processes. Stakeholders described how a CAS can shift time-intensive manual tasks away from institutional staff and into a centralized system.

While the platform reduces many categories of manual work (document collection, transcript follow-up, applicant communication), it introduces new operational tasks (data reconciliation, dual-system coordination) that prevent a fully net-positive workload assessment without strong integration and governance. For example, some programs may need to maintain a separate institutional system for supplemental materials, prerequisite

evaluation, or downstream matriculation processing face dual-system environments. This could create additional staff work. Additionally, stakeholders reported that CAS-verified data does not always align with program-specific eligibility interpretations, requiring manual reconciliation. The net effect on workload therefore depends on how comprehensively the platform covers each program's requirements and how well integration with institutional systems is implemented.

O.5 Offers support for training, onboarding, and user assistance	**High**

Option 1 provides mature training, onboarding, and user assistance model through the vendor's dedicated client service teams, structured onboarding processes, and ongoing support resources. Initial discussions with the vendor indicate availability of technical support during business hours for institutions and applicants, organized webinars for new participating programs, and topic-specific training sessions. Applicant-facing support includes help centers, live chat, email and telephone assistance, and instructional videos.

O.6 Can be implemented within a reasonable timeframe and in phases based on institutional readiness and program type	**High**

Option 1 is implementable within a reasonable timeframe because it leverages an existing production platform with established onboarding and configuration methods. The platform supports phased implementation approaches, and approximately half of Texas BSN programs already have operational familiarity with NursingCAS. Option 1's reliance on configuration and onboarding rather than custom development minimizes the technical path to go-live.

O.7 Minimizes complexity in workflows requiring supplemental student application systems or parallel systems	**Med**

Option 1 can reduce reliance on supplemental applications by collecting both common and program-specific information within the CAS platform, including supplemental questions, documents, and evaluator materials. However, institutions noted that maintaining multiple systems requires significant coordination across departments for data reconciliation and application processing. Some programs may need to maintain institutional systems for functions not covered by the CAS (e.g., background checks, Board of Nursing roster submissions, institution-specific interview scheduling), creating ongoing operational complexity even with a centralized platform.

O.8 Minimizes the effort required to reconcile CAS-verified data with institutional prerequisite, eligibility, and admissions requirements	**Med**

Option 1 supports reconciliation of CAS-verified data with institutional eligibility and prerequisite requirements through the portal's reporting and data management tools. Texas programs currently using NursingCAS demonstrate this workflow operationally. However, while NursingCAS verification addresses transcript completeness and GPA calculations, it does not always confirm whether an applicant meets program-specific prerequisite interpretations, equivalency decisions, or specialized eligibility criteria.

Stakeholder feedback emphasized that verification within a centralized service does not always indicate that institutional prerequisites are met, and that institutions must still perform their own evaluation of prerequisite completion, course equivalencies, and eligibility determinations. Several stakeholders described instances in which CAS-confirmed data created downstream surprises during institutional review, requiring additional manual effort. The operational burden of reconciliation is proportional to the complexity and specificity of each program's prerequisite requirements: Programs with straightforward criteria will experience less friction than those with complex equivalency rules.

Option 2: TXHES-Built CAS

O.1 Ability to operate across varied admissions models, timelines, and program pathways (BSN, ABSN, RN-to-BSN, and graduate programs) while minimizing impact on institutional cycles	**Med**

A state-built TexNCAS can be designed to operate across varied admissions models, timelines, and program pathways by incorporating configurable application windows, program-type distinctions, and pathway-specific data elements from the outset. This requires TXHES to elicit and encode the full diversity of Texas nursing program admissions practices during requirements definition, a significant undertaking given the breadth of institutional models spanning universities, community colleges, health-related institutions, and private institutions.

Stakeholder feedback indicates that Texas nursing programs vary widely in application cycles, prerequisites, and admissions models (e.g., competitive, priority, rolling). Programs have developed tailored workflows over time, and application portals are often planned years in advance. Building a system that accommodates this diversity without forcing programs to restructure their calendars requires extensive requirements gathering and iterative refinement, which adds development time and increases the risk of initial-release gaps that may disrupt institutional cycles during early adoption phases.

O.2 Ability to support program-specific admissions requirements and workflows with minimal need for workarounds	**Med**

Option 2 provides TXHES with the ability to design and embed program-specific admissions requirements directly into the system architecture. In theory, a state-built system can accommodate program variation more precisely than a vendor platform because TXHES controls the data model, rule engine, and workflow configuration. In practice, this requires exhaustive requirements elicitation across program types and careful governance to prevent uncontrolled scope expansion during development.

Stakeholder feedback underscores wide variability in admissions practices, prerequisite structures, and verification requirements across Texas nursing programs. Building a configuration layer broad enough to support this diversity without institution-specific custom development is a material engineering challenge. Where program requirements are

complex or unusual, the system may need to support manual review steps or phased feature releases, which function as operational workarounds during the maturation period. The feasibility constraint is not the system design only but the development scope and discipline required to realize it.

O.3 Delivers a common applicant-facing process that also accommodates individual program variation and branding	**Med**

Option 2 can deliver a common applicant-facing process with program variation and branding by designing a unified applicant portal with configurable program-level content areas, application sections, and branding elements. Because TXHES controls the system design, the applicant experience can be purpose-built for Texas nursing applicants and tailored to Texas-specific navigation needs.

However, designing and building an effective applicant-facing interface requires user experience research, iterative design, accessibility compliance (e.g., WCAG standards), and extensive testing with real applicant populations. Until the system is mature, the common applicant experience may lack the polish, intuitiveness, and comprehensive program-level content that applicants expect. Stakeholder feedback emphasizes that applicants, particularly first-generation and non-traditional students, need clear, intuitive processes with accessible support; a new system must earn applicant confidence during its early adoption period.

O.4 Minimizes workflow complexity and the need for manual workload for admissions staff, registrars, and committees	**Med**

Option 2 can minimize workflow complexity once the system reaches operational maturity by embedding automation for document collection, applicant tracking, verification workflows, and communication management. TXHES can draw on TMDSAS operational experience, which demonstrates proven models for high-volume application processing, batch editing, color-coded verification status, and liaison-based review workflows.

