



To: Senate Public Health and Welfare Committee  
Date: February 16, 2023  
From: Rachelle Colombo, Executive Director  
Re: SB 112; authorizing the independent practice of nursing for nurse anesthetists

The Kansas Medical Society respectfully requests your opposition to SB 112, which allows certified registered nurse anesthetists (CRNAs) to practice medicine without physician oversight or involvement. Specifically, the nurse anesthetist practice act is amended to strike current restrictions and requirements to work as an interdependent member of a physician-directed team. Additionally, the bill authorizes CRNAs to prescribe, procure, select, order and administer any drug “consistent with their education and qualifications”.

CRNAs are one of four categories of advanced practice registered nurses (APRN) and notably, have asked to be exempted from each of the proposals for independent practice that the broader APRN groups have brought to the legislature over the last dozen years. The CRNAs have a separate practice act that was established through careful deliberation in 2010. They currently serve in most every community, providing anesthesia care for surgical and other medical procedures that require anesthesia. They are not required to have direct physician supervision but are limited from initiating treatment and prescribing without physician oversight as this constitutes the independent practice of medicine by a non-physician.

Proponents have said they would like all APRNs to have the same privileges, but SB 112 goes further than what was passed by the legislature last year. HB 2280 removed the written prescribing protocol and allowed for the ordering of durable medical equipment by APRNs. But the legislature did not authorize APRNs to perform other medical acts such as the ordering of tests, performance of procedures or initiation of medical treatment. Though the CRNAs sought exemption from this law last year, if they now wish to have the same privileges, they should simply mirror that language in their practice act so that all categories of APRNs have the same statutory authority. This could be achieved by amending KSA 65-1158 with language *such as the following: an advanced practice registered nurse certified in the role of registered nurse anesthetist may prescribe, procure, select, order and administer any drug consistent with such licensee's education, certification and qualifications.*

Though the Kansas Medical Society does not support authorizing non-physicians to independently diagnose or prescribe medications for patients, we recognize the desire for CRNAs to have practice privileges which are consistent and commensurate with other categories of APRNs. This can be accomplished with the addition of language such as that suggested above.

KMS opposes SB 112 and respectfully requests your careful and consistent consideration of this legislation.

