

TESTIMONY OF TY TOWNSEND, CAA
HOUSE HEALTH AND HUMAN SERVICES COMMITTEE
ORAL PROPONENT REGARDING HB 2295
FEBRUARY 18, 2019

The Honorable Brenda Landwehr, Chair
Committee on Health and Human Services
Kansas House of Representatives
300 SW 10th
Topeka, KS 66612

Dear Representative Landwehr and members of the Kansas House Health and Human Services Committee,

I am writing to ask for your support of House Bill 2295 allowing licensure of Certified Anesthesiologist Assistants in Kansas.

I would like to share with you some of my history, how it is interwoven to Kansas, share a few backgrounds from other certified anesthesiologist assistants and their motivation to work in Kansas, and discuss what the anesthesia care team looks like when physician Anesthesiologist are supervising both CAAs and CRNAs

My great grandparents were German immigrants that settled in Kansas in the Phillips County area and my family has been here ever since. My parents both finished high school in Johnson County and I graduated from Shawnee Mission North before joining the Navy. Upon conclusion of the gulf war and four years of active duty service I returned to Kansas and completed my undergraduate education at Emporia State University where I majored in Biology. It was during this time that I met my wife, whose family goes back generations in Grant and Stanton County. Shortly after completion of undergraduate my, wife and I relocated to Cleveland Ohio so I could attend graduate school at Case Western Reserve University. Upon completion of my training I took a position with Gundersen Lutheran Medical Center in La Crosse, Wisconsin, which at the time, was as close as I could get to family. In 2005, when Missouri began incorporating CAAs in to the anesthesia care team, we relocated to Kansas City with our two children.

Mine is but one story and there are numerous Certified Anesthesiologist Assistants with strong connections to Kansas.

Rachel Luptak-Bayer is a CAA that lives in Overland Park and works at Children's Mercy Hospital in Kansas City who would like to have the ability to work at CMH in Overland Park.

John Stillings is a CAA. He graduated from Topeka West High School before completing his undergraduate degree at KU and then graduate school in Houston. He would like to see HB 2295 passed so he can return to Kansas and work.

His mom Cindy Stillings still lives here in Topeka and she too would like to see that become a reality.

Andy Cole is a CAA born and raised in Olathe, completed his AA training at UMKC and would like to find employment options in Kansas.

Spencer Jones was born in Kansas City and grew up in Kansas. After finishing his training at UMKC, he had to take a job in New Mexico because the Kansas City Missouri market didn't have any openings and Kansas isn't a option. He now works for Saint Luke's at the Plaza and would like to have the opportunity to work at the Saint Luke's South location.

Courtney Degner is a classmate of Spencer's. She too had to locate to New Mexico after graduation from UMKC. Courtney was born in Wichita, finished high school in Sedgwick, Kansas, undergraduate at Kansas State University. Her father is an Interventional Radiologist in Wichita and how special would it be for them to have the opportunity of working together, taking care of Kansans. Passage of HB 2295 allows that to be a possibility. Passage of HB 2295 makes that a reality for many families in Kansas.

Passage of HB 2295 is about allowing for an inclusive anesthesia care team where under the supervision of a physician Anesthesiologist, Certified Anesthesiologist Assistants and CRNAs are working side by side, interchangeably, providing proven safe anesthesia care to the people of Kansas. Passage of HB 2295 allows CRNAs to keep their exclusion of all other anesthesia providers in rural markets so there will be no change in those areas.

Integration of anesthesiologist assistants into the Anesthesia Care Team within individual groups or states seems to be an unnecessary anxiety causing experience for nurse anesthetists. Most of the opposition comes from those that have no or limited exposure working directly with CAAs. The negative rhetoric is unfortunately propagated without direct association.

The scope of CAA clinical practice is generally the same as that of nurse anesthetists on the Anesthesia Care Team. The local scope of practice of CAAs is usually defined by the following:

- The medically directing Anesthesiologist
- The hospital credentialing body
- The state's board of medicine
- Any applicable state statute or regulation.

CAAs may practice at any Veterans Affairs facility in all 50 states.

The federal Centers for Medicare and Medicaid Services (CMS) recognizes both Certified AAs and Certified Registered Nurse Anesthetists (CRNAs) as non-physician anesthesia providers. Similarly, commercial insurance payers make no distinction between the two anesthetist types with regard to payments for services provided under medical direction by a physician Anesthesiologist.

After 18 years of experience as a Certified Anesthesiologist Assistant, working within the Anesthesia Care Team with Physician supervision, interchangeably with my CRNA counterparts, I am happy to testify that it works. The care team model with CAAs works in 18 states including Washington DC and Guam, it has been working for almost 50 years and I ask for your support of HB 2295 in allowing it to work for Kansas.

Kind Regards,

Ty A Townsend,

Certified Anesthesiologist Assistant