However, the development and adoption period introduces substantial operational burden. Institutions must participate in requirements gathering, testing, and training; staff must learn new workflows; and early releases may require manual workarounds for features not yet implemented. Stakeholder feedback highlights sensitivity to operational disruption and concern about the burden of transitioning from mature institutional processes to a new system. The net effect on workflow complexity is positive in the long term but negative during the transition period, which may extend over multiple admissions cycles.

O.5 Offers support for training, onboarding, and user assistance	**Low**

Option 2 requires TXHES to build a training, onboarding, and user assistance capability from the ground up. While TXHES has operational experience supporting TMDSAS member institutions, the scope and scale of supporting up to 238 nursing programs, along with tens of thousands of applicants, represents a materially different operational challenge.

TMDSAS currently supports approximately 30 medical, dental, and veterinary programs with a small TXHES team. Nursing application volumes are projected at two to three times current TMDSAS levels.

Stakeholder feedback emphasizes the importance of strong training and ongoing support for successful adoption, including dedicated staff training (especially for admissions coordinators), clear timelines, and proactive communication. Applicant-facing support (help centers, live chat, instructional materials) must also be developed and staffed. Building this infrastructure requires staffing, documentation, training content, and support technology that must be operational before the system launches. The absence of an established, comparably-scaled support model represents a significant operational risk during early implementation phases.

O.6 Can be implemented within a reasonable timeframe and in phases based on institutional readiness and program type	**Low**

Option 2 can be implemented in phases, but carries schedule risk because it requires full custom development including requirements definition, system design, build, integration, security certification, documentation, training, pilot testing, and phased rollout. Even a pilot launch in the near-term is unlikely and may require go-live with a more limited feature set than what NursingCAS provides today, followed by iterative expansion over subsequent years.

Stakeholder feedback consistently emphasized that implementation must be phased and that multi-year timelines are realistic and necessary. However, stakeholders also flagged that institutional technology approval processes can take up to 12 months and that application cycles are planned years in advance. Under Option 2, the critical path includes not only software development but also the organizational capacity of TXHES and UTHealth Houston to manage concurrent development, testing, institutional onboarding, and operational support.

O.7 Minimizes complexity in workflows requiring supplemental student application systems or parallel systems	**Med**

Option 2 can be designed to minimize the need for supplemental systems by embedding program-specific data collection, document management, and verification workflows into the core platform. Because TXHES controls the system design, functions that might require separate institutional systems under other options (e.g., background check workflows, Board of Nursing compliance fields) can potentially be built into the centralized platform over time.

However, during the development and maturation period, institutions will likely need to maintain existing systems in parallel with TexNCAS. Features that are not yet built, tested, or configured will require workarounds in institutional systems. Stakeholders have described mature, long-standing systems for managing background checks, transcript processing, applicant ranking, and holistic admissions review; the transition period in

which both systems operate simultaneously represents a peak of operational complexity. The degree to which parallel systems are minimized depends on how comprehensive the state-built platform becomes over successive releases.

O.8 Minimizes the effort required to reconcile CAS-verified data with institutional prerequisite, eligibility, and admissions requirements	**Med**

Option 2 can embed verification logic, prerequisite rules, and eligibility checks directly into the system, which theoretically reduces reconciliation effort because verification definitions can be aligned to institutional requirements from the outset. TXHES can draw on TMDSAS experience, which includes a proven two-level academic review process (summary and course-by-course verification) with batch editing and color-coded status tracking.

However, encoding the full range of prerequisite interpretations and equivalency rules across Texas nursing programs is a major requirements and configuration challenge. Programs with complex or nuanced equivalency decisions (e.g., whether a specific chemistry course satisfies a biology requirement) will still require manual review workflows even within a purpose-built system. Stakeholder feedback indicates that prerequisite verification is one of the most operationally intensive aspects of nursing admissions and that any system must support institutional judgment rather than replace it entirely.

Option 3: Hybrid

O.1 Ability to operate across varied admissions models, timelines, and program pathways (BSN, ABSN, RN-to-BSN, and graduate programs) while minimizing impact on institutional cycles	**Med**

Option 3 can accommodate varied admissions models because programs that opt to use the CAS receive the same pathway and timeline support as in Option 2, while programs that opt out retain their existing admissions systems and cycles without disruption. In this sense, institutional cycles are preserved for opt-out programs by design.

However, the hybrid model creates an operationally fragmented environment. Programs on the CAS operate under one set of processes and timelines, while opt-out programs operate under their own. Coordinating statewide admissions visibility, reporting cadence, and applicant redirection across this fragmented landscape is operationally complex and may create confusion for applicants navigating programs with different application processes. The operational burden of maintaining statewide coherence across two operational models falls on TXHES.

O.2 Ability to support program-specific admissions requirements and workflows with minimal need for workarounds	**Med**

Option 3 supports program-specific requirements in two different ways. Programs on the CAS receive configurable workflow support similar to Option 2, while opt-out programs retain their existing institutional workflows without any external system imposing

constraints. For opt-out programs, no workarounds are needed because no new system is introduced for application processing.

The limitation is that opt-out programs must still submit standardized data to the central reporting database, which will likely require them to create data extraction and formatting processes that do not exist today. For programs on the centralized platform, the same configuration and workaround risks described under Option 2 apply.

O.3 Delivers a common applicant-facing process that also accommodates individual program variation and branding	**Low**

Option 3 does not deliver a common applicant-facing process because applicants encounter different systems, interfaces, and requirements in applying to programs on the CAS versus to opt-out programs. This fragmentation is inherent to the hybrid design: the opt-out provision means that there is no single point of entry or consistent navigation experience for applicants seeking to compare and apply to nursing programs across the state. This increases the procedural complexity that HB 2851 and the Task Force seek to reduce. The absence of a common process also limits TXHES's ability to present statewide seat availability, program information, and application status in a unified, transparent manner.

O.4 Minimizes workflow complexity and the need for manual workload for admissions staff, registrars, and committees	**Low**

Option 3 creates the most complex operational environment because it requires TXHES to manage two parallel operating models simultaneously. Opt-out programs must develop and maintain data feeds to the central reporting database, which introduces new reporting workload without corresponding automation benefits for admissions operations.

For programs on the CAS, the same workflow complexity considerations described under Option 2 apply. For TXHES, the operational burden of monitoring, validating, and reconciling data from multiple sources - with different schemas, reporting cadences, and quality levels - is significantly greater than managing a single platform. Stakeholders noted that institutional IT capacity varies widely. Requiring opt-out programs to build data interfaces and maintain reporting compliance adds a workload category that does not exist under Options 1 or 2. The estimated additional development timeline of seven to eight months for data interface development reflects this complexity.

O.5 Offers support for training, onboarding, and user assistance	**Low**

Option 3 fragments the training and support model. Programs on the CAS would receive training and onboarding support from TXHES (similar to Option 2). However, opt-out programs would instead need support for data interface development, reporting compliance, and data formatting, a different type of support that requires different expertise (data engineering and ETL rather than admissions workflow configuration).

The result is two distinct support tracks that TXHES must staff and manage: one for CAS users and one for data submitters.

O.6 Can be implemented within a reasonable timeframe and in phases based on institutional readiness and program type	**Low**

Option 3 combines the development timeline challenges of Option 2 with the additional complexity of building and validating data interfaces for opt-out programs. The estimated timeline adds seven to eight months beyond the Option 2 system launch for data interface development, testing, and reconciliation processes. Managing a statewide implementation that includes both platform adoption and data feed onboarding across potentially 238 programs introduces significant coordination and change management complexity.

Stakeholder feedback consistently emphasized phased, deliberate implementation and multi-year timelines. Under Option 3, phasing must account not only for institutional readiness to adopt the centralized platform but also for institutional capacity to build and maintain data feeds. TXHES must communicate and support two different participation models simultaneously, increasing the risk of confusion and uneven progress.

O.7 Minimizes complexity in workflows requiring supplemental student application systems or parallel systems	**Med**

For programs participating in the CAS, feasibility considerations under Option 3 mirror those described under Option 2. Opt-out programs experience no change to their current systems.

O.8 Minimizes the effort required to reconcile CAS-verified data with institutional prerequisite, eligibility, and admissions requirements	**Low**

Option 3 presents the most challenging data reconciliation environment because data arrives from two fundamentally different sources: verified application data from the CAS and reported summary data from opt-out programs' heterogeneous systems. Reconciling these different data types, schemas, and quality levels into a coherent statewide picture requires extensive normalization, validation, and exception handling by TXHES.

For programs on the CAS, prerequisite reconciliation follows the same pattern as for Option 2. For opt-out programs, there is no centralized verification at all; data accuracy depends entirely on institutional reporting discipline. TXHES has limited ability to enforce data quality standards on opt-out programs beyond reporting requirements, and stakeholder feedback indicates variability in institutional capacity to produce consistent, standardized data. The resulting reconciliation burden is the highest across all options.

Option 4: Data Warehouse

O.1 Ability to operate across varied admissions models, timelines, and program pathways (BSN, ABSN, RN-to-BSN, and graduate programs) while minimizing impact on institutional cycles	**Med**

Option 4 preserves existing institutional admissions operations by not introducing a centralized application platform. Programs retain their current admissions models, timelines, and pathway structures without any system-imposed changes. In this narrow sense, institutional cycles are not impacted because no new application system is introduced.

However, Option 4 requires all programs to submit standardized reporting data to a central warehouse, which introduces new data preparation, extraction, and submission processes that add to institutional workload. The reporting requirements may need to align with specific cadences (e.g., weekly or monthly submissions), which could create operational friction for programs whose admissions timelines do not align with warehouse reporting windows. New reporting burdens likely vary in impact across institution types.

O.2 Ability to support program-specific admissions requirements and workflows with minimal need for workarounds	**Low**

Option 4 does not create conditions under which workflow support would be tested because no centralized service exists. The broader operational objectives of HB 2851 (e.g., statewide applicant identification, capacity tracking, and data standardization) are not advanced through workflow automation or process alignment. Institutions must still develop new data feeds and reporting processes to support the data warehouse, which introduces operational burden without corresponding workflow improvement.

O.3 Delivers a common applicant-facing process that also accommodates individual program variation and branding	**Low**

Option 4 does not deliver a common applicant-facing process because there is no centralized application platform. Each institution continues to operate its own application system, and applicants must navigate multiple institutional portals, websites, and processes to identify, compare, and apply to nursing programs across the state. There is no unified entry point, no standardized application format, and no common mechanism for presenting program information, seat availability, or admissions criteria. Option 4 preserves current fragmentation and does not advance applicant-facing operational objectives.

O.4 Minimizes workflow complexity and the need for manual workload for admissions staff, registrars, and committees	**Low**

Option 4 does not reduce workflow complexity or manual workload for admissions staff because no centralized automation, document management, or workflow tools are provided. Institutions continue to manage all application processing, transcript handling, verification, and communication through their existing systems. The option provides no mechanism for shifting manual tasks to a centralized service.

Additionally, Option 4 introduces new reporting and data submission requirements that add workload. Institutions must develop data extraction processes, format data to warehouse specifications, and submit data on defined cadences. Stakeholder feedback

indicates that institutional IT capacity varies significantly, and programs with limited technical resources may face disproportionate burden in building and maintaining data feeds. The net operational effect is increased workload without corresponding automation benefits.

O.5 Offers support for training, onboarding, and user assistance	**Low**

Option 4 does not provide a centralized application system and therefore does not offer system-level training, onboarding, or applicant assistance. TXHES would need to provide guidance and support for data feed development and reporting compliance, but this is a narrow, technically oriented support function.

Applicants receive no benefit from this option in terms of centralized help resources, navigation support, or standardized guidance. All applicant support remains with individual institutions, preserving the current variability in support quality and availability.

O.6 Can be implemented within a reasonable timeframe and in phases based on institutional readiness and program type	**Med**

Option 4 is more implementable than Options 2 or 3 because the primary deliverable is a reporting warehouse and standardized data feeds rather than a full application system. However, onboarding up to 238 programs to provide consistent data extracts is a substantial operational undertaking that can stretch timelines, particularly for programs with limited IT capacity.

Stakeholder feedback suggests variability in institutional capacity to implement new reporting requirements. Phased rollout (core fields first, with expanded reporting over time) can improve feasibility. However, the same institutional IT security reviews and approval processes that affect other options apply to data feed implementations as well, potentially extending timelines at individual institutions.

O.7 Minimizes complexity in workflows requiring supplemental student application systems or parallel systems	**Med**

Option 4 does not introduce a centralized application system and therefore does not create a parallel application platform that institutions must manage alongside their own systems. Institutions continue to operate their existing admissions systems without the dual-system burden that stakeholders identified as a primary concern under CAS-based options.

However, institutions must build and maintain data feed processes alongside their existing operations, which introduces a different type of parallel operational requirement (data reporting rather than application processing). This is less operationally disruptive than maintaining two application systems but still represents an additional process that institutions must manage and staff. The degree of complexity depends on institutional technical capacity and the sophistication of the required data feeds.

O.8 Minimizes the effort required to reconcile CAS-verified data with institutional prerequisite, eligibility, and admissions requirements	Low

Option 4 does not provide centralized verification of applicant data. All transcript processing, prerequisite evaluation, eligibility determination, and admissions review remain fully within institutional systems and processes. Because no CAS verification occurs, there is no externally verified data to reconcile, but there is also no reduction in the manual verification effort that institutions currently bear.

From a statewide perspective, the absence of centralized verification means that data quality in the warehouse depends entirely on institutional reporting discipline and consistency. TXHES would need to implement validation rules, exception handling, and feedback loops to ensure that reported data is accurate and comparable across institutions.

Financial Feasibility Ratings

Comparative ratings across options in the financial domain are presented in the table below, followed by a narrative justification for each criterion rating by option.

Option	1 TexNCAS	2 TXHES CAS	3 Hybrid	4 Data
Domain Score	**22**	**18**	**11**	**16**
Criteria Ratings				
F.1 Maximizes affordability of initial development, integration, and launch costs				
F.2 Minimizes extent to which costs change as the system scales (ie, from pilot to all BSN programs to broader program inclusion)				
F.3 Has predictable, sustainable cost structure for ongoing operating, maintenance, support, and enhancements				
F.4 Minimizes the impact of fees and related costs on applicants				
F.5 Extent to which costs are equitably distributed and aligned with ability to pay and commensurate with anticipated benefits (e.g., small vs. large institutions)				
F.6 Minimizes direct financial costs to institutions and nursing programs, including system fees, subscription charges, per-application costs, and implementation expenses, particularly for small programs and financially-constrained institutions				

F.7 Minimizes net change in institutional administrative costs, accounting for both efficiencies and new workload				
F.8 Minimizes exposure to pricing escalation, transaction-based fees, and long-term vendor lock-in				
F.9 Extent to which the cost structure reasonably supports HB 2851 goals (e.g., identifying unmet demand, improving seat utilization)				

Option 1: Vendor-Supported TexNCAS

F.1 Maximizes affordability of initial development, integration, and launch costs	**High**

Option 1 offers the most affordable initial cost profile of the four options because it leverages an existing CAS platform through configuration rather than custom development. Implementation fees are limited to $375,000 (based on vendor discussion and draft contract terms as of the end of February 2026). This low initial investment is achievable because the core application platform, hosting infrastructure, and baseline integration patterns already exist and do not need to be built. The initial investment is directed toward Texas-specific configuration, stakeholder coordination, and pilot onboarding rather than software engineering.

F.2 Minimizes extent to which costs change as the system scales (i.e., from pilot to all BSN programs to broader program inclusion)	**High**

Option 1's cost structure scales predictably because the vendor's platform is designed to onboard additional programs through configuration rather than custom development. As participation expands from a pilot cohort to statewide adoption, the primary cost drivers are TXHES operational staff (which grow incrementally with program count) and the per-applicant fee model, which scales linearly with volume. Initial vendor information shows that cost structures are designed to scale predictably as participation expands.

Existing budget estimates show that development and configuration costs are concentrated in 2026, with little or no planned additional configuration or development expenditure projected for 2027 and beyond. Ongoing TXHES operational costs (salaries, fringes, operational expenses) increase modestly year over year due to merit increases and program growth.

F.3 Has predictable, sustainable cost structure for ongoing operating, maintenance, support, and enhancements	**Med**

Option 1's ongoing cost structure has both predictable and uncertain components. On the predictable side, TXHES operational expenses (staff salaries, operational costs) are modeled through standard merit increases and operational growth. However, additional enhancements beyond the initial implementation investment are not currently defined and would be specified in the future by TXHES (developed in collaboration with participating

programs and the advisory group) and be addressed via statements of work under the vendor contract.

The draft vendor contract as of late February 2026 introduces financial uncertainties that affect long-term predictability. The draft contract requires TXHES to increase applicant fees annually by the amount of inflation or 5%, whichever is larger, creating an embedded escalation mechanism that will vary based on whether inflation exceeds 5%. The vendor retains 90% of net applicant fees in Year 1, declining to 80% in Year 2 and 70% in Year 3, but subsequent-year terms are not specified in the draft contract, creating uncertainty about the long-term revenue-sharing arrangement. Finally, as mentioned above, there is the uncertainty in years beyond 2026 if TXHES requires custom modifications, which would be priced on a per-instance statement of work basis.

F.4 Minimizes the impact of fees and related costs on applicants, particularly first-generation and financially constrained students	**Med**

Option 1 assumes a $100 per-applicant fee for RN to BSN, BSN, and APRN and other graduate nursing programs. This same base fee is assumed across all CAS-based options (Options 1, 2, and 3). Unlike Options 2 and 3, Option 1 also allows for a $50 applicant fee for LVN and ADN programs. The draft vendor contract includes an annual escalation provision (inflation or 5%, whichever is larger), but it is important to note that Options 2 and 3 would also face upward fee pressure over time as TXHES seeks to close operating deficits to cover development and implementation costs. In any CAS-based model, applicant fees are the primary revenue mechanism, and fiscal sustainability will require periodic fee adjustments regardless of whether the platform is vendor-operated or state-built.

Stakeholders identified cost as a dominant concern and indicated that prior use of NursingCAS was associated with declines in applicant numbers, which they attributed in part to the cumulative effect of application fees layered on top of secondary applications, exams, screenings, and program entry costs. First-generation and Pell-eligible students were identified as particularly affected by these financial barriers. However, the per-applicant fee level and the existence of applicant-borne costs are common to all CAS-based options, and the distinction between Option 1 and Options 2–3 on this criterion is one of contractual mechanism rather than fundamental cost difference. In addition, as mentioned above, Option 1 allows for a reduced applicant fee for LVN and ADN programs.

F.5 Extent to which costs are equitably distributed and aligned with ability to pay and commensurate with anticipated benefits (e.g., small vs. large institutions)	**Med**

Option 1's cost distribution is structured around a per-applicant fee model with no institution-level fees. This means that the direct financial cost to institutions is limited to staff time for adoption, training, and workflow integration. For the approximately 30 Texas nursing programs already using NursingCAS, transition costs should be modest. For programs currently using other platforms, transition costs are higher but still primarily reflect staff effort rather than direct financial outlay.

The revenue-sharing arrangement with the vendor envisioned in the current draft contract, however, means that a substantial portion of applicant fee revenue flows to the vendor rather than back to TXHES or participating institutions. In Year 1, 90% of net applicant fees are retained by the vendor, declining to 70% by Year 3. This structure limits the funds available to TXHES for subsidizing smaller programs, funding fee waivers, or investing in equity-oriented support. Additionally, a uniform per-applicant fee does not account for variation in institutional capacity or the benefits each institution derives from the centralized service.

F.6 Minimizes direct financial costs to institutions and nursing programs, including system fees, subscription charges, per-application costs, and implementation expenses, particularly for small programs and financially-constrained institutions	**High**

Option 1 imposes no direct system fees, subscription charges, or per-application costs on institutions under current assumptions. The draft vendor contract structures revenue collection entirely through applicant fees, with institutions neither paying platform access fees nor per-application charges. Direct institutional costs are limited to staff time for onboarding, training, and workflow adaptation.

For the approximately 30 Texas nursing programs already participating in NursingCAS, the transition should involve minimal additional institutional cost because their staff are already familiar with the platform and existing integrations remain in place. For programs not currently on NursingCAS, onboarding costs to implement TexNCAS are primarily staff time for training and workflow adjustment rather than technology procurement or licensing. The vendor provides structured onboarding, training webinars, and ongoing user support as part of the service agreement, further reducing institutional financial burden.

F.7 Minimizes fees and related costs (including transitionary costs) and net change in institutional administrative costs, accounting for both efficiencies and new workload	**Med**

Option 1 offers the most favorable transition profile for a significant portion of Texas nursing programs. Approximately 30 programs already use NursingCAS, which means their staff are trained, their workflows are adapted, and their integrations are in place. For these programs, the transition to a Texas-configured TexNCAS involves incremental changes rather than wholesale migration. For programs not currently on NursingCAS, transition costs are primarily staff-related (training, workflow redesign) rather than technology procurement.

The net change in institutional administrative costs depends on the balance between centralized efficiencies (reduced document collection burden, consolidated applicant tracking, standardized communications) and new workload (reconciling CAS-verified data with institutional requirements, managing dual-system workflows for supplemental materials). Stakeholder feedback indicates that this balance is uncertain: some programs

expect net efficiency gains while others anticipate increased workload, particularly for programs with established, well-functioning internal systems.

F.8 Minimizes exposure to pricing escalation, transaction-based fees, and long-term vendor lock-in	Med

Option 1 includes contractual provisions that create pricing and vendor dependency exposure. The draft vendor contract requires TXHES to increase applicant fees annually by the amount of inflation or 5%, whichever is larger, and the revenue-sharing structure allocates 90% of net applicant fees to the vendor in Year 1, 80% in Year 2, and 70% in Year 3, with subsequent terms subject to negotiation.

However, it is important to recognize that vendor and technology lock-in risks are not unique to the outsourced model. Options 2 and 3, while state-owned, depend on commercial cloud hosting (e.g., AWS, Azure), database platforms (e.g., SQL Server), and middleware and integration tools that carry their own licensing fees, renewal terms, and pricing dynamics. Cloud hosting costs have demonstrated meaningful year-over-year increases, and enterprise database licensing is subject to vendor pricing strategies that are outside TXHES's control. Migrating from one cloud provider or database platform to another involves substantial re-engineering costs that constitute a form of technology lock-in comparable in nature, if different in structure, to the vendor dependency in Option 1.

The key distinction is that Option 1's lock-in is concentrated in a single vendor relationship with explicit contractual escalation terms, whereas Options 2 and 3 distribute their lock-in across multiple technology vendors with less transparent but still material pricing exposure. The net effect is that all CAS-based options carry meaningful lock-in risk, with Option 1's risk being more visible and contractually defined.

F.9 Extent to which the cost structure reasonably supports HB 2851 goals (e.g., identifying unmet demand, improving seat utilization)	High

Option 1's cost structure is most directly aligned with HB 2851 objectives because it delivers a statewide CAS with unique applicant identification, seat status tracking, and statewide analytics at the lowest total cost among the CAS-based options.

The per-applicant revenue model creates a financial alignment between system usage and cost recovery. As more applicants use the system, revenue increases proportionally. This self-funding characteristic supports long-term sustainability of the capabilities HB 2851 envisions. The platform's ability to deliver national benchmarking data, unique applicant tracking, and timely seat status (all core HB 2851 objectives) is achievable within the modeled cost structure.

Option 2: TXHES-Built CAS

F.1 Maximizes affordability of initial development, integration, and launch costs	Low

Option 2 requires a much higher initial technology investment relative to Option 1, with total development costs estimated at approximately $2 million across 2026 and 2027. These costs include development labor and infrastructure. The development labor estimate reflects the cost of contract developers, business analysts, QA/test engineers, project management, integration architecture, and UT Health Houston IT support needed to design, build, and deploy a custom CAS for nursing programs from the ground up.

While a state-built system offers long-term advantages in control and flexibility, the upfront financial commitment is significantly more than that of Option 1 and represents a significant appropriation requirement for TXHES in the near term. Stakeholder feedback and budget discussions indicate that these development resources must compete with other TXHES and UTHealth Houston IT priorities, which may further constrain availability.

F.2 Minimizes extent to which costs change as the system scales (i.e., from pilot to all BSN programs to broader program inclusion)	**Med**

Option 2's costs are concentrated upfront but scaling introduces incremental risks. Development costs are completed in Year 1, but ongoing operations and maintenance are estimated at approximately $300,000 annually for system infrastructure, with TXHES operational staff costs growing as programs are added. Scaling as programs are added may require additional development investment for new workflows, integration patterns, and configurable features not anticipated in the initial build.

Budget estimates do not explicitly model the cost of onboarding additional program types beyond the initial scope, and stakeholder feedback suggests that admissions pathway diversity will require iterative system enhancements. These enhancements would be funded through TXHES operational budgets rather than through a vendor relationship, providing cost control but also requiring sustained appropriations.

F.3 Has predictable, sustainable cost structure for ongoing operating, maintenance, support, and enhancements	**Med**

Option 2's ongoing costs are under TXHES control, which provides predictability in the sense that TXHES can prioritize spending. Total annual operating costs are estimated at approximately $1.30 million in Years 2 through 5, encompassing TXHES staff ($600,000–$655,000 in salaries plus fringes), operational expenses ($180,000), and system maintenance and support ($300,000) annually for cloud hosting, licensing, and maintenance contracts).

The sustainability risk is that TXHES must fund all system maintenance, security updates, cloud hosting, and enhancements from its own budget or through applicant fee revenue. Budget projections show a persistent deficit (expenses exceeding revenue) across all five years, with the gap narrowing but not closing. Enhancement costs for new features, additional integrations, or evolving compliance requirements are not explicitly modeled and would represent incremental budget pressure.

F.4 Minimizes the impact of fees and related costs on applicants, particularly first-generation and financially constrained students	Med

Option 2 assumes a $100 per-applicant fee, consistent with the revenue model used across all CAS options (with the exception of $50 applicant fees for ADN/LVN programs in Option 1). However, because TXHES would own the system, it retains full discretion over fee levels, fee waiver policies, and the pace and magnitude of any fee adjustments. There is no contractual requirement to increase fees annually, and TXHES could structure fee schedules to minimize impact on vulnerable populations.

The risk is that the persistent operating deficit (expenses exceeding revenue across all modeled years) may create pressure to increase applicant fees over time. Budget projections show a five-year net deficit of approximately $3.3 million, which TXHES must fund through appropriations or fee adjustments. Nevertheless, the absence of a vendor-imposed escalation mechanism gives TXHES substantially more flexibility to protect applicant affordability.

F.5 Extent to which costs are equitably distributed and aligned with ability to pay and commensurate with anticipated benefits (e.g., small vs. large institutions)	Med

Option 2 provides TXHES with the greatest flexibility to design an equitable cost distribution model because it controls both the fee structure and the allocation of resources. Development costs are borne by TXHES, which insulates individual institutions from upfront technology investment. Ongoing costs can be distributed through applicant fees, institutional participation fees, or a combination, with TXHES retaining discretion over tiered pricing or fee waivers for smaller or financially constrained programs.

The risk to equitable distribution is that all institutions face a comparable adoption and integration burden regardless of size or current system maturity. Stakeholder feedback indicates that institutions with mature existing platforms may perceive the transition as an inequitable burden that does not deliver proportional benefit. TXHES would need to actively manage equity concerns through governance and support structures.

F.6 Minimizes direct financial costs to institutions and nursing programs, including system fees, subscription charges, per-application costs, and implementation expenses, particularly for small programs and financially-constrained institutions	Med

Similar to Option 1, Option 2 does not impose direct system fees or subscription charges on institutions under current budget assumptions. Development and operational costs are borne by TXHES. However, institutions face indirect costs associated with integration (connecting institutional SIS/CRM systems to TexNCAS), training (staff preparation for new workflows), and transition (moving from existing application processes to the new platform).

These indirect costs are higher than in Option 1 because the platform is new and institutional staff have no prior experience with it. Unlike NursingCAS, which approximately 30 Texas programs already use, a state-built CAS would require all programs to learn an entirely new system. Institutions would also need to invest in integration development if they wish to achieve bi-directional data exchange with the new platform.

F.7 Minimizes fees and related costs (including transitionary costs) and net change in institutional administrative costs, accounting for both efficiencies and new workload	**Med**

Option 2 requires all programs to transition to an entirely new platform, creating uniform transition costs across the state. No programs have prior experience with an Option 2 platform, so training, workflow adaptation, and integration development must occur for every participant. Efficiency gains from centralization (reduced manual document processing, standardized applicant tracking) are achievable but will take time to materialize as staff become proficient with the new system.

The net change in institutional administrative costs mirrors the pattern described for Option 1, with the key difference that no existing user base benefits from prior experience. Transition costs are therefore higher on average across the participating program population than under Option 1.

F.8 Minimizes exposure to pricing escalation, transaction-based fees, and long-term vendor lock-in	**High**

Option 2 minimizes exposure to pricing escalation and vendor lock-in because TXHES owns the system and controls all cost elements. There are no vendor subscription fees, transaction-based charges, or contractually mandated fee increases. Cost growth is driven by standard factors (salary increases, infrastructure costs, enhancement needs) that TXHES can manage through budgeting and prioritization.

The absence of vendor dependency means TXHES can modify, enhance, or replace any system component without contractual constraints or vendor approval. While individual technology vendors (cloud hosting, licensing) exist, these represent competitive markets where TXHES can renegotiate or switch providers. The primary financial risk is sustained appropriation requirements rather than vendor-imposed pricing.

F.9 Extent to which the cost structure reasonably supports HB 2851 goals (e.g., identifying unmet demand, improving seat utilization)	**Med**

Option 2's cost structure can support HB 2851 goals because a state-built CAS can deliver unique applicant tracking, seat utilization, and statewide analytics. However, the five-year total expense of approximately $8 million against the same $5 million in projected revenue yields a net deficit of approximately $3 million, significantly more than the deficit of Option 1.

The higher cost is primarily attributable to the development investment required to build capabilities that already exist in the NursingCAS platform that can in turn be leveraged in Option 1. While the state-built Option 2 system offers advantages in long-term control and customization, the cost-to-benefit ratio for HB 2851 objectives is less favorable than Option 1, and the longer implementation timeline delays the realization of policy benefits.

Option 3: Hybrid

F.1 Maximizes affordability of initial development, integration, and launch costs	**Low**

Option 3 carries the highest initial development cost of all options at approximately $3.3 million, driven by the dual-track requirement to build both a centralized CAS (comparable to Option 2) and a data interface framework for programs that opt out of the central platform. Development alone is estimated at $3 million, with infrastructure costs of $360,000, and development extends into a third year (2028), with approximately $450,000 in additional costs for Phase 2 data interface development.

The Phase 2 component introduces costs that do not exist in other options: designing, building, and testing standardized data feeds for institutions that choose to remain on their own application platforms. This dual-track approach not only increases the initial cost envelope but also introduces greater schedule and budget risk, as TXHES must manage two parallel workstreams with different institutional dependencies.

F.2 Minimizes extent to which costs change as the system scales (i.e., from pilot to all BSN programs to broader program inclusion)	**Low**

Option 3 has the least predictable scaling cost profile because expansion from pilot to statewide adoption involves two distinct growth paths: onboarding programs to the CAS platform and onboarding programs to the data interface framework. The budget reflects this through additional TXHES staffing for Phase 2 data interface support, adding 1 FTE in 2028, growing to 2 FTEs by 2029, with associated salary and fringe costs escalating to approximately $120,000 annually by 2031.

Each opt-out nursing school program that joins through the data interface path introduces unique integration costs depending on that institution's existing systems and data formats. Unlike Options 1 and 2, where scaling follows a single onboarding model, Option 3's dual-track approach creates structural cost unpredictability because the proportion of programs choosing each path cannot be predetermined.

F.3 Has predictable, sustainable cost structure for ongoing operating, maintenance, support, and enhancements	**Low**

Option 3 has the least predictable ongoing cost structure because it combines the maintenance costs of a state-built CAS platform with the incremental costs of supporting data interfaces for opt-out nursing school programs. Total annual expenses are approximately $1.4 million in 2029 and beyond, but these estimates assume a fixed number of opt-out programs and stable data interface complexity.

The ongoing cost of maintaining heterogeneous data interfaces is difficult to predict because each institutional system may change independently, requiring TXHES to update, troubleshoot, and revalidate feeds on an ongoing basis. The revenue–expense gap is the largest among all options, with a projected five-year net deficit of approximately $5 million, indicating that the cost structure is not self-sustaining under current assumptions.

F.4 Minimizes the impact of fees and related costs on applicants, particularly first-generation and financially constrained students	**Med**

Option 3's impact on applicants varies by participation path. Applicants applying through the CAS would face a fee structure similar to Option 2, with TXHES retaining control over fee levels. Applicants applying to programs that opt out of the central platform would apply through those institutions' existing processes and would not face a centralized application fee.

This bifurcation creates an equity consideration. Applicants to CAS-participating programs bear a fee that applicants to opt-out programs do not. However, all applicants lose the benefit of a single, unified application experience, and applicants who apply across both CAS and non-CAS programs may face a combination of centralized and institutional fees.

F.5 Extent to which costs are equitably distributed and aligned with ability to pay and commensurate with anticipated benefits (e.g., small vs. large institutions)	**Low**

Option 3 creates a structurally inequitable cost distribution by establishing two participation paths with different cost profiles. Programs that opt into the central CAS platform bear the costs of adoption and integration associated with a new centralized system. Programs that opt out must develop and maintain data feeds to the TXHES reporting database at their own expense. In either case, institutions bear costs, but the nature and magnitude of those costs differ by path, and neither path is clearly more or less burdensome for smaller versus larger programs.

The opt-out path may disproportionately burden smaller programs with limited IT capacity because data feed development requires technical resources that smaller institutions may not have in-house. Conversely, larger programs with mature existing systems may prefer the opt-out path specifically to avoid the cost and disruption of CAS adoption, creating a dynamic where participation path correlates with institutional resources rather than policy objectives.

F.6 Minimizes direct financial costs to institutions and nursing programs, including system fees, subscription charges, per-application costs, and implementation expenses, particularly for small programs and financially-constrained institutions	**Low**

Option 3 introduces direct costs for institutions on both participation paths. Programs opting into the central CAS platform face the same transition costs as Option 2 (learning a new system, integrating institutional platforms, adapting workflows). Programs opting out

of the central platform must develop and maintain standardized data feeds at their own expense, which requires institutional IT investment in data extraction, formatting, and transmission infrastructure.

This is the only option in which institutions face mandatory technology development costs regardless of participation path. Opt-out programs cannot avoid the financial burden of data feed development, and smaller programs or community colleges with limited IT budgets may find these costs particularly difficult to absorb. Stakeholder feedback indicates that institutions have already invested significantly in their existing systems, and the requirement to build new data interfaces on top of those investments compounds the financial concern.

F.7 Minimizes fees and related costs (including transitionary costs) and net change in institutional administrative costs, accounting for both efficiencies and new workload	**Low**

Option 3 creates transition costs on both participation paths without providing clear offsetting efficiencies for either. Programs opting into the CAS face the same full transition as Option 2. Programs opting out avoid CAS adoption costs but must invest in data feed development, testing, and ongoing maintenance, which represents a net increase in administrative burden with no corresponding workflow efficiency gain.

The opt-out path is particularly problematic from a cost-efficiency perspective. Institutions expend resources to build reporting infrastructure that serves statewide policy objectives but does not improve their own admissions operations. Stakeholder feedback about protecting investments in existing systems is directly relevant here, as opt-out programs must add a new reporting layer on top of systems they have already invested in building and maintaining.

F.8 Minimizes exposure to pricing escalation, transaction-based fees, and long-term vendor lock-in	**Med**

Option 3 presents a mixed exposure profile. The state-built CAS component is under TXHES control, offering the same vendor independence as Option 2 for that portion of the system. However, programs that opt out may continue using third-party application platforms (e.g., NursingCAS, Slate) with their own pricing models, escalation terms, and contractual constraints. TXHES has limited ability to influence the costs those institutions face for their chosen platforms.

Additionally, the data interface framework may require integration with vendor-operated systems, creating indirect vendor dependencies. While TXHES controls the reporting warehouse, the quality and timeliness of data flowing into it depends on institutional systems that may be subject to vendor pricing and contractual limitations.

F.9 Extent to which the cost structure reasonably supports HB 2851 goals (e.g., identifying unmet demand, improving seat utilization)	**Low**

Option 3 has the weakest cost-to-benefit alignment with HB 2851 goals among the CAS-based options. The five-year total expense of approximately $9.8 million, the highest of all options, is accompanied by $4.8 million in projected revenue, yielding a net deficit of approximately $5.0 million. At the same time, the opt-out provision structurally compromises the completeness of statewide data on unique applicants, seat utilization, and capacity-constrained denials.

In effect, TXHES would be investing the most while receiving incomplete data and fragmented participation. The additional costs of Phase 2 development and ongoing data interface support do not deliver proportionally better HB 2851 outcomes; rather, they are spent accommodating institutional preferences that reduce the system's ability to fulfill core policy objectives.

Option 4: Data Warehouse

F.1 Maximizes affordability of initial development, integration, and launch costs	**Med**

Option 4's initial development costs are estimated at approximately $1.4 million, which is lower than Options 2 and 3 but higher than the currently-estimated costs of deploying Option 1. Development labor ($1.1 million) and infrastructure ($175,000) reflect the work required to design and build a statewide reporting warehouse, standardized data feeds, and reporting dashboards. The scope is narrower than a full CAS build because Option 4 does not include applicant-facing application functionality.

While more affordable than a full CAS, the initial cost must be evaluated in light of the more limited functionality delivered. Option 4 produces a reporting and analytics capability but does not deliver the centralized application service that is the primary mechanism contemplated by HB 2851 and the Task Force.

F.2 Minimizes extent to which costs change as the system scales (i.e., from pilot to all BSN programs to broader program inclusion)	**Med**

Option 4's scaling costs are moderate because the reporting warehouse itself scales well with additional data volume, but each new institutional data feed represents an incremental integration effort. TXHES operational staffing is modeled at 50% of Option 2 levels, reflecting the reduced scope of a reporting-only solution. Ongoing operations and maintenance are estimated at approximately $150,000 annually (using a 50% factor applied to Option 2 infrastructure costs).

Scaling risk is primarily driven by the number and complexity of institutional data feeds that must be developed, validated, and maintained. As more institutions are onboarded, the cumulative cost of feed management increases, though at a rate lower than full CAS integration.

F.3 Has predictable, sustainable cost structure for ongoing operating, maintenance, support, and enhancements	**Med**

Option 4 has the lowest ongoing operational costs among all options, estimated at approximately $750,000 annually in 2028 through 2031. TXHES staffing is modeled at 50% of Option 2 levels; maintenance costs are similarly scaled. This lower cost profile reflects the reduced scope of a reporting-only solution.

However, Option 4 generates no applicant fee revenue because it does not provide a centralized application service. The entire cost must be funded through state appropriations or other sources, resulting in a five-year net cost of approximately $4.8 million with no revenue offset. While individual-year costs are predictable, the absence of a self-funding mechanism creates long-term sustainability risk.

F.4 Minimizes the impact of fees and related costs on applicants, particularly first-generation and financially constrained students	**High**

Option 4 imposes no centralized applicant fees because it does not provide a centralized application service. Applicants continue to use existing institutional application processes and pay only those fees already established by individual programs. From an applicant cost perspective, this is the most favorable option. There is no additional fee burden, no fee escalation risk, and no layering of centralized fees on top of existing institutional costs. The tradeoff is that applicants also do not receive the benefits that a centralized application service could provide, such as reduced duplication, consolidated data entry, or expanded visibility into program quality and available program seats.

F.5 Extent to which costs are equitably distributed and aligned with ability to pay and commensurate with anticipated benefits (e.g., small vs. large institutions)	**Low**

Option 4 requires all institutions to develop and maintain data feeds to the TXHES reporting warehouse regardless of size, IT capacity, or current system maturity. Because there is no centralized application platform to provide shared infrastructure or reduce individual institutional burden, each program must invest in data extraction, formatting, validation, and transmission processes independently.

This distributed burden falls disproportionately on smaller programs and community colleges with limited IT resources. Larger institutions with dedicated IT staff and established data infrastructure can more readily absorb this requirement. The benefits of the reporting warehouse (statewide analytics, policy visibility) accrue primarily to TXHES and the state rather than to individual institutions, creating a misalignment between who bears the cost and who receives the benefit.

F.6 Minimizes direct financial costs to institutions and nursing programs, including system fees, subscription charges, per-application costs, and implementation expenses, particularly for small programs and financially-constrained institutions	**Low**

Option 4 imposes the broadest institutional cost burden because every nursing program in the state must develop and maintain a data feed to the TXHES reporting warehouse. There

is no centralized application platform to absorb data collection, formatting, or transmission functions. Each institution must build these capabilities independently. Budget estimates model TXHES operational staffing at 50% of Option 2 (to oversee and support data transfer operations), but institutional costs for data feed development are not included in the estimated TXHES budget used for this study because they are borne by each institution individually and will vary by institution.

This represents a potentially significant unfunded mandate, particularly for smaller programs and community colleges. Unlike Options 1 and 2, where a centralized platform provides shared infrastructure, Option 4 distributes the technology development burden entirely to institutions without providing corresponding operational efficiencies.

F.7 Minimizes fees and related costs (including transitionary costs) and net change in institutional administrative costs, accounting for both efficiencies and new workload	**Low**

Option 4 creates net new administrative costs for all institutions without providing corresponding efficiency gains. Every program must develop, validate, and maintain a data feed to the TXHES reporting warehouse, representing a pure addition to existing workload. Unlike the CAS-based options, there is no centralized platform to reduce document collection, applicant tracking, or communication burden for admissions staff.

The net change in institutional administrative costs is unambiguously negative (i.e., costs increase) because institutions gain no operational efficiencies from the reporting warehouse. The warehouse serves statewide analytics and policy goals, but its benefits are not realized at the institutional level. Institutions continue to manage their own admissions processes independently while also fulfilling new reporting requirements.

F.8 Minimizes exposure to pricing escalation, transaction-based fees, and long-term vendor lock-in	**High**

Option 4 minimizes vendor lock-in because the reporting warehouse is state-owned and state-operated. TXHES controls the data model, reporting tools, and access policies without vendor dependency. There are no applicant fees, transaction-based charges, or vendor-imposed escalation mechanisms.

The primary cost exposure is to standard technology market dynamics (cloud hosting rates, licensing fees) and state salary growth, all of which are manageable through normal budgetary processes. Institutions' own application platform costs are outside TXHES's control, but Option 4 does not create new vendor dependencies for the statewide reporting function.

F.9 Extent to which the cost structure reasonably supports HB 2851 goals (e.g., identifying unmet demand, improving seat utilization)	**Low**

Option 4's cost structure does not adequately support HB 2851 goals because it funds only a reporting warehouse without the applicant-facing centralized application service that is

the primary mechanism contemplated by the statute and Task Force Recommendation 8. The five-year total expense of approximately $4.8 million generates no applicant fee revenue, resulting in the second-largest net deficit.

While the reporting warehouse can support certain analytics and reporting objectives, it cannot deliver unique applicant identification, timely seat matching, or the applicant experience improvements that HB 2851 envisions. The cost structure therefore represents an investment in partial capability that does not justify the expenditure relative to the full scope of HB 2851 objectives.